

REPORT OF RECEIPTS AND DISBURSEMENTSFor An Authorized Committee
(Summary Page)

SECRETARY OF THE SENATE

00 JUL 18 AM 9:12

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Trent Lott for Mississippi		2. FEC IDENTIFICATION NUMBER C00219220
ADDRESS (number and street) ☐ Check if different than previously reported. P.O. Box 22824		
CITY, STATE and ZIP CODE Jackson, MS 39225	STATE/DISTRICT	
3. IS THIS REPORT AN AMENDMENT? ☐ YES ☒ NO		

4. TYPE OF REPORT

- ☐ April 15 Quarterly Report
- ☒ July 15 Quarterly Report
- ☐ October 15 Quarterly Report
- ☐ January 31 Year End Report
- ☐ July 31 Mid-Year Report (Non-election Year Only)
- ☐ 12-Day Pre-Election Report for the _____ (Type of Election)
election on _____ in the State of _____
- ☐ 30-Day Post-Election Report following the General Election
on _____ in the State of _____
- ☐ Termination Report
- This report contains activity for ☐ Primary Election ☒ General Election ☐ Special Election ☐ Runoff Election

SUMMARY

5. Covering Period <u>4/1/00</u> through <u>6/30/00</u>	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(a))	532,277.18	1,041,768.60
(b) Total Contribution Refunds (from Line 20(d))	1,690.00	31,779.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	530,587.18	1,009,989.60
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	328,937.04	996,417.53
(b) Total Offsets to Operating Expenditures (from Line 14)	10,151.41	10,844.04
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	318,785.63	985,573.49
8. Cash on Hand at Close of Reporting Period (from Line 87)	2,472,104.40	
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)		

For further information
contact:
Federal Election Commission
900 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

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 George A. Schloegel	Date 7/13/00
Signature of Treasurer <i>George A. Schloegel</i>	

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5487g.

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FEC FORM 3
(revised 4/87)

DETAILED SUMMARY PAGE

of Receipts and Disbursements
(Page 2, FEC FORM 3)

Name of Committee (in full) Trent Lott for Mississippi		Report Covering the Period: From: 04/01/00 To: 06/30/00	
I. RECEIPTS		COLUMN A Total This Period	COLUMN B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:			
(a) Individuals/Persons Other Than Political Committees			
(i) Itemized (use Schedule A) -----		107,106.33	
(ii) Unitemized -----		397,170.85	
(ii) Total of contributions from individuals -----		504,277.18	961,268.60
(b) Political Party Committees -----			
(c) Other Political Committees (such as PACs) -----		28,000.00	80,500.00
(d) The Candidate -----			
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(i), (b), (c) and (d)) -----		532,277.18	1,041,768.60
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES -----		63,905.17	63,905.17
13. LOANS:			
(a) Made or Guaranteed by the Candidate -----			
(b) All Other Loans -----			
(c) TOTAL LOANS (add 13(a) and (b)) -----			
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) -----		10,151.41	10,844.04
15. OTHER RECEIPTS (Dividends, Interest, etc.) -----		4,760.18	19,460.54
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15) -----		611,093.94	1,135,978.35
II. DISBURSEMENTS			
17. OPERATING EXPENDITURES -----		328,937.04	996,417.53
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES -----			
19. LOAN REPAYMENTS:			
(a) Of Loans Made or Guaranteed by the Candidate -----			
(b) Of All Other Loans -----			
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b)) -----			
20. REFUNDS OF CONTRIBUTIONS TO:			
(a) Individuals/Persons Other Than Political Committees -----		690.00	28,779.00
(b) Political Party Committees -----			
(c) Other Political Committees (such as PACs) -----		1,000.00	3,000.00
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c)) -----		1,690.00	31,779.00
21. OTHER DISBURSEMENTS -----		109,533.50	110,533.50
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21) -----		440,160.54	1,138,730.03

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD -----	\$ 2,301,171.00
24. TOTAL RECEIPTS THIS PERIOD (from Line 16) -----	\$ 611,093.94
25. SUBTOTAL (add Line 23 and Line 24) -----	\$ 2,912,264.94
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22) -----	\$ 440,160.54
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25) -----	\$ 2,472,104.40

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 1 OF 90
FOR LINE NUMBER
11(a)(1)

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

NAME OF COMMITTEE (in Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Information Requested Occupation Information Requested Aggregate Year-to-Date ->		
B. Full Name, Mailing Address and Zip Code Morgan Adams 1545 Wilshire Blvd. Ste. 700 Los Angeles, CA 90017 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Retired Information Requested Aggregate Year-to-Date ->	Date (month, day, year) 05/17/2003	Amount of Each Receipt this Period \$250.00
C. Full Name, Mailing Address and Zip Code Helen Alberty 12222 Blanco Road Apt. 1807 San Antonio, TX 78216-2116 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date ->	Date (month, day, year) 04/12/2000	Amount of Each Receipt this Period \$200.00
D. Full Name, Mailing Address and Zip Code Helen Alberty 12222 Blanco Road Apt. 1807 San Antonio, TX 78216-2116 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date ->	Date (month, day, year) 06/09/2000	Amount of Each Receipt this Period \$200.00
E. Full Name, Mailing Address and Zip Code Colleen Amorello 2 Bruce Street Grafton, MA 01519-1131 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date ->	Date (month, day, year) 05/01/2000	Amount of Each Receipt this Period \$100.00
F. Full Name, Mailing Address and Zip Code Colleen Amorello 2 Bruce Street Grafton, MA 01519-1131 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date ->	Date (month, day, year) 05/23/2000	Amount of Each Receipt this Period \$50.00
G. Full Name, Mailing Address and Zip Code O John Anderson 380 Island Creek Drive Vero Beach, FL 32963-3305 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer INVESTMENT Occupation Retired Aggregate Year-to-Date ->	Date (month, day, year) 05/10/2000	Amount of Each Receipt this Period \$250.00 (Refunded \$1,170 on 7/15/00)

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary PagePAGE 2 OF 90
FOR LINE NUMBER
11(a)(1)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code O John Anderson 380 Island Creek Drive Vero Beach, FL 32963-3305 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer INVESTMENT Occupation Retired Aggregate Year-to-Date ->	Date (month, day, year) 05/19/200 (Refunded \$1,170 on 7/15/00) \$2170.00	Amount of Each Receipt this Period \$480.00
B. Full Name, Mailing Address and Zip Code Randolph Antonsen 109-plantation Drive Spartanburg, SC 29302 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date ->	Date (month, day, year) 05/19/200 \$250.00	Amount of Each Receipt this Period \$100.00
C. Full Name, Mailing Address and Zip Code Robert Asprey 1019 - A Old Monrovia Road Suite 109 Huntsville, AL 35806- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date ->	Date (month, day, year) 06/30/200 \$1000.00	Amount of Each Receipt this Period \$1000.00
D. Full Name, Mailing Address and Zip Code William Bacon 106 Bay Shore Drive Toms River, NJ 08753-6245 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date ->	Date (month, day, year) 04/17/200 \$315.00	Amount of Each Receipt this Period \$15.00
E. Full Name, Mailing Address and Zip Code James Bailey 87 Breakers Lane Ridgeland, MS 39157- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Occupation Doctor Aggregate Year-to-Date ->	Date (month, day, year) 06/01/200 \$1000.00	Amount of Each Receipt this Period \$1000.00
F. Full Name, Mailing Address and Zip Code Edna Baker 207 S. Gorman Street Blue Earth, MN 56013-2540 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date ->	Date (month, day, year) 05/25/200 \$125.00	Amount of Each Receipt this Period \$25.00
G. Full Name, Mailing Address and Zip Code Edna Baker 207 S. Gorman Street Blue Earth, MN 56013-2540 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date ->	Date (month, day, year) 06/14/200 \$225.00	Amount of Each Receipt this Period \$100.00

SUBTOTAL of Receipts This Page (optional)

\$2720.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE	OF
3	90
FOR LINE NUMBER	
11(a)(1)	

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NAME OF COMMITTEE (in Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Dorothy Bambauer 19166 Kettlersville Road New Knoxville, OH 45871-9510 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$50.00
B. Full Name, Mailing Address and Zip Code Dorothy Bambauer 19166 Kettlersville Road New Knoxville, OH 45871-9510 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> \$350.00	Date (month, day, year) 05/19/200	Amount of Each Receipt this Period \$50.00
C. Full Name, Mailing Address and Zip Code Dorothy Bambauer 19166 Kettlersville Road New Knoxville, OH 45871-9510 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> \$400.00	Date (month, day, year) 06/01/200	Amount of Each Receipt this Period \$50.00
D. Full Name, Mailing Address and Zip Code Dorothy Bambauer 19166 Kettlersville Road New Knoxville, OH 45871-9510 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> \$450.00	Date (month, day, year) 06/07/200	Amount of Each Receipt this Period \$50.00
E. Full Name, Mailing Address and Zip Code Dorothy Bambauer 19166 Kettlersville Road New Knoxville, OH 45871-9510 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> \$475.00	Date (month, day, year) 06/07/200	Amount of Each Receipt this Period \$25.00
F. Full Name, Mailing Address and Zip Code Dorothy Bambauer 19166 Kettlersville Road New Knoxville, OH 45871-9510 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> \$575.00	Date (month, day, year) 06/28/200	Amount of Each Receipt this Period \$100.00
G. Full Name, Mailing Address and Zip Code Dorothy Bambauer 19166 Kettlersville Road New Knoxville, OH 45871-9510 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> \$625.00	Date (month, day, year) 06/28/200	Amount of Each Receipt this Period \$50.00

SUBTOTAL of Receipts This Page (optional)

\$375.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 05
4 90
FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Pauline Bankard 35 Davis Circle Hanover, PA 17331-9329 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$225.00	Date (month, day, year) 04/19/200	Amount of Each Receipt this Period \$25.00
B. Full Name, Mailing Address and Zip Code Pauline Bankard 35 Davis Circle Hanover, PA 17331-9329 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 06/01/200	Amount of Each Receipt this Period \$75.00
C. Full Name, Mailing Address and Zip Code Louise Barbeck 3301 Greenbrier Drive Dallas, TX 75225-4818 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 05/30/200	Amount of Each Receipt this Period \$100.00
D. Full Name, Mailing Address and Zip Code Stone Barefield 100 Beverly Hills Road Hattiesburg, MS 39401- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Attorney Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 04/25/200	Amount of Each Receipt this Period \$250.00
E. Full Name, Mailing Address and Zip Code Shipley Bayless 4549 Brighton Road Corona Del Mar, CA 92625-3101 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$200.00	Date (month, day, year) 04/12/200	Amount of Each Receipt this Period \$100.00
F. Full Name, Mailing Address and Zip Code Shipley Bayless 4549 Brighton Road Corona Del Mar, CA 92625-3101 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 05/17/200	Amount of Each Receipt this Period \$100.00
G. Full Name, Mailing Address and Zip Code Shipley Bayless 4549 Brighton Road Corona Del Mar, CA 92625-3101 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$400.00	Date (month, day, year) 05/19/200	Amount of Each Receipt this Period \$100.00

SUBTOTAL of Receipts This Page (optional)

\$750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each delinquent of the
Detailed Summary PagePAGE 5 OF 90
FOR LINE NUMBER 11 | a | 11

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Elizabeth Bedell Rr 5 Box 5473 Towanda, PA 18848-8821 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$200.00	Date (month, day, year) 04/27/200	Amount of Each Receipt this Period \$50.00
B. Full Name, Mailing Address and Zip Code Elizabeth Bedell Rr 5 Box 5473 Towanda, PA 18848-8821 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$275.00	Date (month, day, year) 06/28/200	Amount of Each Receipt this Period \$75.00
C. Full Name, Mailing Address and Zip Code Tim Berry 4 Canebrake Boulevard Hattiesburg, MS 39402- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Aventis Pharmaceuticals Occupation Sales Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 04/18/200	Amount of Each Receipt this Period \$250.00
D. Full Name, Mailing Address and Zip Code H Bixby 16351 Rotunda Dr Ste 357 Dearborn, MI 48120-1159 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 05/23/200	Amount of Each Receipt this Period \$100.00
E. Full Name, Mailing Address and Zip Code J Blanchard 4837 Metropolitan Drive New Orleans, LA 70126-4739 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$160.00	Date (month, day, year) 05/05/200	Amount of Each Receipt this Period \$50.00
F. Full Name, Mailing Address and Zip Code J Blanchard 4837 Metropolitan Drive New Orleans, LA 70126-4739 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$175.00	Date (month, day, year) 05/23/200	Amount of Each Receipt this Period \$15.00
G. Full Name, Mailing Address and Zip Code J Blanchard 4837 Metropolitan Drive New Orleans, LA 70126-4739 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$210.00	Date (month, day, year) 05/24/200	Amount of Each Receipt this Period \$35.00

SUBTOTAL of Receipts This Page (optional)

\$575.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate entry field
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Detailed Summary Page

PAGE	OF
6	90
FOR LINE NUMBER	
11(a)(i)	

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code A Blanchat 77377 Highway 21 Covington, LA 70435-4015 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$210.00	Date (month, day, year) 06/14/200	Amount of Each Receipt this Period \$105.00
B. Full Name, Mailing Address and Zip Code Jimmy Blessitt 121 Baker Street Indianola, MS 38751- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 06/30/200	Amount of Each Receipt this Period \$500.00
C. Full Name, Mailing Address and Zip Code Gerald Bodman 280 White Hall Road Bloomsburg, PA 17815 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired-farmer Aggregate Year-to-Date -> \$100.00	Date (month, day, year) 05/10/200	Amount of Each Receipt this Period \$100.00
D. Full Name, Mailing Address and Zip Code Gerald Bodman 280 White Hall Road Bloomsburg, PA 17815 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired-farmer Aggregate Year-to-Date -> \$175.00	Date (month, day, year) 06/07/200	Amount of Each Receipt this Period \$75.00
E. Full Name, Mailing Address and Zip Code Gerald Bodman 280 White Hall Road Bloomsburg, PA 17815 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired-farmer Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 06/16/200	Amount of Each Receipt this Period \$75.00
F. Full Name, Mailing Address and Zip Code Gerald Bodman 280 White Hall Road Bloomsburg, PA 17815 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired-farmer Aggregate Year-to-Date -> \$350.00	Date (month, day, year) 06/30/200	Amount of Each Receipt this Period \$100.00
G. Full Name, Mailing Address and Zip Code Frank Booth Monroe Park Towers 520 W Franklin St #707 Richmond, VA 23220-4965 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer BANK OF AMERICA Occupation Retired Aggregate Year-to-Date -> \$270.00	Date (month, day, year) 05/05/200	Amount of Each Receipt this Period \$15.00

SUBTOTAL of Receipts This Page (optional)

\$970.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary PagePAGE 7 OF 90
FOR LINE NUMBER
11(a)(1)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Frank Booth Monroe Park Towers 520 W Franklin St #707 Richmond, VA 23220-4965 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer BANK OF AMERICA Occupation Retired Aggregate Year-to-Date -> \$278.00	Date (month, day, year) 05/19/200	Amount of Each Receipt this Period \$8.00
B. Full Name, Mailing Address and Zip Code Frank Booth Monroe Park Towers 520 W Franklin St #707 Richmond, VA 23220-4965 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer BANK OF AMERICA Occupation Retired Aggregate Year-to-Date -> \$293.00	Date (month, day, year) 06/28/200	Amount of Each Receipt this Period \$15.00
C. Full Name, Mailing Address and Zip Code Silvene Bracalente 4886 Harvest Lane Zionsville, PA 18092-2062 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$150.00	Date (month, day, year) 04/27/200	Amount of Each Receipt this Period \$50.00
D. Full Name, Mailing Address and Zip Code Silvene Bracalente 4886 Harvest Lane Zionsville, PA 18092-2062 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 05/24/200	Amount of Each Receipt this Period \$100.00
E. Full Name, Mailing Address and Zip Code Silvene Bracalente 4886 Harvest Lane Zionsville, PA 18092-2062 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 05/30/200	Amount of Each Receipt this Period \$50.00
F. Full Name, Mailing Address and Zip Code Silvene Bracalente 4886 Harvest Lane Zionsville, PA 18092-2062 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$375.00	Date (month, day, year) 06/28/200	Amount of Each Receipt this Period \$75.00
G. Full Name, Mailing Address and Zip Code Glenn Brant 3134 Teakwood Place Midland, TX 79705 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Occupation Consultant Aggregate Year-to-Date -> \$350.00	Date (month, day, year) 04/19/200	Amount of Each Receipt this Period \$100.00

SUBTOTAL of Receipts This Page (optional)

\$398.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 8 OF 90
FOR LINE NUMBER
11(a)(1)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Marjorie Brawley Post Office Box 86 La Barge, WY 83123-0086 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date ->	Date (month, day, year) 06/08/200 06/08/200	Amount of Each Receipt this Period \$200.33 \$200.33
B. Full Name, Mailing Address and Zip Code L Bredenhof 1010 American Eagle Blvd, 417 Sun City Center, FL 33573-5272 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date ->	Date (month, day, year) 04/19/200 04/19/200	Amount of Each Receipt this Period \$50.00 \$50.00
C. Full Name, Mailing Address and Zip Code L Bredenhof 1010 American Eagle Blvd, 417 Sun City Center, FL 33573-5272 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date ->	Date (month, day, year) 05/17/200 05/17/200	Amount of Each Receipt this Period \$100.00 \$150.00
D. Full Name, Mailing Address and Zip Code L Bredenhof 1010 American Eagle Blvd, 417 Sun City Center, FL 33573-5272 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date ->	Date (month, day, year) 06/07/200 06/07/200	Amount of Each Receipt this Period \$50.00 \$200.00
E. Full Name, Mailing Address and Zip Code L Bredenhof 1010 American Eagle Blvd, 417 Sun City Center, FL 33573-5272 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date ->	Date (month, day, year) 06/21/200 06/21/200	Amount of Each Receipt this Period \$50.00 \$250.00
F. Full Name, Mailing Address and Zip Code Leslie Brooks 8 Club View Drive Fairmont, WV 26554-1212 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date ->	Date (month, day, year) 04/07/200 04/07/200	Amount of Each Receipt this Period \$100.00 \$150.00
G. Full Name, Mailing Address and Zip Code Leslie Brooks 8 Club View Drive Fairmont, WV 26554-1212 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date ->	Date (month, day, year) 06/08/200 06/08/200	Amount of Each Receipt this Period \$150.00 \$300.00

SUBTOTAL of Receipts This Page (optional)

\$700.33

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

 PAGE 9 OF 90
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Louise Brown 465 Broyles Ln Bristol, TN 37620-0715 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> \$600.00	Date (month, day, year) 05/15/200	Amount of Each Receipt this Period \$300.00
B. Full Name, Mailing Address and Zip Code Louise Brown 465 Broyles Ln Bristol, TN 37620-0715 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> \$800.00	Date (month, day, year) 06/14/200	Amount of Each Receipt this Period \$200.00
C. Full Name, Mailing Address and Zip Code Sally Brown 58 10th Street Niles, OH 44446-4365 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> \$525.00	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$25.00
D. Full Name, Mailing Address and Zip Code Sally Brown 58 10th Street Niles, OH 44446-4365 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> \$650.00	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$125.00
E. Full Name, Mailing Address and Zip Code Sally Brown 58 10th Street Niles, OH 44446-4365 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> \$665.00	Date (month, day, year) 05/30/200	Amount of Each Receipt this Period \$15.00
F. Full Name, Mailing Address and Zip Code Sally Brown 58 10th Street Niles, OH 44446-4365 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> \$790.00	Date (month, day, year) 06/12/200	Amount of Each Receipt this Period \$125.00
G. Full Name, Mailing Address and Zip Code Sally Brown 58 10th Street Niles, OH 44446-4365 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> \$915.00	Date (month, day, year) 06/16/200	Amount of Each Receipt this Period \$125.00

SUBTOTAL of Receipts This Page (optional)

\$915.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 10 OF 90
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Emerson Bullard 23287 Blue Water Circle, #all Oboca Raton, FL 33433 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$210.00	Date (month, day, year) 04/19/200	Amount of Each Receipt this Period \$50.00
B. Full Name, Mailing Address and Zip Code Emerson Bullard 23287 Blue Water Circle, #all Oboca Raton, FL 33433 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$260.00	Date (month, day, year) 05/12/200	Amount of Each Receipt this Period \$50.00
C. Full Name, Mailing Address and Zip Code Emerson Bullard 23287 Blue Water Circle, #all Oboca Raton, FL 33433 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 05/19/200	Amount of Each Receipt this Period \$40.00
D. Full Name, Mailing Address and Zip Code Emerson Bullard 23287 Blue Water Circle, #all Oboca Raton, FL 33433 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$340.00	Date (month, day, year) 06/30/200	Amount of Each Receipt this Period \$40.00
E. Full Name, Mailing Address and Zip Code Ethel Bultman 701 Belmont Drive Jefferson City, MO 65109-0719 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 04/24/200	Amount of Each Receipt this Period \$100.00
F. Full Name, Mailing Address and Zip Code Ethel Bultman 701 Belmont Drive Jefferson City, MO 65109-0719 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$600.00	Date (month, day, year) 06/09/200	Amount of Each Receipt this Period \$100.00
G. Full Name, Mailing Address and Zip Code Idola Burch 1130 Highland Avenue Hamilton, OH 45013-4655 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 06/21/200	Amount of Each Receipt this Period \$100.00

SUBTOTAL of Receipts This Page (optional)

\$480.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 11 OF 90
FOR LINE NUMBER
11(a)(1)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Mollie Burkett 202 N Vine St Somerset, KY 42501-1650 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$150.00	Date (month, day, year) 05/15/200	Amount of Each Receipt this Period \$100.00
B. Full Name, Mailing Address and Zip Code Mollie Burkett 202 N Vine St Somerset, KY 42501-1650 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 06/12/200	Amount of Each Receipt this Period \$150.00
C. Full Name, Mailing Address and Zip Code Ellen Callis 6406 Brenda Drive Apopka, FL 32703-1811 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$400.00	Date (month, day, year) 05/17/200	Amount of Each Receipt this Period \$150.00
D. Full Name, Mailing Address and Zip Code Ellen Callis 6406 Brenda Drive Apopka, FL 32703-1811 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$475.00	Date (month, day, year) 05/19/200	Amount of Each Receipt this Period \$75.00
E. Full Name, Mailing Address and Zip Code Ellen Callis 6406 Brenda Drive Apopka, FL 32703-1811 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$775.00	Date (month, day, year) 06/01/200	Amount of Each Receipt this Period \$300.00
F. Full Name, Mailing Address and Zip Code Joe Campbell 225 West Canebroke Boulevard Hattiesburg, MS 39402- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Hattiesburg Clinic Occupation Physician Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 04/18/200	Amount of Each Receipt this Period \$250.00
G. Full Name, Mailing Address and Zip Code Eugene Carothers 71 Tidewater Road Hattiesburg, MS 39402- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Southgate Realty, LLC Occupation Commercial Broker Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 04/25/200	Amount of Each Receipt this Period \$250.00

SUBTOTAL of Receipts This Page (optional)

\$1275.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 12 OF 90
FOR LINE NUMBER
11(a)(1)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Luther Carr The Village Golf & Country Clu B6010 Montgomery Corner San Jose, CA 95135-1431 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer None Occupation Retired Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 05/10/200	Amount of Each Receipt this Period \$100.00
B. Full Name, Mailing Address and Zip Code Luther Carr The Village Golf & Country Clu B6010 Montgomery Corner San Jose, CA 95135-1431 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer None Occupation Retired Aggregate Year-to-Date -> \$375.00	Date (month, day, year) 06/09/200	Amount of Each Receipt this Period \$125.00
C. Full Name, Mailing Address and Zip Code Georgia Catrini 5301 Fort Ave #8 777 Main Street Lynchburg, VA 24502-1642 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$150.00	Date (month, day, year) 04/12/200	Amount of Each Receipt this Period \$50.00
D. Full Name, Mailing Address and Zip Code Georgia Catrini 5301 Fort Ave #8 777 Main Street Lynchburg, VA 24502-1642 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$190.00	Date (month, day, year) 04/12/200	Amount of Each Receipt this Period \$40.00
E. Full Name, Mailing Address and Zip Code Georgia Catrini 5301 Fort Ave #8 777 Main Street Lynchburg, VA 24502-1642 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$215.00	Date (month, day, year) 05/17/200	Amount of Each Receipt this Period \$25.00
F. Full Name, Mailing Address and Zip Code Georgia Catrini 5301 Fort Ave #8 777 Main Street Lynchburg, VA 24502-1642 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$255.00	Date (month, day, year) 05/18/200	Amount of Each Receipt this Period \$40.00
G. Full Name, Mailing Address and Zip Code Georgia Catrini 5301 Fort Ave #8 777 Main Street Lynchburg, VA 24502-1642 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$305.00	Date (month, day, year) 05/24/200	Amount of Each Receipt this Period \$50.00

SUBTOTAL of Receipts This Page (optional)

\$430.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 13 OF 90
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Horace Cheney 5195 Davidson Street, S.e. Albany, OR 97321-7179 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 05/24/200	Amount of Each Receipt this Period \$50.00
B. Full Name, Mailing Address and Zip Code Edmund Childs 71 Morgan Ridge Glenmeadow Longmeadow, MA 01106-1757 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$400.00	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$100.00
C. Full Name, Mailing Address and Zip Code Edmund Childs 71 Morgan Ridge Glenmeadow Longmeadow, MA 01106-1757 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 05/19/200	Amount of Each Receipt this Period \$100.00
D. Full Name, Mailing Address and Zip Code Edmund Childs 71 Morgan Ridge Glenmeadow Longmeadow, MA 01106-1757 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$600.00	Date (month, day, year) 06/14/200	Amount of Each Receipt this Period \$100.00
E. Full Name, Mailing Address and Zip Code Wan Chin 50 N 21st St. Las Vegas, NV 89101-5064 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$200.00	Date (month, day, year) 04/12/200	Amount of Each Receipt this Period \$100.00
F. Full Name, Mailing Address and Zip Code Wan Chin 50 N 21st St. Las Vegas, NV 89101-5064 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 06/07/200	Amount of Each Receipt this Period \$100.00
G. Full Name, Mailing Address and Zip Code Richard Chotard 180 Kirkwood Place Jackson, MS 39211- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Occupation Investor Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 06/30/200	Amount of Each Receipt this Period \$1000.00

SUBTOTAL of Receipts This Page (optional)

\$1550.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule (a)
for each category of the
Detailed Summary PagePAGE 14 OF 90
FOR LINE NUMBER 11(a) (i)

Any information reported on 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)

Trent Loti For Mississippi

A. Full Name, Mailing Address and Zip Code Dorothy Chournos 1865 E. Main St. Tremonton, UT 84337-8733 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$235.00	Date (month, day, year) 04/27/200	Amount of Each Receipt this Period \$15.00
B. Full Name, Mailing Address and Zip Code Dorothy Chournos 1865 E. Main St. Tremonton, UT 84337-8733 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$275.00	Date (month, day, year) 06/28/200	Amount of Each Receipt this Period \$40.00
C. Full Name, Mailing Address and Zip Code George Clark 1702 Champion Circle SE Huntsville, AL 35802- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Radiance Technologies Occupation President Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 04/07/200	Amount of Each Receipt this Period \$250.00
D. Full Name, Mailing Address and Zip Code Leola Clark 100 Thompson Drive S. E. #306 Cedar Rapids, IA 52403-1738 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$160.00	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$25.00
E. Full Name, Mailing Address and Zip Code Leola Clark 100 Thompson Drive S. E. #306 Cedar Rapids, IA 52403-1738 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$190.00	Date (month, day, year) 05/10/200	Amount of Each Receipt this Period \$30.00
F. Full Name, Mailing Address and Zip Code Leola Clark 100 Thompson Drive S. E. #306 Cedar Rapids, IA 52403-1738 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$205.00	Date (month, day, year) 05/23/200	Amount of Each Receipt this Period \$15.00
G. Full Name, Mailing Address and Zip Code Leola Clark 100 Thompson Drive S. E. #306 Cedar Rapids, IA 52403-1738 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$230.00	Date (month, day, year) 06/16/200	Amount of Each Receipt this Period \$25.00

SUBTOTAL of Receipts This Page (optional)

\$400.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 15 OF 90
FOR LINE NUMBER 11(a)11

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code R. Clark 3 Cherokee Circle Hattiesburg, MS 39401- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer None Occupation Retired Aggregate Year-to-Date ->	Date (month, day, year) 04/18/200 Amount of Each Receipt this Period \$300.00 Aggregate Year-to-Date ->	Amount of Each Receipt this Period \$300.00
B. Full Name, Mailing Address and Zip Code Alden Clausen 35 Aster Avenue Hillsborough, CA 94010-6442 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Occupation Personal Invest Aggregate Year-to-Date ->	Date (month, day, year) 04/12/200 Amount of Each Receipt this Period \$200.00 Aggregate Year-to-Date ->	Amount of Each Receipt this Period \$200.00
C. Full Name, Mailing Address and Zip Code Alden Clausen 35 Aster Avenue Hillsborough, CA 94010-6442 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Occupation Personal Invest Aggregate Year-to-Date ->	Date (month, day, year) 05/15/200 Amount of Each Receipt this Period \$100.00 Aggregate Year-to-Date ->	Amount of Each Receipt this Period \$100.00
D. Full Name, Mailing Address and Zip Code Daw Claxton 213 S Cedar Street Apt. 13 213 S. Cedar Street Elizabethton, TN 37643-3298 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer None Occupation Retired-us Army Aggregate Year-to-Date ->	Date (month, day, year) 04/12/200 Amount of Each Receipt this Period \$100.00 Aggregate Year-to-Date ->	Amount of Each Receipt this Period \$100.00
E. Full Name, Mailing Address and Zip Code Fredericka Cobey 4000 Cathedral Ave Nw Washington, DC 20016-5250 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer None Occupation Retired Aggregate Year-to-Date ->	Date (month, day, year) 05/10/200 Amount of Each Receipt this Period \$100.00 Aggregate Year-to-Date ->	Amount of Each Receipt this Period \$100.00
F. Full Name, Mailing Address and Zip Code Fredericka Cobey 4000 Cathedral Ave Nw Washington, DC 20016-5250 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer None Occupation Retired Aggregate Year-to-Date ->	Date (month, day, year) 06/16/200 Amount of Each Receipt this Period \$100.00 Aggregate Year-to-Date ->	Amount of Each Receipt this Period \$100.00
G. Full Name, Mailing Address and Zip Code Fredericka Cobey 4000 Cathedral Ave Nw Washington, DC 20016-5250 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer None Occupation Retired Aggregate Year-to-Date ->	Date (month, day, year) 06/16/200 Amount of Each Receipt this Period \$50.00 Aggregate Year-to-Date ->	Amount of Each Receipt this Period \$50.00

SUBTOTAL of Receipts This Page (optional)

\$950.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 16 OF 90
FOR LINE NUMBER
11(a)(1)

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NAME OF COMMITTEE (in full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Mary Cockerham 3409 Southaven Hattiesburg, MS 39401- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer York and Cockerham Occupation Oral Surgeon Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 04/25/200	Amount of Each Receipt this Period \$300.00
B. Full Name, Mailing Address and Zip Code Milam Cotten 210 6th Avenue Hattiesburg, MS 39401- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer None Occupation Homemaker Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 04/25/200	Amount of Each Receipt this Period \$250.00
C. Full Name, Mailing Address and Zip Code Clint Cox P.O. Box 702280 3102 East 85th Place Tulsa, OK 74170 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer WAREHOUSE MARKET Occupation Retail Grocery Aggregate Year-to-Date -> \$350.00	Date (month, day, year) 05/24/200	Amount of Each Receipt this Period \$250.00
D. Full Name, Mailing Address and Zip Code Jeanette Craig 1066 10th Ave. Sacramento, CA 95818-4007 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$750.00	Date (month, day, year) 06/21/200	Amount of Each Receipt this Period \$500.00
E. Full Name, Mailing Address and Zip Code Ruth Crockett 1203 1st Ave E Big Stone Gap, VA 24219-3161 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer TEACHER Occupation Retired Aggregate Year-to-Date -> \$400.00	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$200.00
F. Full Name, Mailing Address and Zip Code A. Cromartie 115 Bedford Road Hattiesburg, MS 39402- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Women's Clinic of Hattiesburg Occupation Physician Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 05/05/200	Amount of Each Receipt this Period \$250.00
G. Full Name, Mailing Address and Zip Code Alfreda Cullinan 1450 Post St Apt 908 San Francisco, CA 94109-6500 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$450.00	Date (month, day, year) 05/15/200	Amount of Each Receipt this Period \$250.00

SUBTOTAL of Receipts This Page (optional)

\$2000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 17 OF 90
FOR LINE NUMBER
11 | a | i |

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Alfreda Cullinan 1450 Post St Apt 908 San Francisco, CA 94109-6500 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$750.00	Date (month, day, year) 06/09/200	Amount of Each Receipt this Period \$300.00
B. Full Name, Mailing Address and Zip Code Murray Cunningham 46 Tokalon Place Metairie, LA 70001-3020 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired/retired Aggregate Year-to-Date -> \$350.00	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$100.00
C. Full Name, Mailing Address and Zip Code Murray Cunningham 46 Tokalon Place Metairie, LA 70001-3020 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired/retired Aggregate Year-to-Date -> \$450.00	Date (month, day, year) 05/30/200	Amount of Each Receipt this Period \$100.00
D. Full Name, Mailing Address and Zip Code Murray Cunningham 46 Tokalon Place Metairie, LA 70001-3020 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired/retired Aggregate Year-to-Date -> \$550.00	Date (month, day, year) 06/14/200	Amount of Each Receipt this Period \$100.00
E. Full Name, Mailing Address and Zip Code Murray Cunningham 46 Tokalon Place Metairie, LA 70001-3020 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired/retired Aggregate Year-to-Date -> \$650.00	Date (month, day, year) 06/16/200	Amount of Each Receipt this Period \$100.00
F. Full Name, Mailing Address and Zip Code T Halter Cunningham 5215 Norway Drive Chevy Chase, MD 20815-6673 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer NAUTICON IMAGIN Occupation Exec (chm.) Aggregate Year-to-Date -> \$400.00	Date (month, day, year) 04/27/200	Amount of Each Receipt this Period \$250.00
G. Full Name, Mailing Address and Zip Code Walter Cutter 1 Colonial Dr New Hartford, NY 13413-2104 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Occupation Housewife Aggregate Year-to-Date -> \$170.00	Date (month, day, year) 05/05/200	Amount of Each Receipt this Period \$25.00

SUBTOTAL of Receipts This Page (optional)

\$975.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 10 OF 90
FOR LINE NUMBER 11 | a | i |

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Walter Cutter 1 Colonial Dr New Hartford, NY 13413-2104 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Occupation Housewife Aggregate Year-to-Date -> \$245.00	Date (month, day, year) 05/24/200	Amount of Each Receipt this Period \$75.00
B. Full Name, Mailing Address and Zip Code Odellia Daniel 306 N. Middle Street Cape Girardeau, MO 63701-5632 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> \$155.00	Date (month, day, year) 04/27/200	Amount of Each Receipt this Period \$34.00
C. Full Name, Mailing Address and Zip Code Odellia Daniel 306 N. Middle Street Cape Girardeau, MO 63701-5632 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> \$184.00	Date (month, day, year) 05/03/200	Amount of Each Receipt this Period \$25.00
D. Full Name, Mailing Address and Zip Code Odellia Daniel 306 N. Middle Street Cape Girardeau, MO 63701-5632 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> \$209.00	Date (month, day, year) 06/12/200	Amount of Each Receipt this Period \$25.00
E. Full Name, Mailing Address and Zip Code Odellia Daniel 306 N. Middle Street Cape Girardeau, MO 63701-5632 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> \$234.00	Date (month, day, year) 06/26/200	Amount of Each Receipt this Period \$25.00
F. Full Name, Mailing Address and Zip Code Hull Davis 3008 Lake Terrace Drive Corinth, MS 38834- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Occupation Bankers Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 04/07/200	Amount of Each Receipt this Period \$250.00
G. Full Name, Mailing Address and Zip Code Richard Davis Po Box 446 Unalaska, AK 99685-0446 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer OWNALASHKA Occupation CEO Aggregate Year-to-Date -> \$200.00	Date (month, day, year) 05/30/200	Amount of Each Receipt this Period \$50.00

SUBTOTAL of Receipts This Page (optional)

\$484.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule (a)
for each category of the
Detailed Summary PagePAGE 19 OF 90
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Richard Davis Po Box 448 Unalaska, AK 99685-0448 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer OWNALASHKA Occupation CEO Aggregate Year-to-Date -> \$275.00	Date (month, day, year) 06/16/200	Amount of Each Receipt this Period \$75.00
B. Full Name, Mailing Address and Zip Code Raymond Dearman Five Bellwood Drive Hattiesburg, MS 39402- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Occupation Civil Engineer Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 04/25/200	Amount of Each Receipt this Period \$250.00
C. Full Name, Mailing Address and Zip Code Judith Delapa 1842 Cascade Farms Drive, Se Grand Rapids, MI 49546 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer HIGH-IMPACT MAR Occupation Business Owner Aggregate Year-to-Date -> \$450.00	Date (month, day, year) 06/07/200	Amount of Each Receipt this Period \$250.00
D. Full Name, Mailing Address and Zip Code John Dennis 915 Cornelia Drive Huntsville, AL 35802- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Radiance Technologies Occupation Executive Vice President Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 04/07/200	Amount of Each Receipt this Period \$250.00
E. Full Name, Mailing Address and Zip Code Robert Dolsen 7006 Scenic Drive Yakima, WA 98908-1045 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$200.00	Date (month, day, year) 04/12/200	Amount of Each Receipt this Period \$200.00
F. Full Name, Mailing Address and Zip Code Robert Dolsen 7006 Scenic Drive Yakima, WA 98908-1045 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 06/08/200	Amount of Each Receipt this Period \$100.00
G. Full Name, Mailing Address and Zip Code Richard Donohoe P. O. Box 608 Saint Michaels, MD 21663 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 05/10/200	Amount of Each Receipt this Period \$250.00

SUBTOTAL of Receipts This Page (optional)

\$1375.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

 PAGE 20 OF 90
 FOR LINE NUMBER 111a111

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NAME OF COMMITTEE (in full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Verna Driveness 1000 N Lake Ave. # 214 Sioux Falls, SD 57104-1321 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 06/08/200	Amount of Each Receipt this Period \$250.00
B. Full Name, Mailing Address and Zip Code Kurt Dubin 306 Waterford Road Silver Spring, MD 20901-2534 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$200.00	Date (month, day, year) 05/10/200	Amount of Each Receipt this Period \$50.00
C. Full Name, Mailing Address and Zip Code Kurt Dubin 306 Waterford Road Silver Spring, MD 20901-2534 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 05/12/200	Amount of Each Receipt this Period \$50.00
D. Full Name, Mailing Address and Zip Code Kurt Dubin 306 Waterford Road Silver Spring, MD 20901-2534 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 05/23/200	Amount of Each Receipt this Period \$50.00
E. Full Name, Mailing Address and Zip Code Martin Ducote 1012 Taylor Street Corinth, MS 38834- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 04/07/200	Amount of Each Receipt this Period \$250.00
F. Full Name, Mailing Address and Zip Code John Duncan P.O. Box 523 Loxley, AL 36551-0523 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$195.00	Date (month, day, year) 05/10/200	Amount of Each Receipt this Period \$55.00
G. Full Name, Mailing Address and Zip Code John Duncan P.O. Box 523 Loxley, AL 36551-0523 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$245.00	Date (month, day, year) 06/12/200	Amount of Each Receipt this Period \$50.00

SUBTOTAL of Receipts This Page (optional)

\$755.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 21 OF 90
FOR LINE NUMBER 11(a) (i)

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code John Duncan P.O. Box 523 Lexley, AL 36551-0523 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$280.00	Date (month, day, year) 06/14/200	Amount of Each Receipt this Period \$35.00
B. Full Name, Mailing Address and Zip Code James Eagleson 3315 E St Andrews Way Seattle, WA 98112-3749 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 04/27/200	Amount of Each Receipt this Period \$100.00
C. Full Name, Mailing Address and Zip Code William Eagleton 15 Fairways Dr Napa, CA 94558-1254 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 05/10/200	Amount of Each Receipt this Period \$100.00
D. Full Name, Mailing Address and Zip Code Chuck Basley Columbus, MS 39703- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Occupation Attorney Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 06/01/200	Amount of Each Receipt this Period \$500.00
E. Full Name, Mailing Address and Zip Code Helen Eckhoff 14964 East County Road 600 N Charleston, IL 61920- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 06/30/200	Amount of Each Receipt this Period \$250.00
F. Full Name, Mailing Address and Zip Code Margery Ellinwood 431 Maple Tree Drive, Apt.503 431 Maple Tree Drive Baltoona, FL 32702-9047 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 05/12/200	Amount of Each Receipt this Period \$50.00
G. Full Name, Mailing Address and Zip Code Margery Ellinwood 431 Maple Tree Drive, Apt.503 431 Maple Tree Drive Baltoona, FL 32702-9047 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$350.00	Date (month, day, year) 05/23/200	Amount of Each Receipt this Period \$50.00

SUBTOTAL of Receipts This Page (optional)

\$1085.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category on the
Detailed Summary PagePAGE OF
22 90
FOR LINE NUMBER
11 | a | i |

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Hortence Ellis Po Box 949 Seabrook, TX 77586-0949 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer WAL-MART Occupation Greeter Aggregate Year-to-Date -> \$185.00	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$35.00
B. Full Name, Mailing Address and Zip Code Hortence Ellis Po Box 949 Seabrook, TX 77586-0949 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer WAL-MART Occupation Greeter Aggregate Year-to-Date -> \$220.00	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$35.00
C. Full Name, Mailing Address and Zip Code John Ellis 2875 Wallard Lane Germantown, TN 38138-7662 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Belz Enterprises Occupation Real Estate Dev Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 06/14/200	Amount of Each Receipt this Period \$500.00
D. Full Name, Mailing Address and Zip Code H Truxtun Emerson 1221 Gulf Shore Blvd N Apt 50 2naples, FL 34102-4922 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$200.00	Date (month, day, year) 04/07/200	Amount of Each Receipt this Period \$100.00
E. Full Name, Mailing Address and Zip Code H Truxtun Emerson 1221 Gulf Shore Blvd N Apt 50 2naples, FL 34102-4922 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 04/24/200	Amount of Each Receipt this Period \$100.00
F. Full Name, Mailing Address and Zip Code H Truxtun Emerson 1221 Gulf Shore Blvd N Apt 50 2naples, FL 34102-4922 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$400.00	Date (month, day, year) 05/24/200	Amount of Each Receipt this Period \$100.00
G. Full Name, Mailing Address and Zip Code Eva Engler 1020 N.e. 196th Terrace Miami, FL 33179-3515 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 06/12/200	Amount of Each Receipt this Period \$200.00

SUBTOTAL of Receipts This Page (optional)

\$1070.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary PagePAGE 23 OF 90
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Ralph Fearing 527 Brittany Dr State College, PA 16803-1421 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 06/16/200	Amount of Each Receipt this Period \$200.00
B. Full Name, Mailing Address and Zip Code Robert Fiero 2240 E. 1975 N. Layton, UT 84040-7877 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Self Employed Aggregate Year-to-Date -> \$165.00	Date (month, day, year) 05/25/200	Amount of Each Receipt this Period \$15.00
C. Full Name, Mailing Address and Zip Code Robert Fiero 2240 E. 1975 N. Layton, UT 84040-7877 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Self Employed Aggregate Year-to-Date -> \$215.00	Date (month, day, year) 06/21/200	Amount of Each Receipt this Period \$50.00
D. Full Name, Mailing Address and Zip Code Paul Flegler 2918 Green Mountain Road Huntsville, AL 35803- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Radiance Technologies Occupation Vice President Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 04/07/200	Amount of Each Receipt this Period \$250.00
E. Full Name, Mailing Address and Zip Code Florence Fine 1325 Magnolia Drive Stephenville, TX 76401-2061 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$175.00	Date (month, day, year) 04/27/200	Amount of Each Receipt this Period \$50.00
F. Full Name, Mailing Address and Zip Code Florence Fine 1325 Magnolia Drive Stephenville, TX 76401-2061 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$215.00	Date (month, day, year) 05/30/200	Amount of Each Receipt this Period \$40.00
G. Full Name, Mailing Address and Zip Code Florence Fine 1325 Magnolia Drive Stephenville, TX 76401-2061 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$240.00	Date (month, day, year) 06/14/200	Amount of Each Receipt this Period \$25.00

SUBTOTAL of Receipts This Page (optional)

\$630.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 21 OF 90
FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Robert Fink Finks Paint Store 2329 Fairview Terr. Williamsport, PA 17701-5906 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self-Employed Occupation Merchant Aggregate Year-to-Date -> \$230.00	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$60.00
B. Full Name, Mailing Address and Zip Code Bernice Fletcher 2419 Norway Ct. Stevens Point, WI 54481-6280 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired-teacher Aggregate Year-to-Date -> \$205.00	Date (month, day, year) 04/27/200	Amount of Each Receipt this Period \$100.00
C. Full Name, Mailing Address and Zip Code Bernice Fletcher 2419 Norway Ct. Stevens Point, WI 54481-6280 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired-teacher Aggregate Year-to-Date -> \$255.00	Date (month, day, year) 06/09/200	Amount of Each Receipt this Period \$50.00
D. Full Name, Mailing Address and Zip Code Peter Fong Rr 3 Box 386 Springdale, AR 72764 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Farmer Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 05/23/200	Amount of Each Receipt this Period \$50.00
E. Full Name, Mailing Address and Zip Code Peter Fong Rr 3 Box 386 Springdale, AR 72764 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Farmer Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 05/24/200	Amount of Each Receipt this Period \$50.00
F. Full Name, Mailing Address and Zip Code Peter Fong Rr 3 Box 386 Springdale, AR 72764 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Farmer Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 06/14/200	Amount of Each Receipt this Period \$200.00
G. Full Name, Mailing Address and Zip Code Irene Possati 1700 Tice Valley Blvd., #133 Walnut Creek, CA 94595-1640 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Housewife Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 05/10/200	Amount of Each Receipt this Period \$100.00

SUBTOTAL of Receipts This Page (optional)

\$610.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 25 OF 90
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code David Foster 540 Desert West Dr Rancho Mirage, CA 92270-1310 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$400.00	Date (month, day, year) 06/07/200	Amount of Each Receipt this Period \$150.00
B. Full Name, Mailing Address and Zip Code Loyd Fox 9809 Dauntless Street San Diego, CA 92126-5513 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired-us Navy Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 05/24/200	Amount of Each Receipt this Period \$50.00
C. Full Name, Mailing Address and Zip Code Loyd Fox 9809 Dauntless Street San Diego, CA 92126-5513 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired-us Navy Aggregate Year-to-Date -> \$325.00	Date (month, day, year) 06/08/200	Amount of Each Receipt this Period \$75.00
D. Full Name, Mailing Address and Zip Code Loyd Fox 9809 Dauntless Street San Diego, CA 92126-5513 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired-us Navy Aggregate Year-to-Date -> \$375.00	Date (month, day, year) 06/09/200	Amount of Each Receipt this Period \$50.00
E. Full Name, Mailing Address and Zip Code Katherine Francis P. O. Box 156 Chicora, PA 16025-0156 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$125.00	Date (month, day, year) 05/24/200	Amount of Each Receipt this Period \$25.00
F. Full Name, Mailing Address and Zip Code Katherine Francis P. O. Box 156 Chicora, PA 16025-0156 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$150.00	Date (month, day, year) 06/08/200	Amount of Each Receipt this Period \$25.00
G. Full Name, Mailing Address and Zip Code Katherine Francis P. O. Box 156 Chicora, PA 16025-0156 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$225.00	Date (month, day, year) 06/16/200	Amount of Each Receipt this Period \$75.00

SUBTOTAL of Receipts This Page (optional)

\$450.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule
for each category of the
Detailed Summary PagePAGE 26 OF 50
FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code C. Galey P.O. Drawer 791 Hattiesburg, MS 39403- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer The Galey Agency, Inc. Occupation Chairman Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 04/18/200	Amount of Each Receipt this Period \$500.00
B. Full Name, Mailing Address and Zip Code Glenn Galey P.O. Drawer 791 Hattiesburg, MS 39403- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer The Galey Agency Occupation Executive Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 04/25/200	Amount of Each Receipt this Period \$250.00
C. Full Name, Mailing Address and Zip Code Ronald Gassner 513 Canyon Creek Drive Richardson, TX 75080-2571 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer MDTSC, INC. Occupation Engineer Aggregate Year-to-Date -> \$400.00	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$200.00
D. Full Name, Mailing Address and Zip Code Ronald Gassner 513 Canyon Creek Drive Richardson, TX 75080-2571 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer MDTSC, INC. Occupation Engineer Aggregate Year-to-Date -> \$600.00	Date (month, day, year) 06/12/200	Amount of Each Receipt this Period \$200.00
E. Full Name, Mailing Address and Zip Code James Gatewood Box 608 Tyler, TX 75710 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Occupation Retired Aggregate Year-to-Date -> \$450.00	Date (month, day, year) 05/05/200	Amount of Each Receipt this Period \$50.00
F. Full Name, Mailing Address and Zip Code James Gatewood Box 608 Tyler, TX 75710 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Occupation Retired Aggregate Year-to-Date -> \$550.00	Date (month, day, year) 06/12/200	Amount of Each Receipt this Period \$100.00
G. Full Name, Mailing Address and Zip Code James Gatewood Box 608 Tyler, TX 75710 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Occupation Retired Aggregate Year-to-Date -> \$600.00	Date (month, day, year) 06/28/200	Amount of Each Receipt this Period \$50.00

SUBTOTAL of Receipts This Page (optional)

\$1350.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category on the
Detailed Schedule PagePAGE 27 OF 90
FOR LINE NUMBER 11(a)(i)

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)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Donald Geary Geary Construction Company 6 Edgewood Ln N Centralia, IL 62801-3708 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Self Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 06/01/200	Amount of Each Receipt this Period \$500.00
B. Full Name, Mailing Address and Zip Code William Gennoy 917 Green Acres Drive # E Fresno, CA 93720-2570 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer N. W. FASTENER Occupation C.e.o. & Board Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 04/12/200	Amount of Each Receipt this Period \$200.00
C. Full Name, Mailing Address and Zip Code William Gennoy 917 Green Acres Drive # B Fresno, CA 93720-2570 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer N. W. FASTENER Occupation C.e.o. & Board Aggregate Year-to-Date -> \$400.00	Date (month, day, year) 05/23/200	Amount of Each Receipt this Period \$100.00
D. Full Name, Mailing Address and Zip Code William Gennoy 917 Green Acres Drive # E Fresno, CA 93720-2570 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer N. W. FASTENER Occupation C.e.o. & Board Aggregate Year-to-Date -> \$450.00	Date (month, day, year) 05/25/200	Amount of Each Receipt this Period \$50.00
E. Full Name, Mailing Address and Zip Code William Gennoy 917 Green Acres Drive # E Fresno, CA 93720-2570 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer N. W. FASTENER Occupation C.e.o. & Board Aggregate Year-to-Date -> \$550.00	Date (month, day, year) 06/08/200	Amount of Each Receipt this Period \$100.00
F. Full Name, Mailing Address and Zip Code Vern Gibson 1001 N. Pasadena, Unit 27 Mesa, AZ 85201-3518 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$170.00	Date (month, day, year) 04/19/200	Amount of Each Receipt this Period \$20.00
G. Full Name, Mailing Address and Zip Code Vern Gibson 1001 N. Pasadena, Unit 27 Mesa, AZ 85201-3518 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$220.00	Date (month, day, year) 05/10/200	Amount of Each Receipt this Period \$50.00

SUBTOTAL of Receipts This Page (optional)

\$1020.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 28 OF 90
FOR LINE NUMBER 11(a)(1)

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Vern Gibson 1001 N. Pasadena, Unit 27 Mesa, AZ 85201-3518 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$270.00	Date (month, day, year) 06/01/200	Amount of Each Receipt this Period \$50.00
B. Full Name, Mailing Address and Zip Code James Gilman 3777 Addy St. #39 Washougal, WA 98671-2768 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$520.00	Date (month, day, year) 05/23/200	Amount of Each Receipt this Period \$250.00
C. Full Name, Mailing Address and Zip Code James Gilman 3777 Addy St. #39 Washougal, WA 98671-2768 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$620.00	Date (month, day, year) 05/30/200	Amount of Each Receipt this Period \$100.00
D. Full Name, Mailing Address and Zip Code Edward Gorkowski 11827 Sandman Street San Antonio, TX 78216-3022 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired-air For Aggregate Year-to-Date -> \$150.00	Date (month, day, year) 05/18/200	Amount of Each Receipt this Period \$50.00
E. Full Name, Mailing Address and Zip Code Edward Gorkowski 11827 Sandman Street San Antonio, TX 78216-3022 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired-air For Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 06/14/200	Amount of Each Receipt this Period \$100.00
F. Full Name, Mailing Address and Zip Code Edward Gould 37733 Calle Rabano San City, CA 92595 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 05/17/200	Amount of Each Receipt this Period \$100.00
G. Full Name, Mailing Address and Zip Code Amelia Greenwood Po Box 35 Lyne, NH 03768-0035 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$800.00	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$100.00

SUBTOTAL of Receipts This Page (optional)

\$750.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 29 OF 90
FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Amalia Greenwood Po Box 35 Lyme, NH 03768-0035 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$900.00	Date (month, day, year) 05/11/200	Amount of Each Receipt this Period \$100.00
B. Full Name, Mailing Address and Zip Code Amalia Greenwood Po Box 35 Lyme, NH 03768-0035 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 05/24/200	Amount of Each Receipt this Period \$100.00
C. Full Name, Mailing Address and Zip Code Amalia Greenwood Po Box 35 Lyme, NH 03768-0035 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$1500.00	Date (month, day, year) 06/07/200 (Refunded \$500 on 7/15/06)	Amount of Each Receipt this Period \$500.00
D. Full Name, Mailing Address and Zip Code John Gretzinger 1530 S Ocean Blvd. Pompano Beach, FL 33062-7441 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$190.00	Date (month, day, year) 04/27/200	Amount of Each Receipt this Period \$50.00
E. Full Name, Mailing Address and Zip Code John Gretzinger 1530 S Ocean Blvd. Pompano Beach, FL 33062-7441 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$290.00	Date (month, day, year) 06/09/200	Amount of Each Receipt this Period \$100.00
F. Full Name, Mailing Address and Zip Code William Griffith P.O. Box 218 Jewell Ridge, VA 24622-0218 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Disabled Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$100.00
G. Full Name, Mailing Address and Zip Code William Griffith P.O. Box 218 Jewell Ridge, VA 24622-0218 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Disabled Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 06/07/200	Amount of Each Receipt this Period \$200.00

SUBTOTAL of Receipts This Page (optional)

\$1150.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate sheets for each category of the Detailed Summary Page

 PAGE 30 OF 90
 FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Willis Guild 1458 Magnolia Street Gulfport, MS 39507-3515 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 04/07/200	Amount of Each Receipt this Period \$500.00
B. Full Name, Mailing Address and Zip Code Mary Hales 815 Sumac Lane Winnetka, IL 60093-1328 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$350.00	Date (month, day, year) 05/30/200	Amount of Each Receipt this Period \$250.00
C. Full Name, Mailing Address and Zip Code Celine Halo Post Office Box 440 Williamstown, NJ 08094-0440 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$1750.00	Date (month, day, year) 05/15/200	Amount of Each Receipt this Period \$100.00
D. Full Name, Mailing Address and Zip Code Celine Halo Post Office Box 440 Williamstown, NJ 08094-0440 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$2150.00	Date (month, day, year) 06/16/200 (Refunded \$1,150 on 7/15/00)	Amount of Each Receipt this Period \$400.00
E. Full Name, Mailing Address and Zip Code Jan Hammond 3 Queensland Drive Hattiesburg, MS 39402- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Occupation Attorney Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 04/25/200	Amount of Each Receipt this Period \$250.00
F. Full Name, Mailing Address and Zip Code John Hance 113 Lynnwood Drive Frankfort, KY 40601-9056 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer US NAVY Occupation Retired Aggregate Year-to-Date -> \$275.00	Date (month, day, year) 04/27/200	Amount of Each Receipt this Period \$100.00
G. Full Name, Mailing Address and Zip Code Maxine Haneman P.O. Box 390 Ocean City, NJ 08226 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 06/16/200	Amount of Each Receipt this Period \$500.00

SUBTOTAL of Receipts This Page (optional)

\$2100.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule
for each category of the
Detailed Summary PagePAGE 31 OF 90
FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Margaret Hanson 240 Walnut St Bristol, PA 19007-4929 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$245.00	Date (month, day, year) 05/12/200	Amount of Each Receipt this Period \$25.00
B. Full Name, Mailing Address and Zip Code Margaret Hanson 240 Walnut St Bristol, PA 19007-4929 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$295.00	Date (month, day, year) 06/08/200	Amount of Each Receipt this Period \$50.00
C. Full Name, Mailing Address and Zip Code Edgar Hardy 3655 Jackdaw Street San Diego, CA 92103-9837 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Occupation Artists Aggregate Year-to-Date -> \$400.00	Date (month, day, year) 04/07/200	Amount of Each Receipt this Period \$200.00
D. Full Name, Mailing Address and Zip Code Edgar Hardy 3655 Jackdaw Street San Diego, CA 92103-3837 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Occupation Artists Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 04/27/200	Amount of Each Receipt this Period \$100.00
E. Full Name, Mailing Address and Zip Code Lewis Hardy 25 Conway Close Road Saint Louis, MO 63124-1633 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$100.00	Date (month, day, year) 04/05/200	Amount of Each Receipt this Period \$100.00
F. Full Name, Mailing Address and Zip Code Lewis Hardy 25 Conway Close Road Saint Louis, MO 63124-1633 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$200.00	Date (month, day, year) 05/12/200	Amount of Each Receipt this Period \$100.00
G. Full Name, Mailing Address and Zip Code Lewis Hardy 25 Conway Close Road Saint Louis, MO 63124-1633 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 05/17/200	Amount of Each Receipt this Period \$50.00

SUBTOTAL of Receipts This Page (optional)

\$625.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE	OF
32	90
FOR LINE NUMBER	
11 a 11	

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NAME OF COMMITTEE (in Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code C Hargis 108 Teche Dr. Lafayette, LA 70503-2538 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$115.00	Date (month, day, year) 05/10/200	Amount of Each Receipt this Period \$15.00
B. Full Name, Mailing Address and Zip Code C Hargis 108 Teche Dr. Lafayette, LA 70503 2538 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$140.00	Date (month, day, year) 05/12/200	Amount of Each Receipt this Period \$25.00
C. Full Name, Mailing Address and Zip Code C Hargis 108 Teche Dr. Lafayette, LA 70503-2538 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$165.00	Date (month, day, year) 05/30/200	Amount of Each Receipt this Period \$25.00
D. Full Name, Mailing Address and Zip Code C Hargis 108 Teche Dr. Lafayette, LA 70503-2538 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$190.00	Date (month, day, year) 06/09/200	Amount of Each Receipt this Period \$25.00
E. Full Name, Mailing Address and Zip Code C Hargis 108 Teche Dr. Lafayette, LA 70503-2538 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$215.00	Date (month, day, year) 06/28/200	Amount of Each Receipt this Period \$25.00
F. Full Name, Mailing Address and Zip Code Jeanette Harper 1112 Dogwood Drive Kingston, TN 37763-2308 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$415.00	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$75.00
G. Full Name, Mailing Address and Zip Code Jeanette Harper 1112 Dogwood Drive Kingston, TN 37763-2308 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$530.00	Date (month, day, year) 05/24/200	Amount of Each Receipt this Period \$115.00

SUBTOTAL of Receipts This Page (optional)

\$305.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 33 OF 90
FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (in Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Prentiss Harrell 15 Millbranch Road Hattiesburg, MS 39402- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Occupation Attorney Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 04/25/200	Amount of Each Receipt this Period \$250.00
B. Full Name, Mailing Address and Zip Code Burney Hartridge 128 Heritage Drive. R-4 St Simons Is, GA 31522-2023 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$400.00	Date (month, day, year) 06/12/200	Amount of Each Receipt this Period \$200.00
C. Full Name, Mailing Address and Zip Code R.L. Hartung 1833 Washington Avenue Pascagoula, MS 39567- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 04/07/200	Amount of Each Receipt this Period \$1000.00
D. Full Name, Mailing Address and Zip Code Arne Haynes P.O. Box 282, 112 Fir Ave. N. Eatonville, WA 98328-0282 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer MASHELL INC. Occupation Secretary Aggregate Year-to-Date -> \$190.00	Date (month, day, year) 04/12/200	Amount of Each Receipt this Period \$115.00
E. Full Name, Mailing Address and Zip Code Arne Haynes P.O. Box 282, 112 Fir Ave. N. Eatonville, WA 98328-0282 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer MASHELL INC. Occupation Secretary Aggregate Year-to-Date -> \$290.00	Date (month, day, year) 05/05/200	Amount of Each Receipt this Period \$100.00
F. Full Name, Mailing Address and Zip Code Arne Haynes P.O. Box 282, 112 Fir Ave. N. Eatonville, WA 98328-0282 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer MASHELL INC. Occupation Secretary Aggregate Year-to-Date -> \$365.00	Date (month, day, year) 05/30/200	Amount of Each Receipt this Period \$75.00
G. Full Name, Mailing Address and Zip Code Helge Heen Fox Hill Farm Leicester, NY 14481 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$170.00	Date (month, day, year) 05/24/200	Amount of Each Receipt this Period \$100.00

SUBTOTAL of Receipts This Page (optional)

\$1840.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 34 OF 90
FOR LINE NUMBER
11(a)(i)

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)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Helge Heen Fox Hill Farm Leicester, NY 14481 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$270.00	Date (month, day, year) 06/08/200	Amount of Each Receipt this Period \$100.00
B. Full Name, Mailing Address and Zip Code R. Heidelberg 905 Adeline Street Hattiesburg, MS 39401- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Heidelberg & Woodliff, P.A. Occupation Attorney Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 04/18/200	Amount of Each Receipt this Period \$500.00
C. Full Name, Mailing Address and Zip Code Lowell Heinmiller 2506 Arcadia Street Hattiesburg, MS 39402- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer None Occupation Retired Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 04/18/200	Amount of Each Receipt this Period \$300.00
D. Full Name, Mailing Address and Zip Code Harold Helen P. O. Box 1190 Lebanon, PA 17042-1190 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$260.00	Date (month, day, year) 06/14/200	Amount of Each Receipt this Period \$50.00
E. Full Name, Mailing Address and Zip Code Helen Henshaw P. O. Box 189 Waccabuc, NY 10597-0189 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Housewife Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 05/17/200	Amount of Each Receipt this Period \$250.00
F. Full Name, Mailing Address and Zip Code Ronald Herold 2100 N. Ocean Blvd. Ste 1904 Fort Lauderdale, FL 33305 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 06/14/200	Amount of Each Receipt this Period \$300.00
G. Full Name, Mailing Address and Zip Code Glen Harrin P.O. Box 15217 Hattiesburg, MS 39404- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Southgate Timber Company Occupation Forest Industry Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 04/25/200	Amount of Each Receipt this Period \$500.00

SUBTOTAL of Receipts This Page (optional)

\$2000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 35 OF 90
FDP LINE NUMBER
11(a)(i)

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 campaign purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Winthrop Hersey Apt. D104 1000 Vicars Landing Way Ponte Vedra, FL 32082-3121 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 05/19/200	Amount of Each Receipt this Period \$150.00
B. Full Name, Mailing Address and Zip Code Ned Hickel 657 Sunset Boulevard Baton Rouge, LA 70808-5082 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$135.00	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$50.00
C. Full Name, Mailing Address and Zip Code Ned Hickel 657 Sunset Boulevard Baton Rouge, LA 70808-5082 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$185.00	Date (month, day, year) 05/24/200	Amount of Each Receipt this Period \$50.00
D. Full Name, Mailing Address and Zip Code Ned Hickel 657 Sunset Boulevard Baton Rouge, LA 70808-5082 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$235.00	Date (month, day, year) 05/30/200	Amount of Each Receipt this Period \$50.00
E. Full Name, Mailing Address and Zip Code Gerald Hill 290 CR 343 Falkner, MS 38629- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Hill Brothers Partnership Occupation Partner Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 04/07/200	Amount of Each Receipt this Period \$1000.00
F. Full Name, Mailing Address and Zip Code Jimmy Hill 14610 Hwy. 15, North Ripley, MS 38663- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Hill Brothers Consulting Occupation Accountant Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 04/07/200	Amount of Each Receipt this Period \$1000.00
G. Full Name, Mailing Address and Zip Code Kenneth Hill 25201 Highway 370 Falkner, MS 38629- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Hill Brothers Consulting Occupation Accountant Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 04/07/200	Amount of Each Receipt this Period \$1000.00

SUBTOTAL of Receipts This Page (optional)

\$3300.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 36 OF 90
FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code W Hogan 2408 Marika Circle Wichita Falls, TX 76308-3808	Name of Employer Information Requested Occupation	Date (month, day, year) 05/24/200	Amount of Each Receipt this Period \$200.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Information Requested Aggregate Year-to-Date ->	\$400.00	
B. Full Name, Mailing Address and Zip Code Edwina Holland 2725 2nd Avenue, Apt. A-3 San Diego, CA 92103-6247	Name of Employer Information Requested Occupation	Date (month, day, year) 04/12/200	Amount of Each Receipt this Period \$540.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Information Requested Aggregate Year-to-Date ->	\$900.00	
C. Full Name, Mailing Address and Zip Code Edwina Holland 2725 2nd Avenue, Apt. A-3 San Diego, CA 92103-6247	Name of Employer Information Requested Occupation	Date (month, day, year) 05/18/200	Amount of Each Receipt this Period \$540.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Information Requested Aggregate Year-to-Date ->	(Refunded \$ 440 on 7/15/00) \$1440.00	
D. Full Name, Mailing Address and Zip Code Marion Hood 1044 Eider Way Oceanside, CA 92057-7723	Name of Employer Occupation Retired	Date (month, day, year) 04/07/200	Amount of Each Receipt this Period \$15.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	\$50.00	
E. Full Name, Mailing Address and Zip Code Marion Hood 1044 Eider Way Oceanside, CA 92057-7723	Name of Employer Occupation Retired	Date (month, day, year) 04/12/200	Amount of Each Receipt this Period \$15.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	\$75.00	
F. Full Name, Mailing Address and Zip Code Marion Hood 1044 Eider Way Oceanside, CA 92057-7723	Name of Employer Occupation Retired	Date (month, day, year) 04/19/200	Amount of Each Receipt this Period \$34.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	\$109.00	
G. Full Name, Mailing Address and Zip Code Marion Hood 1044 Eider Way Oceanside, CA 92057-7723	Name of Employer Occupation Retired	Date (month, day, year) 05/24/200	Amount of Each Receipt this Period \$15.00
Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Aggregate Year-to-Date ->	\$124.00	

SUBTOTAL of Receipts This Page (optional)

\$1359.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 37 OF 90
FOR LINE NUMBER
11(a)(1)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Marion Hood 1044 Eider Way Oceanside, CA 92057-7723 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$159.00	Date (month, day, year) 05/30/200	Amount of Each Receipt this Period \$35.00
B. Full Name, Mailing Address and Zip Code Marion Hood 1044 Eider Way Oceanside, CA 92057-7723 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$189.00	Date (month, day, year) 06/07/200	Amount of Each Receipt this Period \$30.00
C. Full Name, Mailing Address and Zip Code Marion Hood 1044 Eider Way Oceanside, CA 92057-7723 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$204.00	Date (month, day, year) 06/07/200	Amount of Each Receipt this Period \$15.00
D. Full Name, Mailing Address and Zip Code F Hook 16 Laurel Lake Drive Hudson, OH 44236-2140 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$120.00	Date (month, day, year) 04/07/200	Amount of Each Receipt this Period \$35.00
E. Full Name, Mailing Address and Zip Code F Hook 16 Laurel Lake Drive Hudson, OH 44236-2140 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$170.00	Date (month, day, year) 05/01/200	Amount of Each Receipt this Period \$50.00
F. Full Name, Mailing Address and Zip Code F Hook 16 Laurel Lake Drive Hudson, OH 44236-2140 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$195.00	Date (month, day, year) 05/12/200	Amount of Each Receipt this Period \$25.00
G. Full Name, Mailing Address and Zip Code F Hook 16 Laurel Lake Drive Hudson, OH 44236-2140 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$220.00	Date (month, day, year) 05/19/200	Amount of Each Receipt this Period \$25.00

SUBTOTAL of Receipts This Page (optional)

\$215.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 38 OF 90
FOR LINE NUMBER 11 | a | i |

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code F Hook 16 Laurel Lake Drive Hudson, OH 44236-2140 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$245.00	Date (month, day, year) 05/24/200	Amount of Each Receipt this Period \$25.00
B. Full Name, Mailing Address and Zip Code Herbert Hoover 9909 Collins Avenue, Apt. 202 Bal Harbour, FL 33154 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Home Maker & Gr Aggregate Year-to-Date -> \$100.00	Date (month, day, year) 05/05/200	Amount of Each Receipt this Period \$100.00
C. Full Name, Mailing Address and Zip Code Herbert Hoover 9909 Collins Avenue, Apt. 202 Bal Harbour, FL 33154 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Home Maker & Gr Aggregate Year-to-Date -> \$200.00	Date (month, day, year) 05/18/200	Amount of Each Receipt this Period \$100.00
D. Full Name, Mailing Address and Zip Code Herbert Hoover 9909 Collins Avenue, Apt. 202 Bal Harbour, FL 33154 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Home Maker & Gr Aggregate Year-to-Date -> \$700.00	Date (month, day, year) 06/12/200	Amount of Each Receipt this Period \$500.00
E. Full Name, Mailing Address and Zip Code Jess Hughes P.O. Box 763 Hattiesburg, MS 39403- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Occupation Political Consultant Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 04/25/200	Amount of Each Receipt this Period \$250.00
F. Full Name, Mailing Address and Zip Code May Hull 400 S. Broadway Place #1208 Tucson, AZ 85710-3790 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer - Occupation Retired Aggregate Year-to-Date -> \$160.00	Date (month, day, year) 04/12/200	Amount of Each Receipt this Period \$60.00
G. Full Name, Mailing Address and Zip Code May Hull 400 S. Broadway Place #1208 Tucson, AZ 85710-3790 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer - Occupation Retired Aggregate Year-to-Date -> \$185.00	Date (month, day, year) 04/19/200	Amount of Each Receipt this Period \$25.00

SUBTOTAL of Receipts This Page (optional)

\$1060.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 39 OF 90
FOR LINE NUMBER
11(a)(i)

Any information copied from 500b 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)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code May Hull 400 S. Broadway Place #1208 Tucson, AZ 85710-3790 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer - Occupation Retired Aggregate Year-to-Date -> \$235.00	Date (month, day, year) 05/17/200	Amount of Each Receipt this Period \$50.00
B. Full Name, Mailing Address and Zip Code May Hull 400 S. Broadway Place #1208 Tucson, AZ 85710-3790 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer - Occupation Retired Aggregate Year-to-Date -> \$295.00	Date (month, day, year) 05/24/200	Amount of Each Receipt this Period \$60.00
C. Full Name, Mailing Address and Zip Code May Hull 400 S. Broadway Place #1208 Tucson, AZ 85710-3790 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer - Occupation Retired Aggregate Year-to-Date -> \$355.00	Date (month, day, year) 05/25/200	Amount of Each Receipt this Period \$60.00
D. Full Name, Mailing Address and Zip Code May Hull 400 S. Broadway Place #1208 Tucson, AZ 85710-3790 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer - Occupation Retired Aggregate Year-to-Date -> \$415.00	Date (month, day, year) 06/14/200	Amount of Each Receipt this Period \$60.00
E. Full Name, Mailing Address and Zip Code May Hull 400 S. Broadway Place #1208 Tucson, AZ 85710-3790 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer - Occupation Retired Aggregate Year-to-Date -> \$440.00	Date (month, day, year) 06/21/200	Amount of Each Receipt this Period \$25.00
F. Full Name, Mailing Address and Zip Code Dorothy Humble 3528 97th Pl. S.e. Everett, WA 98208-3116 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer - Occupation Retired Aggregate Year-to-Date -> \$150.00	Date (month, day, year) 04/12/200	Amount of Each Receipt this Period \$50.00
G. Full Name, Mailing Address and Zip Code Dorothy Humble 3528 97th Pl. S.e. Everett, WA 98208-3116 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer - Occupation Retired Aggregate Year-to-Date -> \$175.00	Date (month, day, year) 05/15/200	Amount of Each Receipt this Period \$25.00

SUBTOTAL of Receipts This Page (optional)

\$330.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules
for each category of the
Detailed Summary Page

PAGE	OF
40	90
FOR LINE NUMBER	
11(a)(i)	

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Dorothy Humble 3528 97th Pl. S.e. Everett, WA 98208-3116 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$225.00	Date (month, day, year) 05/17/200	Amount of Each Receipt this Period \$50.00
B. Full Name, Mailing Address and Zip Code Dorothy Humble 3528 97th Pl. S.e. Everett, WA 98208-3116 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 06/06/200	Amount of Each Receipt this Period \$25.00
C. Full Name, Mailing Address and Zip Code Martha Hume 24055 Paseo Del Lago Unit 607 Laguna Hills, CA 92653-2641 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$310.00	Date (month, day, year) 04/19/200	Amount of Each Receipt this Period \$100.00
D. Full Name, Mailing Address and Zip Code Martha Hume 24055 Paseo Del Lago Unit 607 Laguna Hills, CA 92653-2641 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$410.00	Date (month, day, year) 06/21/200	Amount of Each Receipt this Period \$100.00
E. Full Name, Mailing Address and Zip Code Brooks Hurst 891 swallow St., Southwest Warren, OH 44485-3683 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$137.00	Date (month, day, year) 04/24/200	Amount of Each Receipt this Period \$37.00
F. Full Name, Mailing Address and Zip Code Brooks Hurst 891 Swallow St., Southwest Warren, OH 44485-3683 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$187.00	Date (month, day, year) 04/27/200	Amount of Each Receipt this Period \$50.00
G. Full Name, Mailing Address and Zip Code Brooks Hurst 891 Swallow St., Southwest Warren, OH 44485-3683 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$287.00	Date (month, day, year) 05/24/200	Amount of Each Receipt this Period \$100.00

SUBTOTAL of Receipts This Page (optional)

\$462.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 41 OF 90
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Brooks Hurst 891 Swallow St., Southwest Warren, OH 44485-3683 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$337.00	Date (month, day, year) 06/16/200	Amount of Each Receipt this Period \$50.00
B. Full Name, Mailing Address and Zip Code Brooks Hurst 891 Swallow St., Southwest Warren, OH 44485-3683 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$387.00	Date (month, day, year) 06/21/200	Amount of Each Receipt this Period \$50.00
C. Full Name, Mailing Address and Zip Code Margaret Husting 9411 Lawton Dr Huntington Beach, CA 92646-7245 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer ASSOCIATED MANUFACTURERS Occupation Manufacturer Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 06/16/200	Amount of Each Receipt this Period \$300.00
D. Full Name, Mailing Address and Zip Code Bernice Hutchison 2559 Outpost Drive Hollywood, CA 90068-2646 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$245.00	Date (month, day, year) 05/05/200	Amount of Each Receipt this Period \$100.00
E. Full Name, Mailing Address and Zip Code Joseph Ilardi 8 Ridgewood Dr Randolph, NJ 07869-3753 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$170.00	Date (month, day, year) 04/12/200	Amount of Each Receipt this Period \$50.00
F. Full Name, Mailing Address and Zip Code Joseph Ilardi 8 Ridgewood Dr Randolph, NJ 07869-3753 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$270.00	Date (month, day, year) 05/17/200	Amount of Each Receipt this Period \$100.00
G. Full Name, Mailing Address and Zip Code Joseph Ilardi 8 Ridgewood Dr Randolph, NJ 07869-3753 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$320.00	Date (month, day, year) 05/24/200	Amount of Each Receipt this Period \$50.00

SUBTOTAL of Receipts This Page (optional)

\$700.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 42 OF 90
FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (in full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Joseph Ilardi 8 Ridgewood Dr Randolph, NJ 07869-3753 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$340.00	Date (month, day, year) 05/30/200	Amount of Each Receipt this Period \$20.00
B. Full Name, Mailing Address and Zip Code Davis, J. Robert 6508 North Shiloh Road Corinth, MS 38834- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 04/07/200	Amount of Each Receipt this Period \$250.00
C. Full Name, Mailing Address and Zip Code William Jackson Route 10 Box 4 Corinth, MS 38834- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 04/07/200	Amount of Each Receipt this Period \$500.00
D. Full Name, Mailing Address and Zip Code Mary Jenkins 603 North 5th St Cambridge, OH 43725-1327 Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$915.00	Date (month, day, year) 04/07/200	Amount of Each Receipt this Period \$690.00
E. Full Name, Mailing Address and Zip Code Mary Jenkins 603 North 5th St Cambridge, OH 43725-1327 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$940.00	Date (month, day, year) 04/19/200	Amount of Each Receipt this Period \$25.00
F. Full Name, Mailing Address and Zip Code Mary Jenkins 603 North 5th St Cambridge, OH 43725-1327 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$1165.00	Date (month, day, year) 05/05/200	Amount of Each Receipt this Period \$225.00
G. Full Name, Mailing Address and Zip Code Esther Johns 3841 Tunnel Hill Rd., S.W. Cleveland, TN 37311-8347 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$350.00	Date (month, day, year) 05/24/200	Amount of Each Receipt this Period \$100.00

SUBTOTAL of Receipts This Page (optional)

\$1810.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 43 OF 90
FOR LINE NUMBER
11(A) (1)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Esther Johns 3841 Tunnel Hill Rd., S.W. Cleveland, TN 37311-8347 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$550.00	Date (month, day, year) 06/16/200	Amount of Each Receipt this Period \$200.00
B. Full Name, Mailing Address and Zip Code Carter Johnson Apt. H 166 2305 Killearn Center Blvd. Tallahassee, FL 32308-3531 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer USAF Occupation Retired Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 05/12/200	Amount of Each Receipt this Period \$250.00
C. Full Name, Mailing Address and Zip Code Earle Jones P.O. Box 16807 Jackson, MS 39236- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Mississippi Management Corp. Occupation Executive Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 04/07/200	Amount of Each Receipt this Period \$1000.00
D. Full Name, Mailing Address and Zip Code Frank Jordan 306 Sutherland Pl Danville, VA 24541-2428 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 06/07/200	Amount of Each Receipt this Period \$100.00
E. Full Name, Mailing Address and Zip Code Byron Judah 10832 Snow White Dr Dallas, TX 75229-4037 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$100.00	Date (month, day, year) 05/11/200	Amount of Each Receipt this Period \$25.00
F. Full Name, Mailing Address and Zip Code Byron Judah 10832 Snow White Dr Dallas, TX 75229-4037 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$140.00	Date (month, day, year) 05/12/200	Amount of Each Receipt this Period \$40.00
G. Full Name, Mailing Address and Zip Code Byron Judah 10832 Snow White Dr Dallas, TX 75229-4037 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$190.00	Date (month, day, year) 05/15/200	Amount of Each Receipt this Period \$50.00

SUBTOTAL of Receipts This Page (optional)

\$1665.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 44 OF 90
FOR LINE NUMBER
11(a) (1)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Byron Judah 10832 Snow White Dr Dallas, TX 75229-4037 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$240.00	Date (month, day, year) 06/08/200	Amount of Each Receipt this Period \$50.00
B. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and Zip Code Fred Kelley 1417 Franklin Rd. Franklin Grove, IL 61031-9735 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Farmer Aggregate Year-to-Date -> \$115.00	Date (month, day, year) 05/17/200	Amount of Each Receipt this Period \$15.00
F. Full Name, Mailing Address and Zip Code Fred Kelley 1417 Franklin Rd. Franklin Grove, IL 61031-9735 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Farmer Aggregate Year-to-Date -> \$215.00	Date (month, day, year) 06/08/200	Amount of Each Receipt this Period \$100.00
G. Full Name, Mailing Address and Zip Code Jane Kemnitz 4429 Red Oak Lane Zellwood, FL 32798 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$400.00	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$200.00

SUBTOTAL of Receipts This Page (optional)

\$365.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 45 OF 90
FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Jane Kemnitz 4429 Red Oak Lane Zellwood, FL 32798 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$600.00	Date (month, day, year) 06/12/200	Amount of Each Receipt this Period \$200.00
B. Full Name, Mailing Address and Zip Code Joseph Kemple 171 Whieldon Lane Worthington, OH 43085-2940 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 04/19/200	Amount of Each Receipt this Period \$250.00
C. Full Name, Mailing Address and Zip Code Hill Kenny 7530 Cr. 700 Blue Mountain, MS 38610- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 04/07/200	Amount of Each Receipt this Period \$1000.00
D. Full Name, Mailing Address and Zip Code Kittrell Kerry 30 Darby Road Hattiesburg, MS 39402- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Big "K" Occupation Gasoline Distributor Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 04/25/200	Amount of Each Receipt this Period \$500.00
E. Full Name, Mailing Address and Zip Code Douangmala Khounnavong 1948 Middlesex St. Lowell, MA 01851-1039 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer 0150 Occupation Chelsea-mass Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 04/05/200	Amount of Each Receipt this Period \$55.00
F. Full Name, Mailing Address and Zip Code Douangmala Khounnavong 1948 Middlesex St. Lowell, MA 01851-1039 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Chelsea-mass Aggregate Year-to-Date -> \$315.00	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$15.00
G. Full Name, Mailing Address and Zip Code Douangmala Khounnavong 1948 Middlesex St. Lowell, MA 01851-1039 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Chelsea-mass Aggregate Year-to-Date -> \$345.00	Date (month, day, year) 05/10/200	Amount of Each Receipt this Period \$30.00

SUBTOTAL of Receipts This Page (optional)

\$2050.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE	OF
46	90
FOR LINE NUMBER	
11(a)(1)	

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Douangmala Khounnavong 1948 Middlesex St. Lowell, MA 01851-1039 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Chelsea-mass Aggregate Year-to-Date -> \$395.00	Date (month, day, year) 05/19/200 Amount of Each Receipt this Period \$50.00
B. Full Name, Mailing Address and Zip Code Douangmala Khounnavong 1948 Middlesex St. Lowell, MA 01851-1039 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Chelsea-mass Aggregate Year-to-Date -> \$425.00	Date (month, day, year) 05/19/200 Amount of Each Receipt this Period \$30.00
C. Full Name, Mailing Address and Zip Code Alvah King 770 Grant Street Anoka, MN 55303-1403 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$150.00	Date (month, day, year) 04/17/200 Amount of Each Receipt this Period \$50.00
D. Full Name, Mailing Address and Zip Code Alvah King 770 Grant Street Anoka, MN 55303-1403 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$165.00	Date (month, day, year) 05/10/200 Amount of Each Receipt this Period \$15.00
E. Full Name, Mailing Address and Zip Code Alvah King 770 Grant Street Anoka, MN 55303-1403 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$215.00	Date (month, day, year) 05/19/200 Amount of Each Receipt this Period \$50.00
F. Full Name, Mailing Address and Zip Code Alvah King 770 Grant Street Anoka, MN 55303-1403 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$240.00	Date (month, day, year) 06/08/200 Amount of Each Receipt this Period \$25.00
G. Full Name, Mailing Address and Zip Code Kerry Kittrell 30 Darby Road Hattiesburg, MS 39402- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Big "K" Occupation Gasoline Distributor Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 04/25/200 Amount of Each Receipt this Period \$500.00

SUBTOTAL of Receipts This Page (optional)

\$720.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 47 OF 90
FOR LINE NUMBER
11(a)(1)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code H Ruth Knothe 5838 69th Avenue Ridgewood, NY 11385-5036 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 04/19/200	Amount of Each Receipt this Period \$100.00
B. Full Name, Mailing Address and Zip Code Virginia Knott 15 Rue Verte Newport Beach, CA 92660-5232 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer KNATTS BEVEY PA Occupation Retired Aggregate Year-to-Date ->	Date (month, day, year) 04/12/200	Amount of Each Receipt this Period \$1000.00 (Refunded \$500 on 7/15/04)
C. Full Name, Mailing Address and Zip Code Virginia Knott 15 Rue Verte Newport Beach, CA 92660-5232 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer KNATTS BEVEY PA Occupation Retired Aggregate Year-to-Date ->	Date (month, day, year) 06/12/200	Amount of Each Receipt this Period \$500.00
D. Full Name, Mailing Address and Zip Code D. G. Kobs, Jr. 1601 South 40th Avenue Hattiesburg, MS 39402- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Hattiesburg Radiology Group Occupation Radiologist Aggregate Year-to-Date ->	Date (month, day, year) 04/25/200	Amount of Each Receipt this Period \$500.00
E. Full Name, Mailing Address and Zip Code Linda Kuykendall 3 Abbeywood Lane Hattiesburg, MS 39402- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Commercial Business Interiors Occupation Owner Aggregate Year-to-Date ->	Date (month, day, year) 05/05/200	Amount of Each Receipt this Period \$300.00
F. Full Name, Mailing Address and Zip Code George Lauinger P.O. Box 308 Laurel, NY 11948-0308 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date ->	Date (month, day, year) 04/12/200	Amount of Each Receipt this Period \$100.00
G. Full Name, Mailing Address and Zip Code George Lauinger P.O. Box 308 Laurel, NY 11948-0308 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date ->	Date (month, day, year) 05/15/200	Amount of Each Receipt this Period \$25.00

SUBTOTAL of Receipts This Page (optional)

\$2525.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 48 OF 90
FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (in full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code George Lauinger P.O. Box 308 Laurel, NY 11948-0308 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$225.00	Date (month, day, year) 06/09/200	Amount of Each Receipt this Period \$100.00
B. Full Name, Mailing Address and Zip Code John Lee 1014 S. 34th Avenue Hattiesburg, MS 39401- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Occupation Attorney Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 04/25/200	Amount of Each Receipt this Period \$500.00
C. Full Name, Mailing Address and Zip Code Belva Lennan 15162 Valley Heart Drive Sherman Oaks, CA 91403-1247 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 04/19/200	Amount of Each Receipt this Period \$250.00
D. Full Name, Mailing Address and Zip Code Ruby Linn 9002 Belvoir Woods Pkwy. #306 Fort Belvoir, VA 22060-2709 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer ARMY Occupation Retired Aggregate Year-to-Date -> \$900.00	Date (month, day, year) 06/09/200	Amount of Each Receipt this Period \$300.00
E. Full Name, Mailing Address and Zip Code Randall Long 3201 North Madison Street Corinth, MS 38834- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Long Wholesale Occupation Wholesale Grocery Distributer Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 04/07/200	Amount of Each Receipt this Period \$500.00
F. Full Name, Mailing Address and Zip Code W Lott 785 Chiswick Pl Galion, OH 44833-1017 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer W.E. LOTT COMPA Occupation Consultant Aggregate Year-to-Date -> \$200.00	Date (month, day, year) 05/26/200	Amount of Each Receipt this Period \$100.00
G. Full Name, Mailing Address and Zip Code W Lott 785 Chiswick Pl Galion, OH 44833-1017 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer W.E. LOTT COMPA Occupation Consultant Aggregate Year-to-Date -> \$350.00	Date (month, day, year) 06/01/200	Amount of Each Receipt this Period \$150.00

SUBTOTAL of Receipts This Page (optional)

\$1900.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 49 OF 90
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Sylvia Lucas 8 Market St Red Bank, NJ 07701-6319 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> \$190.00	Date (month, day, year) 05/10/200	Amount of Each Receipt this Period \$15.00
B. Full Name, Mailing Address and Zip Code Sylvia Lucas 8 Market St Red Bank, NJ 07701-6319 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> \$240.00	Date (month, day, year) 06/21/200	Amount of Each Receipt this Period \$50.00
C. Full Name, Mailing Address and Zip Code Matilda Luther 5 Gunpowder Road Mechanicsburg, PA 17055-7338 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 04/12/200	Amount of Each Receipt this Period \$200.00
D. Full Name, Mailing Address and Zip Code Matilda Luther 6 Gunpowder Road Mechanicsburg, PA 17055-7338 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> \$600.00	Date (month, day, year) 04/19/200	Amount of Each Receipt this Period \$500.00
E. Full Name, Mailing Address and Zip Code Matilda Luther 6 Gunpowder Road Mechanicsburg, PA 17055-7338 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> \$1100.00	Date (month, day, year) 06/07/200	Amount of Each Receipt this Period \$300.00
F. Full Name, Mailing Address and Zip Code Matilda Luther 6 Gunpowder Road Mechanicsburg, PA 17055-7338 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> \$1350.00	Date (month, day, year) 06/07/200	Amount of Each Receipt this Period \$250.00 (Refunded \$150 on 7/15/00)
G. Full Name, Mailing Address and Zip Code Marian Lynch 1326 Franklin Avenue Grand Haven, MI 49417-1646 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Retired Occupation Retired Aggregate Year-to-Date -> \$200.00	Date (month, day, year) 04/12/200	Amount of Each Receipt this Period \$100.00

SUBTOTAL of Receipts This Page (optional)

\$1415.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 50 OF 90
FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Marian Lynch 1326 Franklin Avenue Grand Haven, MI 49417-1646 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$50.00
B. Full Name, Mailing Address and Zip Code Marian Lynch 1326 Franklin Avenue Grand Haven, MI 49417-1646 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$275.00	Date (month, day, year) 06/07/200	Amount of Each Receipt this Period \$25.00
C. Full Name, Mailing Address and Zip Code MS Band of Choctaw I P.O. Box 6010 Philadelphia, MS 39350- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer MS Band of Choctaw Indians Occupation Choctaw Nation Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 04/07/200	Amount of Each Receipt this Period \$1000.00
D. Full Name, Mailing Address and Zip Code Maude Manuel 11433 145th Avenue Ottumwa, IA 52501-8222 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$100.00	Date (month, day, year) 04/12/200	Amount of Each Receipt this Period \$25.00
E. Full Name, Mailing Address and Zip Code Maude Manuel 11433 145th Avenue Ottumwa, IA 52501-8222 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$115.00	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$15.00
F. Full Name, Mailing Address and Zip Code Maude Manuel 11433 145th Avenue Ottumwa, IA 52501-8222 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$140.00	Date (month, day, year) 05/10/200	Amount of Each Receipt this Period \$25.00
G. Full Name, Mailing Address and Zip Code Maude Manuel 11433 145th Avenue Ottumwa, IA 52501-8222 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$155.00	Date (month, day, year) 05/30/200	Amount of Each Receipt this Period \$15.00

SUBTOTAL of Receipts This Page (optional)

\$1155.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

 PAGE 51 OF 90
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Maude Manuel 11433 145th Avenue Ottumwa, IA 52501-8222 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date ->	Date (month, day, year) 06/12/200	Amount of Each Receipt this Period \$50.00
B. Full Name, Mailing Address and Zip Code Maude Manuel 11433 145th Avenue Ottumwa, IA 52501-8222 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date ->	Date (month, day, year) 06/21/200	Amount of Each Receipt this Period \$35.00
C. Full Name, Mailing Address and Zip Code Art Martinez 940 Cowles St. Fairbanks, AK 99701-4312 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer ARCTIC BOWL Occupation Managing Partner Aggregate Year-to-Date ->	Date (month, day, year) 04/05/200	Amount of Each Receipt this Period \$50.00
D. Full Name, Mailing Address and Zip Code Art Martinez 940 Cowles St. Fairbanks, AK 99701-4312 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer ARCTIC BOWL Occupation Managing Partner Aggregate Year-to-Date ->	Date (month, day, year) 06/07/200	Amount of Each Receipt this Period \$50.00
E. Full Name, Mailing Address and Zip Code Art Martinez 940 Cowles St. Fairbanks, AK 99701-4312 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer ARCTIC BOWL Occupation Managing Partner Aggregate Year-to-Date ->	Date (month, day, year) 06/07/200	Amount of Each Receipt this Period \$50.00
F. Full Name, Mailing Address and Zip Code Gilbert Mason P.O. Box 178 Goose Creek, SC 29445-0178 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date ->	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$25.00
G. Full Name, Mailing Address and Zip Code Gilbert Mason P.O. Box 178 Goose Creek, SC 29445-0178 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date ->	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$25.00

SUBTOTAL of Receipts This Page (optional)

\$285.00

TOTAL This Period [last page this line number only]

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE OF
52 90
FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Gilbert Mason P.O. Box 178 Goose Creek, SC 29445-0178 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$175.00	Date (month, day, year) 05/18/200	Amount of Each Receipt this Period \$25.00
B. Full Name, Mailing Address and Zip Code Gilbert Mason P.O. Box 178 Goose Creek, SC 29445-0178 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$200.00	Date (month, day, year) 05/18/200	Amount of Each Receipt this Period \$25.00
C. Full Name, Mailing Address and Zip Code Gilbert Mason P.O. Box 178 Goose Creek, SC 29445-0178 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$215.00	Date (month, day, year) 05/25/200	Amount of Each Receipt this Period \$15.00
D. Full Name, Mailing Address and Zip Code Gilbert Mason P.O. Box 178 Goose Creek, SC 29445-0178 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$240.00	Date (month, day, year) 06/30/200	Amount of Each Receipt this Period \$25.00
E. Full Name, Mailing Address and Zip Code Judy Mason 314 Marson Trigg Road Seminary, MS 39479- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Mason's Lumber Company Occupation Owner Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 05/05/200	Amount of Each Receipt this Period \$250.00
F. Full Name, Mailing Address and Zip Code Martha Mason 2529 Mcallister Street San Francisco, CA 94118-4221 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer RED SQUARE PHAR Occupation Pharmacist Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 06/12/200	Amount of Each Receipt this Period \$100.00
G. Full Name, Mailing Address and Zip Code Bertha Mc Gaughey 40057 18th Street W. Palmdale, CA 93551-3226 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Homemaker Aggregate Year-to-Date -> \$9.00	Date (month, day, year) 05/15/200	Amount of Each Receipt this Period \$9.00

SUBTOTAL of Receipts This Page (optional)

\$449.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 53 OF 90
FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Bertha Mc Gaughey 40057 18th Street W. Palmdale, CA 93551-3226 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Homemaker Aggregate Year-to-Date -> \$59.00	Date (month, day, year) 05/17/200	Amount of Each Receipt this Period \$50.00
B. Full Name, Mailing Address and Zip Code Bertha Mc Gaughey 40057 18th Street W. Palmdale, CA 93551-3226 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Homemaker Aggregate Year-to-Date -> \$109.00	Date (month, day, year) 06/08/200	Amount of Each Receipt this Period \$50.00
C. Full Name, Mailing Address and Zip Code Bertha Mc Gaughey 40057 18th Street W. Palmdale, CA 93551-3226 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Homemaker Aggregate Year-to-Date -> \$224.00	Date (month, day, year) 06/09/200	Amount of Each Receipt this Period \$115.00
D. Full Name, Mailing Address and Zip Code C Mc Whorter 115 Kolb Road Houston, TX 77017-7302 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$200.00	Date (month, day, year) 04/12/200	Amount of Each Receipt this Period \$200.00
E. Full Name, Mailing Address and Zip Code C Mc Whorter 115 Kolb Road Houston, TX 77017-7302 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$350.00	Date (month, day, year) 05/25/200	Amount of Each Receipt this Period \$150.00
F. Full Name, Mailing Address and Zip Code Glenn McCullough 2404 Parkway Drive Tupelo, MS 38801- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer None Occupation Retired Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 04/07/200	Amount of Each Receipt this Period \$1000.00
G. Full Name, Mailing Address and Zip Code Michael McBiroy 125 Bedford Road Hattiesburg, MS 39401- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Occupation Investments Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 04/25/200	Amount of Each Receipt this Period \$500.00

SUBTOTAL of Receipts This Page (optional)

\$2065.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 54 OF 90
FOR LINE NUMBER
11(a)(i)

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 campaign purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Paul McMullan P.O. Drawer 16868 Hattiesburg, MS 39402-6868 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Occupation Investments Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 04/18/200	Amount of Each Receipt this Period \$500.00
B. Full Name, Mailing Address and Zip Code Willard McEachern 1697 Wadley Rd. Macon, GA 31220-5628 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$200.00	Date (month, day, year) 05/18/200	Amount of Each Receipt this Period \$100.00
C. Full Name, Mailing Address and Zip Code Willard McEachern 1697 Wadley Rd. Macon, GA 31220-5628 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 06/14/200	Amount of Each Receipt this Period \$100.00
D. Full Name, Mailing Address and Zip Code John McGee 4020 South Q Street Fort Smith, AR 72903-3436 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$150.00	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$50.00
E. Full Name, Mailing Address and Zip Code John McGee 4020 South Q Street Fort Smith, AR 72903-3436 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$185.00	Date (month, day, year) 05/24/200	Amount of Each Receipt this Period \$35.00
F. Full Name, Mailing Address and Zip Code John McGee 4020 South Q Street Fort Smith, AR 72903-3436 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$235.00	Date (month, day, year) 06/07/200	Amount of Each Receipt this Period \$50.00
G. Full Name, Mailing Address and Zip Code Marion Meadows 1417 N. Mack Smith Rd Apt 103 Chattanooga, TN 37412-3989 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$180.00	Date (month, day, year) 04/07/200	Amount of Each Receipt this Period \$50.00

SUBTOTAL of Receipts This Page (optional)

\$885.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 55 OF 90
FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Marion Meadows 1417 N. Mack Smith Rd Apt 103 Chattanooga, TN 37412-3989 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$230.00	Date (month, day, year) 05/05/200	Amount of Each Receipt this Period \$50.00
B. Full Name, Mailing Address and Zip Code Marion Meadows 1417 N. Mack Smith Rd Apt 103 Chattanooga, TN 37412-3989 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$330.00	Date (month, day, year) 05/17/200	Amount of Each Receipt this Period \$100.00
C. Full Name, Mailing Address and Zip Code Marion Meadows 1417 N. Mack Smith Rd Apt 103 Chattanooga, TN 37412-3989 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$370.00	Date (month, day, year) 05/19/200	Amount of Each Receipt this Period \$40.00
D. Full Name, Mailing Address and Zip Code Marion Meadows 1417 N. Mack Smith Rd Apt 103 Chattanooga, TN 37412-3989 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$420.00	Date (month, day, year) 06/16/200	Amount of Each Receipt this Period \$50.00
E. Full Name, Mailing Address and Zip Code Keith Melancon 237 Tidewater Road Hattiesburg, MS 39402- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Southern Bone and Joint Occupation Orthopaedic Surgeon Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 04/25/200	Amount of Each Receipt this Period \$500.00
F. Full Name, Mailing Address and Zip Code Earle Mallett Us 700 Mease Plaza, #701 Dunedin, FL 34698-6636 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$350.00	Date (month, day, year) 04/07/200	Amount of Each Receipt this Period \$100.00
G. Full Name, Mailing Address and Zip Code Earle Mallett Us 700 Mease Plaza, #701 Dunedin, FL 34698-6636 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$600.00	Date (month, day, year) 05/01/200	Amount of Each Receipt this Period \$250.00

SUBTOTAL of Receipts This Page (optional)

\$1090.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 56 OF 90
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Ruth Merillat 860 Richlyn Drive Adrian, MI 49221-9298 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 05/30/200	Amount of Each Receipt this Period \$250.00
B. Full Name, Mailing Address and Zip Code Harvey Meyerhoff 25 South Charles Street Suite 2100 Baltimore, MD 21201- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer None Occupation Retired Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 04/07/200	Amount of Each Receipt this Period \$1000.00
C. Full Name, Mailing Address and Zip Code Anthony Michel 142D Sheridan Road, #5-a Wilmette, IL 60091-1841 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$800.00	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$500.00
D. Full Name, Mailing Address and Zip Code Charles Miller Po Box 480686 Linden, AL 36748-0686 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Occupation Land Management Aggregate Year-to-Date -> \$600.00	Date (month, day, year) 04/07/200	Amount of Each Receipt this Period \$300.00
E. Full Name, Mailing Address and Zip Code Charles Miller Po Box 480686 Linden, AL 36748-0686 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Occupation Land Management Aggregate Year-to-Date -> \$625.00	Date (month, day, year) 04/19/200	Amount of Each Receipt this Period \$25.00
F. Full Name, Mailing Address and Zip Code Violet Miller 408 Warab Street Boscobel, WI 53805-1366 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$445.00	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$65.00
G. Full Name, Mailing Address and Zip Code Violet Miller 408 Warab Street Boscobel, WI 53805-1366 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$460.00	Date (month, day, year) 04/19/200	Amount of Each Receipt this Period \$15.00

SUBTOTAL of Receipts This Page (optional)

\$2155.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE	OF
57	90
FOR LINE NUMBER	
1142131	

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NAME OF COMMITTEE (in Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Violet Miller 408 Warah Street Boscobel, WI 53805-1366 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$540.00	Date (month, day, year) 05/17/200	Amount of Each Receipt this Period \$80.00
B. Full Name, Mailing Address and Zip Code Violet Miller 408 Warah Street Boscobel, WI 53805-1366 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$580.00	Date (month, day, year) 06/21/200	Amount of Each Receipt this Period \$40.00
C. Full Name, Mailing Address and Zip Code Lewis Minter 8810 Lawndell Rd Richmond, VA 23229-3130 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 05/23/200	Amount of Each Receipt this Period \$300.00
D. Full Name, Mailing Address and Zip Code Ethan Moore 815 Hardy Street Hattiesburg, MS 39401- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Moore Funeral Service Occupation Owner Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 04/25/200	Amount of Each Receipt this Period \$500.00
E. Full Name, Mailing Address and Zip Code H. A. Moore P.O. Box 95 Hattiesburg, MS 39403- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Occupation Attorney Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 05/05/200	Amount of Each Receipt this Period \$250.00
F. Full Name, Mailing Address and Zip Code Joseph Moore 2000 Washington Street San Francisco, CA 94109-2844 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$535.00	Date (month, day, year) 04/12/200	Amount of Each Receipt this Period \$274.00
G. Full Name, Mailing Address and Zip Code Fannie Moore Post Office Box 9867 Birmingham, AL 35211-2000 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$200.00	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$100.00

SUBTOTAL of Receipts This Page (optional)

\$1544.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Primary PagePAGE 58 OF 90
FOR LINE NUMBER 11 | a | i |

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Fannie Moore Post Office Box 9867 Birmingham, AL 35211-2000 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 06/07/200	Amount of Each Receipt this Period \$100.00
B. Full Name, Mailing Address and Zip Code Ruth Mosher 524 Allen Street Lansing, MI 48912-2603 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 06/26/200	Amount of Each Receipt this Period \$150.00
C. Full Name, Mailing Address and Zip Code Betty Munson Po Box 1232 Woodruff, WI 54568-1232 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Housewife Occupation Retired Aggregate Year-to-Date -> \$100.00	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$50.00
D. Full Name, Mailing Address and Zip Code Betty Munson Po Box 1232 Woodruff, WI 54568-1232 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Housewife Occupation Retired Aggregate Year-to-Date -> \$125.00	Date (month, day, year) 05/15/200	Amount of Each Receipt this Period \$25.00
E. Full Name, Mailing Address and Zip Code Betty Munson Po Box 1232 Woodruff, WI 54568-1232 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Housewife Occupation Retired Aggregate Year-to-Date -> \$155.00	Date (month, day, year) 05/23/200	Amount of Each Receipt this Period \$30.00
F. Full Name, Mailing Address and Zip Code Betty Munson Po Box 1232 Woodruff, WI 54568-1232 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Housewife Occupation Retired Aggregate Year-to-Date -> \$205.00	Date (month, day, year) 06/09/200	Amount of Each Receipt this Period \$50.00
G. Full Name, Mailing Address and Zip Code Betty Munson Po Box 1232 Woodruff, WI 54568-1232 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Housewife Occupation Retired Aggregate Year-to-Date -> \$255.00	Date (month, day, year) 06/16/200	Amount of Each Receipt this Period \$50.00

SUBTOTAL of Receipts This Page (optional)

\$455.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 59 OF 90
FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (in full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Betty Munson Po Box 1232 Woodruff, WI 54568-1232 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Housewife Occupation Retired Aggregate Year-to-Date -> \$305.00	Date (month, day, year) 06/30/200	Amount of Each Receipt this Period \$50.00
B. Full Name, Mailing Address and Zip Code Harold Murphree 1604 Northwood Drive N.W. Cullman, AL 35058-1618 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$150.00	Date (month, day, year) 05/23/200	Amount of Each Receipt this Period \$50.00
C. Full Name, Mailing Address and Zip Code Harold Murphree 1604 Northwood Drive N.W. Cullman, AL 35058-1618 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 06/30/200	Amount of Each Receipt this Period \$100.00
D. Full Name, Mailing Address and Zip Code Donald Murray 1117 Panorama Dr Arcadia, CA 91007-6133 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$450.00	Date (month, day, year) 04/27/200	Amount of Each Receipt this Period \$50.00
E. Full Name, Mailing Address and Zip Code Donald Murray 1117 Panorama Dr Arcadia, CA 91007-6133 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 05/30/200	Amount of Each Receipt this Period \$50.00
F. Full Name, Mailing Address and Zip Code L Mustard 502 Glen Road Weston, MA 02493-1418 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired-account Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 06/08/200	Amount of Each Receipt this Period \$250.00
G. Full Name, Mailing Address and Zip Code L Mustard 502 Glen Road Weston, MA 02493-1418 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired-account Aggregate Year-to-Date -> \$525.00	Date (month, day, year) 06/12/200	Amount of Each Receipt this Period \$275.00

SUBTOTAL of Receipts This Page (optional)

\$825.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 60 OF 90
FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code John Naisby Po Box 245 Franklin, NJ 07416-0245 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$200.00	Date (month, day, year) 04/12/200	Amount of Each Receipt this Period \$100.00
B. Full Name, Mailing Address and Zip Code John Naisby Po Box 245 Franklin, NJ 07416-0245 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$225.00	Date (month, day, year) 04/27/200	Amount of Each Receipt this Period \$25.00
C. Full Name, Mailing Address and Zip Code John Naisby Po Box 245 Franklin, NJ 07416-0245 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$275.00	Date (month, day, year) 06/28/200	Amount of Each Receipt this Period \$50.00
D. Full Name, Mailing Address and Zip Code James Nall 98 Alexander Dr. Atmore, AL 36502-2802 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$275.00	Date (month, day, year) 06/07/200	Amount of Each Receipt this Period \$100.00
E. Full Name, Mailing Address and Zip Code Lester Naylor 99 Sunset Drive Sarasota, FL 34236-5572 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$100.00	Date (month, day, year) 04/12/200	Amount of Each Receipt this Period \$50.00
F. Full Name, Mailing Address and Zip Code Lester Naylor 99 Sunset Drive Sarasota, FL 34236-5572 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$200.00	Date (month, day, year) 04/19/200	Amount of Each Receipt this Period \$100.00
G. Full Name, Mailing Address and Zip Code Lester Naylor 99 Sunset Drive Sarasota, FL 34236-5572 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 05/17/200	Amount of Each Receipt this Period \$50.00

SUBTOTAL of Receipts This Page (optional)

\$475.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE	OF
61	90
FOR LINE NUMBER	
11(a)(i)	

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Gloria Mc Quinn 6800 Fleetwood Road, Apt. 520 Mc Lean, VA 22101-3607 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$350.00	Date (month, day, year) 05/15/200	Amount of Each Receipt this Period \$250.00
B. Full Name, Mailing Address and Zip Code Gloria Mc Quinn 6800 Fleetwood Road, Apt. 520 Mc Lean, VA 22101-3607 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$450.00	Date (month, day, year) 05/19/200	Amount of Each Receipt this Period \$100.00
C. Full Name, Mailing Address and Zip Code Gloria Mc Quinn 6800 Fleetwood Road, Apt. 520 Mc Lean, VA 22101-3607 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$550.00	Date (month, day, year) 06/12/200	Amount of Each Receipt this Period \$100.00
D. Full Name, Mailing Address and Zip Code Mark Nelson 32 Crimson Wood Hattiesburg, MS 39402- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Bryan, Nelson, Randolph, et al Occupation Attorney Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 04/18/200	Amount of Each Receipt this Period \$500.00
E. Full Name, Mailing Address and Zip Code Jean Nemitz 2230 Lake Park Drive Apt. 88 2230 Lake Park Drive San Jacinto, CA 92583-7488 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$120.00	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$60.00
F. Full Name, Mailing Address and Zip Code Jean Nemitz 2230 Lake Park Drive Apt. 88 2230 Lake Park Drive San Jacinto, CA 92583-7488 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$170.00	Date (month, day, year) 06/08/200	Amount of Each Receipt this Period \$50.00
G. Full Name, Mailing Address and Zip Code Jean Nemitz 2230 Lake Park Drive Apt. 88 2230 Lake Park Drive San Jacinto, CA 92583-7488 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$260.00	Date (month, day, year) 06/14/200	Amount of Each Receipt this Period \$90.00

SUBTOTAL of Receipts This Page (optional)

\$1150.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

 PAGE 62 OF 90
FOR LINE NUMBER 11(a)(1)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Jim Nicholson 120 South 28th Avenue Hattiesburg, MS 39401- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Occupation Orthodontist Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 04/25/200	Amount of Each Receipt this Period \$250.00
B. Full Name, Mailing Address and Zip Code James Nielson Po Box 2850 Cody, WY 82414-2850 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Occupation Executive Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 06/16/200	Amount of Each Receipt this Period \$500.00
C. Full Name, Mailing Address and Zip Code Lydia Norie 2531 S. Berry Road Norman, OK 73072-6904 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 05/05/200	Amount of Each Receipt this Period \$250.00
D. Full Name, Mailing Address and Zip Code James Okopski 3847 W 58th Street Chicago, IL 60629-9128 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Semi-retired Aggregate Year-to-Date -> \$150.00	Date (month, day, year) 04/07/200	Amount of Each Receipt this Period \$40.00
E. Full Name, Mailing Address and Zip Code James Okopski 3847 W 58th Street Chicago, IL 60629-9128 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Semi-retired Aggregate Year-to-Date -> \$175.00	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$25.00
F. Full Name, Mailing Address and Zip Code James Okopski 3847 W 58th Street Chicago, IL 60629-9128 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Semi-retired Aggregate Year-to-Date -> \$190.00	Date (month, day, year) 05/17/200	Amount of Each Receipt this Period \$15.00
G. Full Name, Mailing Address and Zip Code James Okopaki 3847 W 58th Street Chicago, IL 60629-9128 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Semi-retired Aggregate Year-to-Date -> \$215.00	Date (month, day, year) 05/17/200	Amount of Each Receipt this Period \$25.00

SUBTOTAL of Receipts This Page (optional)

\$1105.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE	OF
63	90
FOR LINE NUMBER	
11(a)(i)	

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NAME OF COMMITTEE (in full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code James Okopski 3847 W 58th Street Chicago, IL 60629-9128 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Semi-retired Aggregate Year-to-Date -> \$235.00	Date (month, day, year) 06/14/200	Amount of Each Receipt this Period \$20.00
B. Full Name, Mailing Address and Zip Code James Okopski 3847 W 58th Street Chicago, IL 60629-9128 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Semi-retired Aggregate Year-to-Date -> \$260.00	Date (month, day, year) 06/28/200	Amount of Each Receipt this Period \$25.00
C. Full Name, Mailing Address and Zip Code Rebecca Oliver 230 West Canebroke Boulevard Hattiesburg, MS 39402- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Forrest General Hospital Occupation Hospital Administrator Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 04/25/200	Amount of Each Receipt this Period \$500.00
D. Full Name, Mailing Address and Zip Code William Paddock Po Box 39676 Rochester, NY 14604-9676 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Occupation Consultant Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 04/19/200	Amount of Each Receipt this Period \$100.00
E. Full Name, Mailing Address and Zip Code W. A. Payne P.O. Box 1267 Hattiesburg, MS 39401- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Medical Systems, Inc. Occupation Owner and CEO Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 04/18/200	Amount of Each Receipt this Period \$250.00
F. Full Name, Mailing Address and Zip Code Florence Pazda Po Box 1044 Perth Amboy, NJ 08862-1044 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$200.00	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$100.00
G. Full Name, Mailing Address and Zip Code Florence Pazda Po Box 1044 Perth Amboy, NJ 08862-1044 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 05/17/200	Amount of Each Receipt this Period \$100.00

SUBTOTAL of Receipts This Page (optional)

\$1095.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary PagePAGE OF
64 90
FOR LINE NUMBER
11(a)(1)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code William Peebles P.O. Box 969 Hattiesburg, MS 39403-0969 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Occupation Attorney Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 04/18/200	Amount of Each Receipt this Period \$500.00
B. Full Name, Mailing Address and Zip Code James Perry P.O. Box 2572 Jackson, MS 39207- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Rosedale Fabricators, LLC Occupation Manufacturer Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 04/07/200	Amount of Each Receipt this Period \$1000.00
C. Full Name, Mailing Address and Zip Code Sara Peters 3201 Plumas Street, #178 Reno, NV 89509-4767 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$710.00	Date (month, day, year) 05/12/200	Amount of Each Receipt this Period \$50.00
D. Full Name, Mailing Address and Zip Code Sara Peters 3201 Plumas Street, #178 Reno, NV 89509-4767 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$735.00	Date (month, day, year) 05/23/200	Amount of Each Receipt this Period \$25.00
E. Full Name, Mailing Address and Zip Code Tom Phillips 108 West Canebroke Blvd. Hattiesburg, MS 39402- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Occupation Dentist Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 04/18/200	Amount of Each Receipt this Period \$250.00
F. Full Name, Mailing Address and Zip Code Elizabeth Plank 10921 Terrace Way Kelseyville, CA 95451 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$1500.00	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$500.00
G. Full Name, Mailing Address and Zip Code Elizabeth Plank 10921 Terrace Way Kelseyville, CA 95451 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$1750.00	Date (month, day, year) 05/05/200 (Refunded \$350 on 7/15/00)	Amount of Each Receipt this Period \$250.00

SUBTOTAL of Receipts This Page (optional)

\$2575.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 65 OF 90
FOR LINE NUMBER
11(a)(1)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Elizabeth Plank 10921 Terrace Way Kelseyville, CA 95451 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$1850.00	Date (month, day, year) 05/19/200 (Refunded \$850 on 7/15/00)	Amount of Each Receipt this Period \$100.00
B. Full Name, Mailing Address and Zip Code Richard Fogue 1301 East 9th St., #1300 Cleveland, OH 44114-1882 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer DIX & EATON Occupation Public Relation Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 06/28/200	Amount of Each Receipt this Period \$250.00
C. Full Name, Mailing Address and Zip Code Lowell Powers 4939 Erie Ave. Office Cincinnati, OH 45208-1967 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$525.00	Date (month, day, year) 04/12/200 -	Amount of Each Receipt this Period \$300.00
D. Full Name, Mailing Address and Zip Code Lowell Powers 4939 Erie Ave. Office Cincinnati, OH 45208-1967 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$925.00	Date (month, day, year) 06/08/200	Amount of Each Receipt this Period \$300.00
E. Full Name, Mailing Address and Zip Code Evelyn Pozzo 46 Mertz Avenue Belleville, NJ 07109-2110 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired School Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 06/08/200	Amount of Each Receipt this Period \$50.00
F. Full Name, Mailing Address and Zip Code Evelyn Pozzo 46 Mertz Avenue Belleville, NJ 07109-2110 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired School Aggregate Year-to-Date -> \$350.00	Date (month, day, year) 06/14/200	Amount of Each Receipt this Period \$50.00
G. Full Name, Mailing Address and Zip Code Lena Pruette 413 Mariposa Street Carlsbad, NM 88220-5887 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$275.00	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$25.00

SUBTOTAL of Receipts This Page (optional)

\$1075.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 66 OF 90
FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Lena Pruette 413 Mariposa Street Carlsbad, NM 88220-5887 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 05/19/200	Amount of Each Receipt this Period \$25.00
B. Full Name, Mailing Address and Zip Code Olgierd Prus 51 Dogwood Road Morristown, NJ 07960-5935 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer INVESTOR Occupation Individual Aggregate Year-to-Date -> \$360.00	Date (month, day, year) 06/28/200	Amount of Each Receipt this Period \$360.00
C. Full Name, Mailing Address and Zip Code Kathryn Pugnier 6345 E. Evergreen Street Mesa, AZ 85205 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 05/17/200	Amount of Each Receipt this Period \$500.00
D. Full Name, Mailing Address and Zip Code Robert Randall 70 Laurel Dr Woodstock, CT 06281-3018 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self-Employed Occupation Semi-retired Aggregate Year-to-Date -> \$2000.00	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$1000.00
E. Full Name, Mailing Address and Zip Code Robert Randall 70 Laurel Dr Woodstock, CT 06281-3018 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self-Employed Occupation Semi-retired Aggregate Year-to-Date -> \$3000.00	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$1000.00
F. Full Name, Mailing Address and Zip Code M. Randolph P.O. Box 18109 Hattiesburg, MS 39404- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Occupation Attorney Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 04/18/200	Amount of Each Receipt this Period \$500.00
G. Full Name, Mailing Address and Zip Code Evelyn Rankin 2660 Peachtree Road NW #20 H Atlanta, GA 30305-3678 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer THE VARSITY, IN Occupation Cob-cen Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 04/24/200	Amount of Each Receipt this Period \$500.00

SUBTOTAL of Receipts This Page (optional)

\$3885.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 67 OF 90
FOR LINE NUMBER 111a(i)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code William Ray 1 North Point Hattiesburg, MS 39402- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Asbury Foundation Occupation President/Chairman Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 04/18/200	Amount of Each Receipt this Period \$250.00
B. Full Name, Mailing Address and Zip Code David Reavis 8404 Mono Lake Dr San Diego, CA 92119-3110 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$235.00	Date (month, day, year) 05/01/200	Amount of Each Receipt this Period \$35.00
C. Full Name, Mailing Address and Zip Code Clifford Reglinski 172 Sandra Drive East Hartford, CT 06118-1947 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer INTERNATIONAL F Occupation Inspector Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$50.00
D. Full Name, Mailing Address and Zip Code Fritz Reid Po Box 113 Mahwah, NJ 07430-0111 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$150.00	Date (month, day, year) 05/05/200	Amount of Each Receipt this Period \$50.00
E. Full Name, Mailing Address and Zip Code Fritz Reid Po Box 111 Mahwah, NJ 07430-0111 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 06/30/200	Amount of Each Receipt this Period \$100.00
F. Full Name, Mailing Address and Zip Code George Reinhardt 39 Gramercy Park N., Apt. #16 New York, NY 10010-6304 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$150.00	Date (month, day, year) 04/12/200	Amount of Each Receipt this Period \$50.00
G. Full Name, Mailing Address and Zip Code George Reinhardt 39 Gramercy Park N., Apt. #16 New York, NY 10010-6304 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$200.00	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$50.00

SUBTOTAL of Receipts This Page (optional)

\$585.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

 PAGE 68 OF 90
FOR LINE NUMBER 11(a)(i)

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 NAME OF COMMITTEE (in Full)
Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code George Reinhardt 39 Gramercy Park N., Apt. #16 New York, NY 10010-6304 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 05/30/2000 Amount of Each Receipt this Period \$50.00
B. Full Name, Mailing Address and Zip Code Ronald Reynolds 9912 Juniper Hill Rd. Rockville, MD 20850-5426 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer ACCOUNTANT Occupation Consultant Aggregate Year-to-Date -> \$200.00	Date (month, day, year) 04/24/2000 Amount of Each Receipt this Period \$50.00
C. Full Name, Mailing Address and Zip Code Ronald Reynolds 9912 Juniper Hill Rd. Rockville, MD 20850-5426 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer ACCOUNTANT Occupation Consultant Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 06/28/2000 Amount of Each Receipt this Period \$100.00
D. Full Name, Mailing Address and Zip Code F Richards 4949 Braesheather Houston, TX 77096-4202 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 05/15/2000 Amount of Each Receipt this Period \$500.00
E. Full Name, Mailing Address and Zip Code Helen Richardson 3001 Veasey Terr NW #1508 Washington, DC 20008-5454 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$950.00	Date (month, day, year) 05/18/2000 Amount of Each Receipt this Period \$500.00
F. Full Name, Mailing Address and Zip Code Bayard Roberts 53 Pasture Ln Bryn Mawr, PA 19010-1763 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$315.00	Date (month, day, year) 05/12/2000 Amount of Each Receipt this Period \$15.00
G. Full Name, Mailing Address and Zip Code Bayard Roberts 53 Pasture Ln Bryn Mawr, PA 19010-1763 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$415.00	Date (month, day, year) 06/08/2000 Amount of Each Receipt this Period \$100.00

SUBTOTAL of Receipts This Page (optional)

\$1315.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 69 OF 90
FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Bayard Roberts 53 Pasture Ln Bryn Mawr, PA 19010-1763 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$465.00	Date (month, day, year) 06/09/200	Amount of Each Receipt this Period \$50.00
B. Full Name, Mailing Address and Zip Code Don Roberts 15 Moss Forest Circle Jackson, MS 39211- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Bell South Occupation Vice President Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 04/25/200	Amount of Each Receipt this Period \$250.00
C. Full Name, Mailing Address and Zip Code Frances Robinson 16877 West 67th Circle Arvada, CO 80007-6607 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Homemaker Aggregate Year-to-Date -> \$325.00	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$325.00
D. Full Name, Mailing Address and Zip Code Frances Robinson 16877 West 67th Circle Arvada, CO 80007-6607 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Homemaker Aggregate Year-to-Date -> \$350.00	Date (month, day, year) 05/15/200	Amount of Each Receipt this Period \$25.00
E. Full Name, Mailing Address and Zip Code Robert Robinson 3510 Kings Highway Jackson, MS 39216- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$400.00	Date (month, day, year) 05/05/200	Amount of Each Receipt this Period \$400.00
F. Full Name, Mailing Address and Zip Code Robert Rogers 1 Grand Bayou Circle Hattiesburg, MS 39402- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Occupation Attorney Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 05/11/200	Amount of Each Receipt this Period \$250.00
G. Full Name, Mailing Address and Zip Code Sarah Rollins 65 Ruggles Ln Milton, MA 02186-2923 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$100.00	Date (month, day, year) 05/30/200	Amount of Each Receipt this Period \$100.00

SUBTOTAL of Receipts This Page (optional)

\$1400.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 70 OF 90
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Sarah Rollins 65 Ruggles Ln Milton, MA 02186-2923 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 06/14/200	Amount of Each Receipt this Period \$200.00
B. Full Name, Mailing Address and Zip Code Marie Roos 2725 Colonial Parkway Fort Worth, TX 76109-1212 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$850.00	Date (month, day, year) 06/09/200	Amount of Each Receipt this Period \$510.00
C. Full Name, Mailing Address and Zip Code Douglas Rouse 111 Bedford Road Hattiesburg, MS 39402- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Southern Bone and Joint Occupation Orthopaedic Surgeon Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 04/18/200	Amount of Each Receipt this Period \$500.00
D. Full Name, Mailing Address and Zip Code Buford Salmon 1525 Lake Side Drive Birmingham, AL 35235 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Corp. President Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 06/14/200	Amount of Each Receipt this Period \$200.00
E. Full Name, Mailing Address and Zip Code Norman Sandell 307 Coldeway Drive, #f7 Punta Gorda, FL 33950-5283 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$150.00	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$50.00
F. Full Name, Mailing Address and Zip Code Norman Sandell 307 Coldeway Drive, #f7 Punta Gorda, FL 33950-5283 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 06/01/200	Amount of Each Receipt this Period \$150.00
G. Full Name, Mailing Address and Zip Code Norman Sandell 307 Coldeway Drive, #f7 Punta Gorda, FL 33950-5283 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$400.00	Date (month, day, year) 06/09/200	Amount of Each Receipt this Period \$100.00

SUBTOTAL of Receipts This Page (optional)

\$1710.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Schedule PagePAGE 71 OF 90
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Norman Sandell 307 Coldway Drive, #17 Punta Gorda, FL 33950-5283 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 06/12/200	Amount of Each Receipt this Period \$100.00
B. Full Name, Mailing Address and Zip Code Sarkis Sarkisian 1855 Soledad Ave La Jolla, CA 92037-3821 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$370.00	Date (month, day, year) 04/27/200	Amount of Each Receipt this Period \$100.00
C. Full Name, Mailing Address and Zip Code Theodore Schlaegel 1113 Linden Dr. Bloomington, IN 47408 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$160.00	Date (month, day, year) 06/07/200	Amount of Each Receipt this Period \$15.00
D. Full Name, Mailing Address and Zip Code Theodore Schlaegel 1113 Linden Dr. Bloomington, IN 47408 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$210.00	Date (month, day, year) 06/28/200	Amount of Each Receipt this Period \$50.00
E. Full Name, Mailing Address and Zip Code Rudolf Schweinberg Village Of Pickering Run 800 Kimberston Rd Apt F11 Phoenixville, PA 19460-4123 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$200.00	Date (month, day, year) 04/12/200	Amount of Each Receipt this Period \$50.00
F. Full Name, Mailing Address and Zip Code Rudolf Schweinberg Village Of Pickering Run 800 Kimberston Rd Apt F11 Phoenixville, PA 19460-4123 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 06/14/200	Amount of Each Receipt this Period \$100.00
G. Full Name, Mailing Address and Zip Code Mary Scott 3075 Cornell Drive Prescott, AZ 86301-4131 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer None Occupation Retired Aggregate Year-to-Date -> \$350.00	Date (month, day, year) 04/07/200	Amount of Each Receipt this Period \$100.00

SUBTOTAL of Receipts This Page (optional)

\$515.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE	72	OF	90
FOR LINE NUMBER			
11(a)(i)			

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NAME OF COMMITTEE (in full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Mary Scott 3075 Corbell Drive Prescott, AZ 86301-4131 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer None Occupation Retired Aggregate Year-to-Date -> \$400.00	Date (month, day, year) 05/10/200	Amount of Each Receipt this Period \$50.00
B. Full Name, Mailing Address and Zip Code Mary Scott 3075 Cornell Drive Prescott, AZ 86301-4131 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer None Occupation Retired Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 06/08/200	Amount of Each Receipt this Period \$100.00
C. Full Name, Mailing Address and Zip Code Miriam Seale 85 Longwood Drive Hattiesburg, MS 39402- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 04/25/200	Amount of Each Receipt this Period \$250.00
D. Full Name, Mailing Address and Zip Code Kelly Segars 1507 W. Quitman Street Iuka, MS 38852- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Occupation Physician Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 06/30/200	Amount of Each Receipt this Period \$1000.00
E. Full Name, Mailing Address and Zip Code Sidney Sharp-navy 6976 Salmon Beach Road Anacortes, WA 98221-8620 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer U.S. NAVY/LOCKH Occupation Retired Aggregate Year-to-Date -> \$100.00	Date (month, day, year) 04/07/200	Amount of Each Receipt this Period \$25.00
F. Full Name, Mailing Address and Zip Code Sidney Sharp-navy 6976 Salmon Beach Road Anacortes, WA 98221-8620 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer U.S. NAVY/LOCKH Occupation Retired Aggregate Year-to-Date -> \$150.00	Date (month, day, year) 04/12/200	Amount of Each Receipt this Period \$50.00
G. Full Name, Mailing Address and Zip Code Sidney Sharp-navy 6976 Salmon Beach Road Anacortes, WA 98221-8620 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer U.S. NAVY/LOCKH Occupation Retired Aggregate Year-to-Date -> \$170.00	Date (month, day, year) 04/24/200	Amount of Each Receipt this Period \$20.00

SUBTOTAL of Receipts This Page (optional)

\$1495.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 73 OF 90
FOR LINE NUMBER
11(a)(i)

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)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Sidney Sharp-navy 6976 Salmon Beach Road Anacortes, WA 98221-8620 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer U.S. NAVY/LOCKH Occupation Retired Aggregate Year-to-Date -> \$195.00	Date (month, day, year) 05/19/200	Amount of Each Receipt this Period \$25.00
B. Full Name, Mailing Address and Zip Code Sidney Sharp-navy 6976 Salmon Beach Road Anacortes, WA 98221-8620 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer U.S. NAVY/LOCKH Occupation Retired Aggregate Year-to-Date -> \$220.00	Date (month, day, year) 05/23/200	Amount of Each Receipt this Period \$25.00
C. Full Name, Mailing Address and Zip Code Sidney Sharp-navy 6976 Salmon Beach Road Anacortes, WA 98221-8620 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer U.S. NAVY/LOCKH Occupation Retired Aggregate Year-to-Date -> \$245.00	Date (month, day, year) 05/24/200	Amount of Each Receipt this Period \$25.00
D. Full Name, Mailing Address and Zip Code Sidney Sharp-navy 6976 Salmon Beach Road Anacortes, WA 98221-8620 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer U.S. NAVY/LOCKH Occupation Retired Aggregate Year-to-Date -> \$270.00	Date (month, day, year) 06/14/200	Amount of Each Receipt this Period \$25.00
E. Full Name, Mailing Address and Zip Code Sidney Sharp-navy 6976 Salmon Beach Road Anacortes, WA 98221-8620 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer U.S. NAVY/LOCKH Occupation Retired Aggregate Year-to-Date -> \$290.00	Date (month, day, year) 06/21/200	Amount of Each Receipt this Period \$20.00
F. Full Name, Mailing Address and Zip Code Dorothy Shick 5864 Hwy V Union, MO 63084-3112 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$175.00	Date (month, day, year) 04/07/200	Amount of Each Receipt this Period \$25.00
G. Full Name, Mailing Address and Zip Code Dorothy Shick 5864 Hwy V Union, MO 63084-3112 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$200.00	Date (month, day, year) 05/05/200	Amount of Each Receipt this Period \$25.00

SUBTOTAL of Receipts This Page (optional)

\$170.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

 PAGE 74 OF 90
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (in full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Dorothy Shick 5864 Hwy V Union, MO 63084-3112 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$225.00	Date (month, day, year) 05/11/200 Amount of Each Receipt this Period \$25.00
B. Full Name, Mailing Address and Zip Code Dorothy Shick 5864 Hwy V Union, MO 63084-3112 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 05/19/200 Amount of Each Receipt this Period \$25.00
C. Full Name, Mailing Address and Zip Code Dorothy Shick 5864 Hwy V Union, MO 63084-3112 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 06/08/200 Amount of Each Receipt this Period \$50.00
D. Full Name, Mailing Address and Zip Code W Siedel 1343 Stratford Drive Piqua, OH 45356-4347 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self-Employed Occupation Retired Aggregate Year-to-Date -> \$400.00	Date (month, day, year) 05/10/200 Amount of Each Receipt this Period \$100.00
E. Full Name, Mailing Address and Zip Code Shirley Simons 3122 Stanford Court Tyler, TX 75701-7624 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$450.00	Date (month, day, year) 05/17/200 Amount of Each Receipt this Period \$250.00
F. Full Name, Mailing Address and Zip Code Melvin Simonson 1781 Canty Road D Emerald, WI 54012-8113 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Occupation Retired Aggregate Year-to-Date -> \$150.00	Date (month, day, year) 04/24/200 Amount of Each Receipt this Period \$150.00
G. Full Name, Mailing Address and Zip Code Melvin Simonson 1781 Canty Road D Emerald, WI 54012-8113 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Occupation Retired Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 06/14/200 Amount of Each Receipt this Period \$100.00

SUBTOTAL of Receipts This Page (optional)

\$700.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

 PAGE 75 OF 90
FOR LINE NUMBER 111a11i

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Ray Simpson 1626 South Boulevard Houston, TX 77006-6338 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired	Date (month, day, year) 05/30/200	Amount of Each Receipt this Period \$250.00 Aggregate Year-to-Date -> \$250.00
B. Full Name, Mailing Address and Zip Code H Kent Sinning 600 Iowa Avenue Holton, KS 66436-1627 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer NOT	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$25.00 Aggregate Year-to-Date -> \$175.00
C. Full Name, Mailing Address and Zip Code H Kent Sinning 600 Iowa Avenue Holton, KS 66436-1627 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer NOT	Date (month, day, year) 04/24/200	Amount of Each Receipt this Period \$15.00 Aggregate Year-to-Date -> \$190.00
D. Full Name, Mailing Address and Zip Code H Kent Sinning 600 Iowa Avenue Holton, KS 66436-1627 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer NOT	Date (month, day, year) 06/01/200	Amount of Each Receipt this Period \$25.00 Aggregate Year-to-Date -> \$215.00
E. Full Name, Mailing Address and Zip Code Merl Slankard 430 Georgetown Street Beaumont, TX 77707-1815 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired	Date (month, day, year) 04/27/200	Amount of Each Receipt this Period \$100.00 Aggregate Year-to-Date -> \$150.00
F. Full Name, Mailing Address and Zip Code Merl Slankard 430 Georgetown Street Beaumont, TX 77707-1815 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired	Date (month, day, year) 05/24/200	Amount of Each Receipt this Period \$100.00 Aggregate Year-to-Date -> \$250.00
G. Full Name, Mailing Address and Zip Code Earl Sloan Sloan Elevator P.O. Box 262 Walnut Ridge, AR 72476-0262 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer SELF EMPLOYED	Date (month, day, year) 05/15/200	Amount of Each Receipt this Period \$500.00 Aggregate Year-to-Date -> \$500.00

SUBTOTAL of Receipts This Page (optional)

\$1015.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 76 OF 90
FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Leslie Smith 8545-207 Mission Gorge Rd. Santee, CA 92071 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> \$600.00	Date (month, day, year) 06/07/200	Amount of Each Receipt this Period \$200.00
B. Full Name, Mailing Address and Zip Code Leslie Smith 8545 Mission Gorge Rd., #207 Santee, CA 92071-3617 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$600.00	Date (month, day, year) 04/19/200	Amount of Each Receipt this Period \$100.00
C. Full Name, Mailing Address and Zip Code Jerome Stanek 126 Moorings Park Dr # 1-201 Naples, FL 34105-2149 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$450.00	Date (month, day, year) 05/05/200	Amount of Each Receipt this Period \$250.00
D. Full Name, Mailing Address and Zip Code John Stanley 4305 Shiloh Road Corinth, MS 38834- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Mass Communications Corp. Occupation Vice President Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 04/07/200	Amount of Each Receipt this Period \$500.00
E. Full Name, Mailing Address and Zip Code Ross Stanwood 737 Bridge Rd Northampton, MA 01060-1526 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer None Occupation Retired Aggregate Year-to-Date -> \$600.00	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$150.00
F. Full Name, Mailing Address and Zip Code B Bond Starker P. O. Box 809 Corvallis, OR 97339 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer STARKER Occupation Business/forest Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 06/08/200	Amount of Each Receipt this Period \$500.00
G. Full Name, Mailing Address and Zip Code Edna Striebinger 22701 Lake Road St# 414a Rocky River, OH 44116 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date -> \$750.00	Date (month, day, year) 06/09/200	Amount of Each Receipt this Period \$200.00

SUBTOTAL of Receipts This Page (optional)

\$1900.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 77 OF 90
FOR LINE NUMBER 111a1j1

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Paul Strong 3600 American Way # 310 Missoula, MT 59802 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer PHYSICIAN Occupation Retired Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 06/14/200	Amount of Each Receipt this Period \$100.00
B. Full Name, Mailing Address and Zip Code William Strong 209 Wildwood Trace Hattiesburg, MS 39402- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Southern MS Anesthesia Assoc. Occupation Anesthesiologist Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 04/18/200	Amount of Each Receipt this Period \$500.00
C. Full Name, Mailing Address and Zip Code Pay Surratt-gre Po Box 315 Clint, TX 79836-0315 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Widow Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 05/24/200	Amount of Each Receipt this Period \$500.00
D. Full Name, Mailing Address and Zip Code John Swett 153 Beechwood Rd. Summit, NJ 07901-2004 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer CITIBANK Occupation Retired Banker Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$250.00
E. Full Name, Mailing Address and Zip Code Joe Tatum 14521 Hwy. 15, North Ripley, MS 38663- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Tatum Development Corp. Occupation Professional Engineer Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 05/05/200	Amount of Each Receipt this Period \$500.00
F. Full Name, Mailing Address and Zip Code Robert Tatum 5 Huckleberry Lane Hattiesburg, MS 39402- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer BancorpSouth Occupation Investment Representative Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 04/25/200	Amount of Each Receipt this Period \$250.00
G. Full Name, Mailing Address and Zip Code Lorenzo Taylor 525-55 W. El Norte Parkway Escondido, CA 92026-3907 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$50.00	Date (month, day, year) 05/10/200	Amount of Each Receipt this Period \$50.00

SUBTOTAL of Receipts This Page (optional)

\$2150.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 78 OF 90
FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Lorenzo Taylor 525-55 W. 21 Norte Parkway Escondido, CA 92026-3907 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$150.00	Date (month, day, year) 05/17/200	Amount of Each Receipt this Period \$100.00
B. Full Name, Mailing Address and Zip Code Lorenzo Taylor 525-55 W. 21 Norte Parkway Escondido, CA 92026-3907 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 06/08/200	Amount of Each Receipt this Period \$100.00
C. Full Name, Mailing Address and Zip Code Lora Teague 5110 San Felipe St. 151 Tower Houston, TX 77056-3618 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 05/26/200	Amount of Each Receipt this Period \$500.00
D. Full Name, Mailing Address and Zip Code John Templeton 601 Pembroke Road Bryn Mawr, PA 19010-3613 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer JOHN TEMPLETON Occupation President Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 06/28/200	Amount of Each Receipt this Period \$50.00
E. Full Name, Mailing Address and Zip Code Nancy Templin #31 7425 East Gainey Ranch Road Scottsdale, AZ 85258 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Homemak Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 05/12/200	Amount of Each Receipt this Period \$50.00
F. Full Name, Mailing Address and Zip Code Nancy Templin #31 7425 East Gainey Ranch Road Scottsdale, AZ 85258 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Homemak Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 06/01/200	Amount of Each Receipt this Period \$50.00
G. Full Name, Mailing Address and Zip Code Paul Thiele P.O. Box 1056 Sandersville, GA 31082-1056 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer THIELE KAVLIN C Occupation Executive Aggregate Year-to-Date -> \$1500.00	Date (month, day, year) 05/25/200 (Refunded \$500 on 7/15/00)	Amount of Each Receipt this Period \$500.00

SUBTOTAL of Receipts This Page (optional)

\$1350.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 79 OF 90
FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Anne Thompson 126 Prairie Lane Vinita, OK 74301-4622 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired-educator Aggregate Year-to-Date ->	Date (month, day, year) 04/12/200	Amount of Each Receipt this Period \$50.00
B. Full Name, Mailing Address and Zip Code Anne Thompson 126 Prairie Lane Vinita, OK 74301-4622 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired-educator Aggregate Year-to-Date ->	Date (month, day, year) 05/01/200	Amount of Each Receipt this Period \$50.00
C. Full Name, Mailing Address and Zip Code Anne Thompson 126 Prairie Lane Vinita, OK 74301-4622 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired-educator Aggregate Year-to-Date ->	Date (month, day, year) 06/08/200	Amount of Each Receipt this Period \$50.00
D. Full Name, Mailing Address and Zip Code Anne Thompson 126 Prairie Lane Vinita, OK 74301-4622 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired-educator Aggregate Year-to-Date ->	Date (month, day, year) 06/28/200	Amount of Each Receipt this Period \$50.00
E. Full Name, Mailing Address and Zip Code Susan Thomson-Rutland 50 Golf Club Road Hattiesburg, MS 39402- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Bancorp South Occupation Banker Aggregate Year-to-Date ->	Date (month, day, year) 04/25/200	Amount of Each Receipt this Period \$250.00
F. Full Name, Mailing Address and Zip Code Mary Thorburn 800 Charlotte Road Plainfield, NJ 07060-1949 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date ->	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$150.00
G. Full Name, Mailing Address and Zip Code Mary Thorburn 800 Charlotte Road Plainfield, NJ 07060-1949 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date ->	Date (month, day, year) 06/28/200	Amount of Each Receipt this Period \$300.00

SUBTOTAL of Receipts This Page (optional)

\$900.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule:
for each category of the
Detailed Summary Page

PAGE	OF
80	90
FOR LINE NUMBER	
11(a)(1)	

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Tommy Thornton 137 W. Canebrake Blvd. Hattiesburg, MS 39402- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Hattiesburg Clinic Occupation Executive Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 04/25/200	Amount of Each Receipt this Period \$500.00
B. Full Name, Mailing Address and Zip Code James Tielking Po Box 340 Collinsville, AL 35961-0340 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Disabled Veteran Aggregate Year-to-Date -> \$200.00	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$100.00
C. Full Name, Mailing Address and Zip Code James Tielking Po Box 340 Collinsville, AL 35961-0340 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Disabled Veteran Aggregate Year-to-Date -> \$220.00	Date (month, day, year) 05/17/200	Amount of Each Receipt this Period \$20.00
D. Full Name, Mailing Address and Zip Code James Tielking Po Box 340 Collinsville, AL 35961-0340 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Disabled Veteran Aggregate Year-to-Date -> \$240.00	Date (month, day, year) 06/12/200	Amount of Each Receipt this Period \$20.00
E. Full Name, Mailing Address and Zip Code James Tielking Po Box 340 Collinsville, AL 35961-0340 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Disabled Veteran Aggregate Year-to-Date -> \$260.00	Date (month, day, year) 06/16/200	Amount of Each Receipt this Period \$20.00
F. Full Name, Mailing Address and Zip Code Clare Townsend 1400 N Drake Rd Apt 326 Kalamazoo, MI 49006-3929 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$170.00	Date (month, day, year) 04/19/200	Amount of Each Receipt this Period \$50.00
G. Full Name, Mailing Address and Zip Code Clare Townsend 1400 N Drake Rd Apt 326 Kalamazoo, MI 49006-3929 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$205.00	Date (month, day, year) 05/23/200	Amount of Each Receipt this Period \$35.00

SUBTOTAL of Receipts This Page (optional)

\$745.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE OF
81 90
FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Roy Travis 6 Canebrake Boulevard Hattiesburg, MS 39402- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested	Date (month, day, year) 04/25/200	Amount of Each Receipt this Period \$500.00 Aggregate Year-to-Date -> \$500.00
B. Full Name, Mailing Address and Zip Code Albert Triebel 3611 Harkory Ln Rockford, IL 61107 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested	Date (month, day, year) 05/30/200	Amount of Each Receipt this Period \$250.00 Aggregate Year-to-Date -> \$250.00
C. Full Name, Mailing Address and Zip Code Carl Valentine 244 Lakeside Dr Apt 7 Oakland, CA 94612-3518 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Retired	Date (month, day, year) 04/07/200	Amount of Each Receipt this Period \$30.00 Aggregate Year-to-Date -> \$150.00
D. Full Name, Mailing Address and Zip Code Carl Valentine 244 Lakeside Dr Apt 7 Oakland, CA 94612-3518 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Retired	Date (month, day, year) 04/12/200	Amount of Each Receipt this Period \$60.00 Aggregate Year-to-Date -> \$210.00
E. Full Name, Mailing Address and Zip Code Carl Valentine 244 Lakeside Dr Apt 7 Oakland, CA 94612-3518 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Retired	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$40.00 Aggregate Year-to-Date -> \$250.00
F. Full Name, Mailing Address and Zip Code Carl Valentine 244 Lakeside Dr Apt 7 Oakland, CA 94612-3518 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Retired	Date (month, day, year) 05/30/200	Amount of Each Receipt this Period \$25.00 Aggregate Year-to-Date -> \$275.00
G. Full Name, Mailing Address and Zip Code Carl Valentine 244 Lakeside Dr Apt 7 Oakland, CA 94612-3518 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Retired	Date (month, day, year) 06/14/200	Amount of Each Receipt this Period \$40.00 Aggregate Year-to-Date -> \$315.00

SUBTOTAL of Receipts This Page (optional)

\$945.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE	OF
82	90
FOR LINE NUMBER	
11(a)(i)	

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Carl Valentine 244 Lakeside Dr Apt 7 Oakland, CA 94612-3516 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$375.00	Date (month, day, year) 06/28/200	Amount of Each Receipt this Period \$60.00
B. Full Name, Mailing Address and Zip Code Mildred Vanderwerp 1551 Franklin Street Se Grand Rapids, MI 49506-3385 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$275.00	Date (month, day, year) 05/05/200	Amount of Each Receipt this Period \$200.00
C. Full Name, Mailing Address and Zip Code P. Vann P.O. Box 789 Corinth, MS 38834- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Fred Vann & Co. Occupation President Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 04/07/200	Amount of Each Receipt this Period \$250.00
D. Full Name, Mailing Address and Zip Code Howard Vedell 5608 89th Ave. W University Place, WA 98467-1616 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$150.00	Date (month, day, year) 04/12/200	Amount of Each Receipt this Period \$50.00
E. Full Name, Mailing Address and Zip Code Howard Vedell 5608 89th Ave. W University Place, WA 98467-1616 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$200.00	Date (month, day, year) 05/19/200	Amount of Each Receipt this Period \$50.00
F. Full Name, Mailing Address and Zip Code Howard Vedell 5608 89th Ave. W University Place, WA 98467-1616 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 05/24/200	Amount of Each Receipt this Period \$50.00
G. Full Name, Mailing Address and Zip Code Howard Vedell 5608 89th Ave. W University Place, WA 98467-1616 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 06/21/200	Amount of Each Receipt this Period \$50.00

SUBTOTAL of Receipts This Page (optional)

\$710.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE OF
\$3 90
FOR LINE NUMBER
11(a) (i)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Thomas Verseput 2358 Westbrook Court Claremont, CA 91711-2228 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Unemployed Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 06/14/200	Amount of Each Receipt this Period \$500.00
B. Full Name, Mailing Address and Zip Code De Verville 945 E 26th St Brooklyn, NY 11210-3748 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$135.00	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$35.00
C. Full Name, Mailing Address and Zip Code De Verville 945 E 26th St Brooklyn, NY 11210-3748 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$160.00	Date (month, day, year) 04/19/200	Amount of Each Receipt this Period \$25.00
D. Full Name, Mailing Address and Zip Code De Verville 945 E 26th St Brooklyn, NY 11210-3748 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$185.00	Date (month, day, year) 05/15/200	Amount of Each Receipt this Period \$25.00
E. Full Name, Mailing Address and Zip Code De Verville 945 E 26th St Brooklyn, NY 11210-3748 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$210.00	Date (month, day, year) 05/17/200	Amount of Each Receipt this Period \$25.00
F. Full Name, Mailing Address and Zip Code De Verville 945 E 26th St Brooklyn, NY 11210-3748 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$245.00	Date (month, day, year) 06/14/200	Amount of Each Receipt this Period \$35.00
G. Full Name, Mailing Address and Zip Code Jacques Virmont Quail Run 21 Aspen Ct Boynton Beach, FL 33436-6615 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 04/19/200	Amount of Each Receipt this Period \$100.00

SUBTOTAL of Receipts This Page (optional)

\$745.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 84 OF 90
FOR LINE NUMBER
11(a) (i)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Jacques Vinmont Quail Run 21 Aspen Ct Boynton Beach, FL 33436-6615 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$605.00	Date (month, day, year) 06/12/200	Amount of Each Receipt this Period \$305.00
B. Full Name, Mailing Address and Zip Code Thad Waites 1017 Richburg Road Hattiesburg, MS 39402- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Occupation Physician Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 04/18/200	Amount of Each Receipt this Period \$250.00
C. Full Name, Mailing Address and Zip Code Murray Waldron 37 Canchake Boulevard Hattiesburg, MS 39402- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Occupation Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 04/25/200	Amount of Each Receipt this Period \$250.00
D. Full Name, Mailing Address and Zip Code John Walker 2730 Mair Woods Drive Owens Cross Roads, AL 35763- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Radiance Technologies Occupation Vice President Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 04/07/200	Amount of Each Receipt this Period \$250.00
E. Full Name, Mailing Address and Zip Code Marshall Walker 623 Neelys Creek Rd Rock Hill, SC 29730-9664 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$315.00	Date (month, day, year) 04/19/200	Amount of Each Receipt this Period \$15.00
F. Full Name, Mailing Address and Zip Code Marshall Walker 623 Neelys Creek Rd Rock Hill, SC 29730-9664 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$330.00	Date (month, day, year) 06/21/200	Amount of Each Receipt this Period \$15.00
G. Full Name, Mailing Address and Zip Code Roland Walker 4574 G C Bill Lane Orange Beach, AL 36561-3930 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$400.00	Date (month, day, year) 04/05/200	Amount of Each Receipt this Period \$100.00

SUBTOTAL of Receipts This Page (optional)

\$1185.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules;
for each category of line
Detailed Summary PagePAGE 85 OF 90
FOR LINE NUMBER 11(a)(i)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Roland Walker 4574 G C Bill Lane Orange Beach, AL 36561-3930 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$425.00	Date (month, day, year) 04/24/200	Amount of Each Receipt this Period \$25.00
B. Full Name, Mailing Address and Zip Code Roland Walker 4574 G C Bill Lane Orange Beach, AL 36561-3930 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$475.00	Date (month, day, year) 05/30/200	Amount of Each Receipt this Period \$50.00
C. Full Name, Mailing Address and Zip Code Jewell Walls 421 S. Bonner Street Jacksonville, TX 75766-2330 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Nurse Aggregate Year-to-Date -> \$175.00	Date (month, day, year) 04/12/200	Amount of Each Receipt this Period \$25.00
D. Full Name, Mailing Address and Zip Code Jewell Walls 421 S. Bonner Street Jacksonville, TX 75766-2330 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Nurse Aggregate Year-to-Date -> \$200.00	Date (month, day, year) 04/27/200	Amount of Each Receipt this Period \$25.00
E. Full Name, Mailing Address and Zip Code Jewell Walls 421 S. Bonner Street Jacksonville, TX 75766-2330 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Nurse Aggregate Year-to-Date -> \$225.00	Date (month, day, year) 05/17/200	Amount of Each Receipt this Period \$25.00
F. Full Name, Mailing Address and Zip Code Jewell Walls 421 S. Bonner Street Jacksonville, TX 75766-2330 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Nurse Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 06/30/200	Amount of Each Receipt this Period \$25.00
G. Full Name, Mailing Address and Zip Code Lawrence Warren P.O. Box 572 Hattiesburg, MS 39403- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 04/25/200	Amount of Each Receipt this Period \$1000.00

SUBTOTAL of Receipts This Page (optional)

\$1175.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 0P
86 90
FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Lucie Warren 93 Beachside Avenue Greens Farms, CT 06436 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 05/10/200	Amount of Each Receipt this Period \$100.00
B. Full Name, Mailing Address and Zip Code Joseph Washburne 20 Grand Bayou Circle Hattiesburg, MS 39402- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Tower Pavilion, PLLC Occupation OB/GYN Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 04/25/200	Amount of Each Receipt this Period \$250.00
C. Full Name, Mailing Address and Zip Code Bernhard Weickert 4031 Kennet Pike Apt. 104 Greenville, DE 19807-2034 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$1555.00	Date (month, day, year) 05/10/200 (Refunded \$1,155 on 7/15/00)	Amount of Each Receipt this Period \$50.00
D. Full Name, Mailing Address and Zip Code Bernhard Weickert 4031 Kennet Pike Apt. 104 Greenville, DE 19807-2034 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$1805.00	Date (month, day, year) 05/19/200	Amount of Each Receipt this Period \$250.00
E. Full Name, Mailing Address and Zip Code Bernhard Weickert 4031 Kennet Pike Apt. 104 Greenville, DE 19807-2034 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$2155.00	Date (month, day, year) 05/30/200	Amount of Each Receipt this Period \$350.00
F. Full Name, Mailing Address and Zip Code Henry Welker 3200 Southfork Dr. Apopka, FL 32712-5884 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$125.00	Date (month, day, year) 05/05/200	Amount of Each Receipt this Period \$25.00
G. Full Name, Mailing Address and Zip Code Henry Welker 3200 Southfork Dr. Apopka, FL 32712-5884 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$225.00	Date (month, day, year) 06/14/200	Amount of Each Receipt this Period \$100.00

SUBTOTAL of Receipts This Page (optional)

\$1125.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary pagePAGE 87 OF 90
FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Linnea West 75905 G. P. Erickson Road Clatskanie, OR 97016 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$150.00	Date (month, day, year) 04/19/200	Amount of Each Receipt this Period \$50.00
B. Full Name, Mailing Address and Zip Code Linnea West 75905 G. P. Erickson Road Clatskanie, OR 97016 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 05/24/200	Amount of Each Receipt this Period \$100.00
C. Full Name, Mailing Address and Zip Code Marie Whitehead 4702 18th Avenue Columbus, GA 31904-6030 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Homemaker Aggregate Year-to-Date -> \$265.00	Date (month, day, year) 04/27/200	Amount of Each Receipt this Period \$50.00
D. Full Name, Mailing Address and Zip Code Leona Whitman 3319 Twin Silo Drive Blue Bell, PA 19422 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$225.00	Date (month, day, year) 04/07/200	Amount of Each Receipt this Period \$90.00
E. Full Name, Mailing Address and Zip Code L Whitmeyer Route 1, Box 110 Colmesneil, TX 75938-9704 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Housewife Aggregate Year-to-Date -> \$350.00	Date (month, day, year) 04/07/200	Amount of Each Receipt this Period \$100.00
F. Full Name, Mailing Address and Zip Code L Whitmeyer Route 1, Box 110 Colmesneil, TX 75938-9704 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Housewife Aggregate Year-to-Date -> \$450.00	Date (month, day, year) 05/17/200	Amount of Each Receipt this Period \$100.00
G. Full Name, Mailing Address and Zip Code H. Williams P.O. Box 239 Corinth, MS 38834- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 04/07/200	Amount of Each Receipt this Period \$1000.00

SUBTOTAL of Receipts This Page (optional)

\$1490.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE	OF
88	90
FOR LINE NUMBER	
11(a)(1)	

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Kenneth Williams P.O. Box 240 Corinth, MS 38834- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Coca Cola Bottling Co. Occupation Owner Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 04/07/200	Amount of Each Receipt This Period \$1000.00
B. Full Name, Mailing Address and Zip Code John Wilson 851 Morningside Dr Fullerton, CA 92635 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer SELF EMPLOYED Occupation Dentist Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 05/12/200	Amount of Each Receipt This Period \$300.00
C. Full Name, Mailing Address and Zip Code John Wilson 851 Morningside Dr Fullerton, CA 92635 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer SELF EMPLOYED Occupation Dentist Aggregate Year-to-Date -> \$550.00	Date (month, day, year) 05/17/200	Amount of Each Receipt This Period \$250.00
D. Full Name, Mailing Address and Zip Code L. Woodall 1 Bristol Lane Hattiesburg, MS 39401- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Forrest General Hospital Occupation Executive Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 04/25/200	Amount of Each Receipt this Period \$500.00
E. Full Name, Mailing Address and Zip Code R. Woods 401 S. 37th Avenue Hattiesburg, MS 39402- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer None Occupation Retired Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 04/18/200	Amount of Each Receipt this Period \$250.00
F. Full Name, Mailing Address and Zip Code Edward Worsham 1775 Westridge Ann Arbor, MI 48105-1066 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Dentist Aggregate Year-to-Date -> \$350.00	Date (month, day, year) 04/17/200	Amount of Each Receipt This Period \$250.00
G. Full Name, Mailing Address and Zip Code Edward Worsham 1775 Westridge Ann Arbor, MI 48105-1066 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Dentist Aggregate Year-to-Date -> \$375.00	Date (month, day, year) 04/17/200	Amount of Each Receipt this Period \$25.00

SUBTOTAL of Receipts This Page (optional)

\$2575.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 89 OF 90
FOR LINE NUMBER
11(a)(1)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Robert Worsham P.O. Box 146 Corinth, MS 38835- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 04/07/200	Amount of Each Receipt this Period \$1000.00
B. Full Name, Mailing Address and Zip Code Daria Yakovieff P.O. Box 647 Calistoga, CA 94515-0647 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$200.00	Date (month, day, year) 05/10/200	Amount of Each Receipt this Period \$50.00
C. Full Name, Mailing Address and Zip Code Daria Yakovieff P.O. Box 647 Calistoga, CA 94515-0647 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$250.00	Date (month, day, year) 06/08/200	Amount of Each Receipt this Period \$50.00
D. Full Name, Mailing Address and Zip Code Daria Yakovieff P.O. Box 647 Calistoga, CA 94515-0647 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Information Requested Occupation Information Requested Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 06/16/200	Amount of Each Receipt this Period \$50.00
E. Full Name, Mailing Address and Zip Code Bennett York 4 Medical Blvd. Hattiesburg, MS 39401- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Self Occupation Dentist Aggregate Year-to-Date -> \$1000.00	Date (month, day, year) 04/25/200	Amount of Each Receipt this Period \$1000.00
F. Full Name, Mailing Address and Zip Code Helen Young 6021 Cabot Court Mentor, OH 44060-2204 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$3725.00	Date (month, day, year) 04/07/200 (Refunded \$2,725 on 7/15/00)	Amount of Each Receipt this Period \$2000.00
G. Full Name, Mailing Address and Zip Code Russell Ziesch 37852 Thames Drive Farmington Hills, MI 48331-1721 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$300.00	Date (month, day, year) 05/12/200	Amount of Each Receipt this Period \$100.00

SUBTOTAL of Receipts This Page (optional)

\$4250.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 90 OF 90
FOR LINE NUMBER
11(a)(i)

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Russell Zieltsch 37852 Thames Drive Farmington Hills, MI 48331-1721 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$400.00	Date (month, day, year) 06/08/200	Amount of Each Receipt this Period \$100.00
B. Full Name, Mailing Address and Zip Code James Zink 14165 Victor Place Saratoga, CA 95070-5425 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$500.00	Date (month, day, year) 04/12/200	Amount of Each Receipt this Period \$300.00
C. Full Name, Mailing Address and Zip Code James Zink 14165 Victor Place Saratoga, CA 95070-5425 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Retired Aggregate Year-to-Date -> \$800.00	Date (month, day, year) 06/28/200	Amount of Each Receipt this Period \$300.00
D. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
E. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
F. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
G. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

\$700.00

TOTAL This Period (last page this line number only)

107,106.33

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE	OF
1	2
FOR LINE NUMBER	
11(c)	

Any information received 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)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code AFLAC Incorporated PAC 1932 Wynnton Road Columbus, GA 31999- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 04/07/200 04/07/200 Aggregate Year-to-Date ->	Amount of Each Receipt this Period \$5000.00 \$5000.00
B. Full Name, Mailing Address and Zip Code Allied Pilots Association PAC 14600 Trinity Boulevard Suite 500 Fort Worth, TX 76155-2512 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 06/01/200 06/01/200 Aggregate Year-to-Date ->	Amount of Each Receipt this Period \$1000.00 \$1000.00
C. Full Name, Mailing Address and Zip Code BancorpSouth Bank PAC P.O. Box 789 Tupelo, MS 38802-0789 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 04/07/200 04/07/200 Aggregate Year-to-Date ->	Amount of Each Receipt this Period \$500.00 \$500.00
D. Full Name, Mailing Address and Zip Code Build PAC of the National Association of 1201 15th Street NW Washington, DC 20005-2803 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Home Builders Occupation Aggregate Year-to-Date ->	Date (month, day, year) 04/07/200 04/07/200 Aggregate Year-to-Date ->	Amount of Each Receipt this Period \$2500.00 \$2500.00
E. Full Name, Mailing Address and Zip Code Chicago Board Options Exchange PAC La Salle at Jackson Chicago, IL 60604- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 06/30/200 06/30/200 Aggregate Year-to-Date ->	Amount of Each Receipt this Period \$5000.00 \$5000.00
F. Full Name, Mailing Address and Zip Code Caterpillar Employees PAC 100 N.E. Adams Street Peoria, IL 61629- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer PAC Occupation Aggregate Year-to-Date ->	Date (month, day, year) 04/07/200 04/07/200 Aggregate Year-to-Date ->	Amount of Each Receipt this Period \$1000.00 \$1000.00
G. Full Name, Mailing Address and Zip Code eBay Inc. Comm. for Resp. Internet Commerce 101 Park Center Plaza Suite 1160 San Jose, CA 95113- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 06/30/200 06/30/200 Aggregate Year-to-Date ->	Amount of Each Receipt this Period \$1000.00 \$1000.00

SUBTOTAL of Receipts This Page (optional)

\$16000.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 2 OF 2
FOR LINE NUMBER
11 (c)

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)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Exxon Mobil Corporation PAC 5959 Las Colinas Boulevard Irving, TX 75039-2298 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 06/01/200	Amount of Each Receipt This Period \$1000.00
B. Full Name, Mailing Address and Zip Code Peoples Bank and Trust PAC P.O. Box 300 Corinth, MS 38834-0300 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 04/07/200	Amount of Each Receipt This Period \$500.00
C. Full Name, Mailing Address and Zip Code Service Corporation International PAC P.O. Box 130548 Houston, TX 77219-0548 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 05/11/200	Amount of Each Receipt This Period \$5000.00
D. Full Name, Mailing Address and Zip Code Southtrust Corporation PAC 420 North Twentieth St. P.O. Box 2554 Birmingham, AL 35290 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 04/25/200	Amount of Each Receipt This Period \$500.00
E. Full Name, Mailing Address and Zip Code The Senate Victory Fund P.O. Box 1331 Jackson, MS 39215-1331 Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer - Occupation Aggregate Year-to-Date ->	Date (month, day, year) 04/07/200	Amount of Each Receipt This Period \$5000.00
F. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt This Period
G. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt This Period

SUBTOTAL of Receipts This Page (optional)

\$12000.00

TOTAL This Period (last page this line number only)

\$28000.00

SCHEDULE A

ITEMIZED RECEIPTS

See separate instructions,
for each category of the
Detailed Summary Page

PAGE 1 OF 1
FOR LINE NUMBER 12

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)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Celebration 2000 228 South Washington St Suite 200 Alexandria, VA 22314- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 05/05/200 Proceeds from joint fundraiser	Amount of Each Receipt this Period \$24668.17 - see attached memo schedules.*
B. Full Name, Mailing Address and Zip Code Warner/Nickles 2000 Committee 425 Second Street, NE Washington, DC 20002- Receipt For: ☒ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) 06/29/200 Proceeds from joint fundraiser	Amount of Each Receipt this Period \$39237.00 see attached memo schedules.
C. Full Name, Mailing Address and Zip Code * - Previous memo schedules provided on year-end 1999 FEC Report. Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
D. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
E. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
F. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
G. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

\$63905.17

TOTAL This Period (last page this line number only)

\$63905.17

SCHEDULE A

**MEMO SCHEDULE - Trent Lott for MS
ITEMIZED RECEIPTS**

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

PAGE 1 OF 1
FOR LINE NUMBER 11c

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)

Celebration 2000

A. Full Name, Mailing Address and ZIP Code

Cigar PAC
1707 H St., NW, Ste. 800
Washington, DC 20036

Name of Employer

Correction

Date (month,
day, year)

4/27/00

Amount of Each
Receipt this Period

(1500.00)

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 500.00

B. Full Name, Mailing Address and ZIP Code

Dow Corning Management PAC
1133 Connecticut Ave., NW Ste. 600
Washington, DC 20036

Name of Employer

Correction

Date (month,
day, year)

4/27/00

Amount of Each
Receipt this Period

(1000.00)

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 1000.00

C. Full Name, Mailing Address and ZIP Code

International Assoc. of Holidays Inns
PAC (INN PAC)
3 Ravinia Dr., Ste. 2000
Atlanta, GA 30346

Name of Employer

Date (month,
day, year)

1/12/00

Amount of Each
Receipt this Period

1000.00

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 1000.00

D. Full Name, Mailing Address and ZIP Code

Sears PAC
3333 Beverly Rd.
Hoffman Estates, IL 60179

Name of Employer

Date (month,
day, year)

1/12/00

Amount of Each
Receipt this Period

500.00

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 500.00

E. Full Name, Mailing Address and ZIP Code

UPS PAC
55 Glenlake Pky., NE
Atlanta, GA 30328

Name of Employer

Date (month,
day, year)

1/12/00

Amount of Each
Receipt this Period

2500.00

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 2500.00

F. Full Name, Mailing Address and ZIP Code

ARTBA PAC
1010 Massachusetts Ave., NW
Washington, DC 20001

Name of Employer

Date (month,
day, year)

2/9/00

Amount of Each
Receipt this Period

500.00

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 500.00

G. Full Name, Mailing Address and ZIP Code

Petroleum Marketers Assoc. of America's
Small Business Cmte. PAC
Arlington, VA 22209

Name of Employer

Date (month,
day, year)

2/9/00

Amount of Each
Receipt this Period

1000.00

Receipt For: ☒ Primary ☐ General
☐ Other (specify):

Occupation

Aggregate Year-to-Date > \$ 1000.00

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category or the Detailed Summary Page	PAGE 1 OF 7
FOR LINE NUMBER 11c	

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

NAME OF COMMITTEE (in Full)
W/N 2000 - MEMO SCHEDULE
Trent Lott for Mississippi

A. Full Name, Mailing Address and ZIP Code AICPA Effective Legislation Committee 1455 Pennsylvania Ave, NW 400 Washington, DC 20004 Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate To-Date \$ 1,000.00	Date (month, day, year) 5/5/00	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and ZIP Code American Association of Nurse Anesthetists CRNA PAC 412 First St., SE, #12 Washington, DC 20003 Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate To-Date \$ 1,000.00	Date (month, day, year) 6/20/00	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and ZIP Code American Airlines PAC 1101 17th St., NW #600 Washington, DC 20036 Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate To-Date \$ 1,000.00	Date (month, day, year) 5/5/00	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and ZIP Code American Frozen Food Institute PAC 2000 Corporate Ridge, Ste 1000 McLean, VA 22102-3931 Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate To-Date \$ 500.00	Date (month, day, year) 6/9/00	Amount of Each Receipt this Period 500.00
E. Full Name, Mailing Address and ZIP Code American Maritime Officers Voluntary PAC 650 Fourth Ave. Brooklyn, NY 11232 Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate To-Date \$ 250.00	Date (month, day, year) 6/20/00	Amount of Each Receipt this Period 250.00
F. Full Name, Mailing Address and ZIP Code American Meat Institute PAC 1700 N. Moore Street Suite 1600 Arlington, VA 22209 Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate To-Date \$ 1,000.00	Date (month, day, year) 5/15/00	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and ZIP Code American Sheep Industry PAC 6911 S. Yosemite St. Suite 200 Englewood, CO 80112-1414 Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate To-Date \$ 1,000.00	Date (month, day, year) 5/18/00	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)	5,750.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page	PAGE 2 OF 7
FOR LINE NUMBER 11C	

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NAME OF COMMITTEE (In Full)
W/N 2000 - MEMO SCHEDULE
Trent Lott for Mississippi

A. Full Name, Mailing Address and ZIP Code Bank of America Corp. PAC 100 North Tyson Street 23rd Floor Charlotte, NC 28255 Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-To-Date \$ 1,500.00	Date (month, day, year) 6/1/00 Amount of Each Receipt this Period 1,500.00
B. Full Name, Mailing Address and ZIP Code Boeing PAC 1200 Wilson Blvd. Arlington, VA 22209 Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-To-Date \$ 1,000.00	Date (month, day, year) 5/3/00 Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and ZIP Code Burlington Resources PAC 5051 Westheimer Suite 1400 Houston, TX 77056-2124 Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-To-Date \$ 1,000.00	Date (month, day, year) 5/18/00 Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and ZIP Code Champions for Good Government of Champion Int'l Corp. 1875 Eye Street, Suite 540 Washington, DC 20006 Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-To-Date \$ 2,000.00	Date (month, day, year) 5/3/00 Amount of Each Receipt this Period 2,000.00
E. Full Name, Mailing Address and ZIP Code Chevron Employees PAC 575 Market St. Room 908 San Francisco, CA 94105 Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-To-Date \$ 1,000.00	Date (month, day, year) 5/16/00 Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and ZIP Code Cinergy Corp. PAC 138 E. Fourth St. Cincinnati, OH 45202-4003 Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-To-Date \$ 1,000.00	Date (month, day, year) 4/28/00 Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and ZIP Code Computer Sciences Corp. 2100 East Grand Avenue El Segundo, CA 90245 Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-To-Date \$ 1,000.00	Date (month, day, year) 5/31/00 Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)	8,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of this Detailed Summary Page	PAGE 3 OF 7
FOR LINE NUMBER 11c	

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NAME OF COMMITTEE (in full)
W/N 2000 - MEMO SCHEDULE
Trent Lott for Mississippi

A. Full Name, Mailing Address and ZIP Code Dealers Election Action Committee of the NADA 8400 Westpark Dr. McLean, VA 22102	Name of Employer Occupation	Date (month, day, year) 6/1/00	Amount of Each Receipt this Period 1,000.00
Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Receipts \$ 1,000.00		
B. Full Name, Mailing Address and ZIP Code El Paso Energy Corp. PAC 601 13th St., NW Suite 850 South Washington, DC 20005	Name of Employer Occupation	Date (month, day, year) 4/24/00	Amount of Each Receipt this Period 2,000.00
Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Receipts \$ 2,000.00		
C. Full Name, Mailing Address and ZIP Code ELA Lease - PAC 4301 N. Fairfax Dr. Suite 550 Arlington, VA 22203	Name of Employer Occupation	Date (month, day, year) 5/31/00	Amount of Each Receipt this Period 2,000.00
Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Receipts \$ 2,000.00		
D. Full Name, Mailing Address and ZIP Code Exxon Mobil Corp. PAC 5959 Las Colinas Blvd. Irving, TX 75039-2298	Name of Employer Occupation	Date (month, day, year) 5/31/00	Amount of Each Receipt this Period 1,000.00
Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Receipts \$ 1,000.00		
E. Full Name, Mailing Address and ZIP Code Friends of Bob Livingston PAC 228 S. Washington St. Suite 200 Alexandria, VA 22314-5404	Name of Employer Occupation	Date (month, day, year) 6/1/00	Amount of Each Receipt this Period 1,000.00
Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Receipts \$ 1,000.00		
F. Full Name, Mailing Address and ZIP Code General Dynamics Voluntary Political Contribution Plan 3190 Fairview Park Dr. Falls Church, VA 22042	Name of Employer Occupation	Date (month, day, year) 5/3/00	Amount of Each Receipt this Period 1,000.00
Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Receipts \$ 1,000.00		
G. Full Name, Mailing Address and ZIP Code Halliburton PAC Box 1431 Duncan, OK 73536	Name of Employer Occupation	Date (month, day, year) 6/14/00	Amount of Each Receipt this Period 1,000.00
Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Receipts \$ 1,000.00		

SUBTOTAL of Receipts This Page (optional)	9,000.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page	PAGE OF 4 7
FOR LINE NUMBER 11c	

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NAME OF COMMITTEE (in full)
W/N 2000 - KERR SCHEDULE
Trent Lott for Mississippi

A. Full Name, Mailing Address and ZIP Code Hogan & Hartson PAC 555 13th Street, NW Washington, DC 20004 Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-To-Date \$ 1,000.00	Date (month, day, year) 5/18/00	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and ZIP Code Honeywell Int'l PAC 1001 Pennsylvania Ave., NW Suite 700 Washington, DC 20004 Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-To-Date \$ 1,000.00	Date (month, day, year) 5/31/00	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and ZIP Code Household Int'l, Inc. PAC 2700 Sanders Road Prospect Heights, IL 60070 Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-To-Date \$ 500.00	Date (month, day, year) 6/1/00	Amount of Each Receipt this Period 500.00
D. Full Name, Mailing Address and ZIP Code Ice Cream Milk & Cheese PAC 1250 H Street, NW Suite 900 Washington, DC 20003 Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-To-Date \$ 1,000.00	Date (month, day, year) 4/28/00	Amount of Each Receipt this Period 1,000.00
E. Full Name, Mailing Address and ZIP Code Kerr-McGee Corp. PAC 1667 K Street, NW Suite 250 Washington, DC 20006 Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-To-Date \$ 1,000.00	Date (month, day, year) 5/31/00	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and ZIP Code National Assn of Independent Insurers PAC (NAIIPAC) 2600 River Road Des Plaines, IL 60016 Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-To-Date \$ 1,000.00	Date (month, day, year) 6/14/00	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and ZIP Code New York Life PAC 1001 Pennsylvania Avenue, NW Washington, DC 20004 Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-To-Date \$ 1,000.00	Date (month, day, year) 6/20/00	Amount of Each Receipt this Period 1,000.00

SUBTOTAL of Receipts This Page (optional)	6,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page	PAGE 5 OF 7
FOR LINE NUMBER 11c	

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

NAME OF COMMITTEE (In Full)
W/N 2000 - MEMO SCHEDULE
Trent Lott for Mississippi

A. Full Name, Mailing Address and ZIP Code Newport News Shipbuilding PAC 801 Pennsylvania Ave., NW Suite 350 Washington, DC 20004 Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate To Date \$ 2,000.00	Date (month, day, year) 6/2/00	Amount of Each Receipt this Period 2,000.00
B. Full Name, Mailing Address and ZIP Code Northwestern Mutual Life Federal PAC 720 E. Wisconsin Ave. Milwaukee, WI 53202 Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate To Date \$ 1,000.00	Date (month, day, year) 5/10/00	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and ZIP Code Occidental Petroleum Corp. PAC 10889 Wilshire Blvd. Los Angeles, CA 90024 Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate To Date \$ 1,000.00	Date (month, day, year) 5/31/00	Amount of Each Receipt this Period 1,000.00
D. Full Name, Mailing Address and ZIP Code Orbital Sciences Corp. Good Government Fund 21700 Atlantic Blvd. Dulles, VA 20166 Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate To Date \$ 250.00	Date (month, day, year) 4/24/00	Amount of Each Receipt this Period 250.00
E. Full Name, Mailing Address and ZIP Code Procter & Gamble Good Government Committee 1 Procter & Gamble Plaza Cincinnati, OH 45202 Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate To Date \$ 1,000.00	Date (month, day, year) 6/9/00	Amount of Each Receipt this Period 1,000.00
F. Full Name, Mailing Address and ZIP Code Raytheon PAC 141 Spring St. Lexington, MA 02421 Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate To Date \$ 1,000.00	Date (month, day, year) 5/31/00	Amount of Each Receipt this Period 1,000.00
G. Full Name, Mailing Address and ZIP Code Skadden Arps PAC 1440 New York Ave, NW Washington, DC 20005 Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate To Date \$ 250.00	Date (month, day, year) 6/14/00	Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional)	6,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page	PAGE 6 OF 7
FOR LINE NUMBER 11c	

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

NAME OF COMMITTEE (in full)
w/n 2000 - MEMO SCHEDULE
Trent Lott for Mississippi

A. Full Name, Mailing Address and ZIP Code SUNPAC 1801 Market St. Philadelphia, PA 19103	Name of Employer Occupation	Date (month, day, year) 5/18/00	Amount of Each Receipt this Period 250.00
Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-To-Date \$ 250.00		
B. Full Name, Mailing Address and ZIP Code Swisher PAC 459 E. 16th St. Jacksonville, FL 32206	Name of Employer Occupation	Date (month, day, year) 4/24/00	Amount of Each Receipt this Period 1,000.00
Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-To-Date \$ 1,000.00		
C. Full Name, Mailing Address and ZIP Code American Dental PAC 1111 14th Street, NW Suite 1100 Washington, DC 20005	Name of Employer Occupation	Date (month, day, year) 06/27/00	Amount of Each Receipt this Period 1,000.00
Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-To-Date \$ 1,000.00		
D. Full Name, Mailing Address and ZIP Code AT&T PAC 32 Avenue of the Americas New York, NY 10013	Name of Employer Occupation	Date (month, day, year) 06/27/00	Amount of Each Receipt this Period 2,000.00
Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-To-Date \$ 2,000.00		
E. Full Name, Mailing Address and ZIP Code Bell Atlantic PAC 1717 Arch Street, 47-5 Philadelphia, PA 19103	Name of Employer Occupation	Date (month, day, year) 06/27/00	Amount of Each Receipt this Period 2,000.00
Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-To-Date \$ 2,000.00		
F. Full Name, Mailing Address and ZIP Code Interstate Natural Gas Assn of America PAC 555 13th Street, NW, #300-W Washington, DC 20004	Name of Employer Occupation	Date (month, day, year) 06/27/00	Amount of Each Receipt this Period 1,000.00
Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-To-Date \$ 1,000.00		
G. Full Name, Mailing Address and ZIP Code PG&E Corp. Energy PAC 77 Beale Street P.O. Box 770000 San Francisco, CA 94177	Name of Employer Occupation	Date (month, day, year) 06/27/00	Amount of Each Receipt this Period 100.00
Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Aggregate Year-To-Date \$ 100.00		

SUBTOTAL of Receipts This Page (optional)	7,350.00
TOTAL This Period (last page this line number only)	

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page	PAGE 7 OF 7
FOR LINE NUMBER 11c	

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NAME OF COMMITTEE (in Full)
W/N 2000 - HEARD SCHEDULE
Trent Lott for Mississippi

A. Full Name, Mailing Address and ZIP Code Pharm. Research & Mfrs. of America PAC 1100 15th Street, NW Washington, DC 20005 Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-To-Date \$ 1,000.00	Date (month, day, year) 06/23/00	Amount of Each Receipt this Period 1,000.00
B. Full Name, Mailing Address and ZIP Code Realtors PAC 430 N. Michigan Avenue Chicago, IL 60611 Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-To-Date \$ 1,000.00	Date (month, day, year) 06/27/00	Amount of Each Receipt this Period 1,000.00
C. Full Name, Mailing Address and ZIP Code Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-To-Date \$	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-To-Date \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-To-Date \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-To-Date \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-To-Date \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	2,000.00
TOTAL This Period (last page this line number only)	45,600.00

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule for each category of the Detailed Summary Page	PAGE 1	OF 1
FOR LINE NUMBER 11a1		

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NAME OF COMMITTEE (in Full)
W/R 2000 - MEMO SCHEDULE
Trent Lott for Mississippi

A. Full Name, Mailing Address and ZIP Code Larry Addington 1500 Big Run Rd. Ashland, KY 41102	Name of Employer Addington Enterprises	Date (month, day, year) 5/31/00	Amount of Each Receipt this Period 1,000.00
Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Occupation Executive	Aggregate Year-To-Date \$ 1,000.00	
B. Full Name, Mailing Address and ZIP Code Gregg L. Engles 2525 McKinney Ave. L.B. 30, Suite 1200 Dallas, TX 75201	Name of Employer Suiza Foods Corp.	Date (month, day, year) 5/10/00	Amount of Each Receipt this Period 250.00
Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Occupation Chairman & CEO	Aggregate Year-To-Date \$ 250.00	
C. Full Name, Mailing Address and ZIP Code Joan M. Holmer 7714 Falstaff Ct. Falls Church, VA 22042	Name of Employer Georgetown Univ.	Date (month, day, year) 5/15/00	Amount of Each Receipt this Period 250.00
Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Occupation Professor	Aggregate Year-To-Date \$ 250.00	
D. Full Name, Mailing Address and ZIP Code Shannon R. Shaffer 2911 Montauk Ct. Falls Church, VA 22042	Name of Employer Info Requested	Date (month, day, year) 5/31/00	Amount of Each Receipt this Period 250.00
Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Occupation Info Requested	Aggregate Year-To-Date \$ 250.00	
E. Full Name, Mailing Address and ZIP Code Charles H. Tower 49 Willowmere Circle Riverside, CT 06878	Name of Employer O&B Corp.	Date (month, day, year) 5/31/00	Amount of Each Receipt this Period 500.00
Receipt for: ☐ Primary ☒ General ☐ Other (specify):	Occupation Executive	Aggregate Year-To-Date \$ 500.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Occupation	Aggregate Year-To-Date \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Occupation	Aggregate Year-To-Date \$	

SUBTOTAL of Receipts This Page (optional)	2,250.00
TOTAL This Period (last page this line number only)	2,250.00

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 1 OF 1
FOR JUDICIAL NUMBER
14

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code USA Direct 2901 Blackbridge Road York, PA 17402- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer REFUND OF OVERPAYMENT Occupation Aggregate Year-to-Date ->	Date (month, day, year) 06/30/200	Amount of Each Receipt this Period \$1643.31
B. Full Name, Mailing Address and Zip Code USA Direct 2901 Blackbridge Road York, PA 17402- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer REFUND OF OVERPAYMENT Occupation Aggregate Year-to-Date ->	Date (month, day, year) 06/30/200	Amount of Each Receipt this Period \$160.83
C. Full Name, Mailing Address and Zip Code Warfield & Walsh 701 Prince Street Alexandria, VA 22314- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer REFUND OF OVERPAYMENT Occupation Aggregate Year-to-Date ->	Date (month, day, year) 06/30/200	Amount of Each Receipt this Period \$8347.27
D. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
E. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
F. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period
G. Full Name, Mailing Address and Zip Code Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

\$10151.41

TOTAL This Period (last page this line number only)

\$10151.41

SCHEDULE A

ITEMIZED RECEIPTS

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

 PAGE 1 OF 1
 YOUR LINK NUMBER
 15

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Hancock Bank 2510 14th Street Gulfport, MS 39501- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Interest Occupation Aggregate Year-to-Date ->	Date (month, day, year) 04/28/200 04/30/200 \$15078.69	Amount of Each Receipt this Period \$378.33
B. Full Name, Mailing Address and Zip Code Hancock Bank 2510 14th Street Gulfport, MS 39501- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Interest Occupation Aggregate Year-to-Date ->	Date (month, day, year) 04/30/200 \$16416.28	Amount of Each Receipt this Period \$1337.59
C. Full Name, Mailing Address and Zip Code Hancock Bank 2510 14th Street Gulfport, MS 39501- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Interest Occupation Aggregate Year-to-Date ->	Date (month, day, year) 05/31/200 \$16518.39	Amount of Each Receipt this Period \$102.11
D. Full Name, Mailing Address and Zip Code Hancock Bank 2510 14th Street Gulfport, MS 39501- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Interest Occupation Aggregate Year-to-Date ->	Date (month, day, year) 05/31/200 \$17903.41	Amount of Each Receipt this Period \$1385.02
E. Full Name, Mailing Address and Zip Code Hancock Bank 2510 14th Street Gulfport, MS 39501- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Interest Occupation Aggregate Year-to-Date ->	Date (month, day, year) 06/30/200 \$18117.36	Amount of Each Receipt this Period \$213.95
F. Full Name, Mailing Address and Zip Code Hancock Bank 2510 14th Street Gulfport, MS 39501- Receipt For: ☐ Primary ☒ General ☐ Other (specify)	Name of Employer Interest Occupation Aggregate Year-to-Date ->	Date (month, day, year) 06/30/200 \$19460.54	Amount of Each Receipt this Period \$1343.18
G. Full Name, Mailing Address and Zip Code / Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Name of Employer Occupation Aggregate Year-to-Date ->	Date (month, day, year) / /	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

\$4760.18

TOTAL This Period (last page this line number only)

\$4760.18

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of non-
Detailed Summary PagePAGE 1 OF 33
FORM LINE NUMBER
17

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Great River Insurance Company P.O. Box 911823 Dallas, TX 75391-1823	Purpose of Disbursement Insurance Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/27/200	Amount of Each Disbursement This Period \$521.00
B. Full Name, Mailing Address and Zip Code Ad Pro 177 Crossover Drive Brandon, MS 39042-	Purpose of Disbursement Advertising Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/27/200	Amount of Each Disbursement This Period \$3101.40
C. Full Name, Mailing Address and Zip Code Ad Pro 177 Crossover Drive Brandon, MS 39042-	Purpose of Disbursement Advertising Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/25/200	Amount of Each Disbursement This Period \$6177.38
D. Full Name, Mailing Address and Zip Code Adams Flowers P.O. Box 653 Gulfport, MS 39502-	Purpose of Disbursement Flower Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/15/200	Amount of Each Disbursement This Period \$37.40
E. Full Name, Mailing Address and Zip Code Akin, Gump, Strauss, Hauer & Feld, LLP 1333 New Hampshire Avenue, NW Suite 400 Washington, DC 20036-	Purpose of Disbursement Professional Services - Legal Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/04/200	Amount of Each Disbursement This Period \$2288.00
F. Full Name, Mailing Address and Zip Code American Express P.O. Box 1270 Newark, NJ 07101-	Purpose of Disbursement Lodging Expense (see memo entry) Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/27/200	Amount of Each Disbursement This Period \$1881.00
G. Full Name, Mailing Address and Zip Code Barefield & Company, Inc. P.O. Box 649 251 W. South Street Jackson, MS 39205-	Purpose of Disbursement Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/27/200	Amount of Each Disbursement This Period \$2.65

SUBTOTAL of Disbursements This Page (optional)

\$14008.83

TOTAL This Period (last page this line number only)

Trent Lott for Mississippi

July 15, 2000 Quarterly Report

Ultimate Vendors for payment to
American Express

Schedule B, Page 1 of 33 for line number 17

Vendor	Amount	Purpose
American Express	\$1,881.00	Lodging Expense

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate supplemental
for each category of the
Detailed Summary PagePAGE 2 OF 33
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Barefield & Company, Inc. P.O. Box 649 251 W. South Street Jackson, MS 39205-	Purpose of Disbursement Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/29/200	Amount of Each Disbursement This Period \$42.27
B. Full Name, Mailing Address and Zip Code Barefield & Company, Inc. P.O. Box 649 251 W. South Street Jackson, MS 39205-	Purpose of Disbursement Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/08/200	Amount of Each Disbursement This Period \$109.15
C. Full Name, Mailing Address and Zip Code Barefield & Company, Inc. P.O. Box 649 251 W. South Street Jackson, MS 39205-	Purpose of Disbursement Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/06/200	Amount of Each Disbursement This Period \$69.94
D. Full Name, Mailing Address and Zip Code Bell Atlantic Mobile Sys., Inc. P.O. Box 580334 Charlotte, NC 28258-0334	Purpose of Disbursement Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/13/200	Amount of Each Disbursement This Period \$522.02
E. Full Name, Mailing Address and Zip Code Bell Atlantic Mobile Sys., Inc. P.O. Box 580334 Charlotte, NC 28258-0334	Purpose of Disbursement Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/08/200	Amount of Each Disbursement This Period \$480.16
F. Full Name, Mailing Address and Zip Code Bell Atlantic Mobile Sys., Inc. P.O. Box 580334 Charlotte, NC 28258-0334	Purpose of Disbursement Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/08/200	Amount of Each Disbursement This Period \$68.67
G. Full Name, Mailing Address and Zip Code Bell Atlantic Mobile Sys., Inc. P.O. Box 580334 Charlotte, NC 28258-0334	Purpose of Disbursement Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/15/200	Amount of Each Disbursement This Period \$374.52

SUBTOTAL of Disbursements This Page (optional)

\$1666.73

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 3 OF 33
FOR LINE NUMBER
17

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Bell South 85 Annex Atlanta, GA 30385-0001	Purpose of Disbursement Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/04/200	Amount of Each Disbursement This Period \$1547.13
B. Full Name, Mailing Address and Zip Code Bell South 85 Annex Atlanta, GA 30385-0001	Purpose of Disbursement Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/04/200	Amount of Each Disbursement This Period \$40.05
C. Full Name, Mailing Address and Zip Code Bell South 85 Annex Atlanta, GA 30385-0001	Purpose of Disbursement Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/03/200	Amount of Each Disbursement This Period \$964.81
D. Full Name, Mailing Address and Zip Code Bell South 85 Annex Atlanta, GA 30385-0001	Purpose of Disbursement Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/17/200	Amount of Each Disbursement This Period \$28.94
E. Full Name, Mailing Address and Zip Code Bell South 85 Annex Atlanta, GA 30385-0001	Purpose of Disbursement Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/13/200	Amount of Each Disbursement This Period \$65.84
F. Full Name, Mailing Address and Zip Code Bell South 85 Annex Atlanta, GA 30385-0001	Purpose of Disbursement Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/29/200	Amount of Each Disbursement This Period \$1954.08
G. Full Name, Mailing Address and Zip Code Bell South 85 Annex Atlanta, GA 30385-0001	Purpose of Disbursement Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/22/200	Amount of Each Disbursement This Period \$44.38

SUBTOTAL of Disbursements This Page (optional)

\$4645.23

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 4 OF 33
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Bell South 85 Annex Atlanta, GA 30385-0001	Purpose of Disbursement Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/27/200	Amount of Each Disbursement This Period \$28.94
B. Full Name, Mailing Address and Zip Code Bell South 85 Annex Atlanta, GA 30385-0001	Purpose of Disbursement Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/08/200	Amount of Each Disbursement This Period \$128.88
C. Full Name, Mailing Address and Zip Code Bell South 1133 21st Street, NW Suite 900 Washington, DC 20037-	Purpose of Disbursement Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/11/200	Amount of Each Disbursement This Period \$635.00
D. Full Name, Mailing Address and Zip Code Bell South 1133 21st Street, NW Suite 900 Washington, DC 20037-	Purpose of Disbursement Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/25/200	Amount of Each Disbursement This Period \$760.00
E. Full Name, Mailing Address and Zip Code Bell South Mobility P.O. Box 530044 Atlanta, GA 30353-0044	Purpose of Disbursement Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/27/200	Amount of Each Disbursement This Period \$923.04
F. Full Name, Mailing Address and Zip Code Bell South Mobility P.O. Box 530044 Atlanta, GA 30353-0044	Purpose of Disbursement Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/29/200	Amount of Each Disbursement This Period \$568.47
G. Full Name, Mailing Address and Zip Code Bell South Mobility P.O. Box 530044 Atlanta, GA 30353-0044	Purpose of Disbursement Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/03/200	Amount of Each Disbursement This Period \$696.66

SUBTOTAL of Disbursements This Page (optional)

\$3740.99

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

 PAGE 5 OF 33
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Bell South Mobility P.O. Box 530044 Atlanta, GA 30353-0044	Purpose of Disbursement Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/25/200	Amount of Each Disbursement This Period \$793.23
B. Full Name, Mailing Address and Zip Code Bret Boyles 1802C South Ninth Street Arlington, VA 22204-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/30/200	Amount of Each Disbursement This Period \$1404.96
C. Full Name, Mailing Address and Zip Code Bret Boyles 1802C South Ninth Street Arlington, VA 22204-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/15/200	Amount of Each Disbursement This Period \$1404.96
D. Full Name, Mailing Address and Zip Code Bret Boyles 1802C South Ninth Street Arlington, VA 22204-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/14/200	Amount of Each Disbursement This Period \$1404.96
E. Full Name, Mailing Address and Zip Code Bret Boyles 1802C South Ninth Street Arlington, VA 22204-	Purpose of Disbursement Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/22/200	Amount of Each Disbursement This Period \$579.31
F. Full Name, Mailing Address and Zip Code Bret Boyles 1802C South Ninth Street Arlington, VA 22204-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/28/200	Amount of Each Disbursement This Period \$1404.96
G. Full Name, Mailing Address and Zip Code Bret Boyles 1802C South Ninth Street Arlington, VA 22204-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/15/200	Amount of Each Disbursement This Period \$1404.96

SUBTOTAL of Disbursements This Page (optional)

\$8397.34

TOTAL This Period (last page this line number only)

SCHEDULE B
ITEMIZED DISBURSEMENTS

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

PAGE	OF
6	33
FOR LINE NUMBER	
17	

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Bret Boyles 1802C South Ninth Street Arlington, VA 22204-	Purpose of Disbursement Travel Expense	Date (month, day, year) 05/15/200	Amount of Each Disbursement This Period \$337.00
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
B. Full Name, Mailing Address and Zip Code Bret Boyles 1802C South Ninth Street Arlington, VA 22204-	Purpose of Disbursement Payroll	Date (month, day, year) 05/31/200	Amount of Each Disbursement This Period \$1404.96
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
C. Full Name, Mailing Address and Zip Code CAC Direct Marketing 99 Ray Road Baltimore, MD 21227-	Purpose of Disbursement Direct Mail Expense	Date (month, day, year) 06/29/200	Amount of Each Disbursement This Period \$319.11
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
D. Full Name, Mailing Address and Zip Code CAC Direct Marketing 99 Ray Road Baltimore, MD 21227-	Purpose of Disbursement Direct Mail Expense	Date (month, day, year) 06/08/200	Amount of Each Disbursement This Period \$528.11
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
E. Full Name, Mailing Address and Zip Code CAC Direct Marketing 99 Ray Road Baltimore, MD 21227-	Purpose of Disbursement Direct Mail Expense	Date (month, day, year) 05/04/200	Amount of Each Disbursement This Period \$1425.31
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
F. Full Name, Mailing Address and Zip Code CAC Direct Marketing 99 Ray Road Baltimore, MD 21227-	Purpose of Disbursement Direct Mail Expense	Date (month, day, year) 04/06/200	Amount of Each Disbursement This Period \$384.60
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		

SUBTOTAL of Disbursements This Page (optional)

4,399.09

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 7 OF 33
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Advance America Cash Advance Center Inc 961 East Main Street Spartanburg, SC 29302-	Purpose of Disbursement Travel Expense-Airfare Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/12/200	Amount of Each Disbursement This Period \$2358.00
B. Full Name, Mailing Address and Zip Code Coca Cola Enterprises P.O. Box 79337 Baltimore, MD 21279-0337	Purpose of Disbursement Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/15/200	Amount of Each Disbursement This Period \$30.00
C. Full Name, Mailing Address and Zip Code Coca Cola Enterprises P.O. Box 79337 Baltimore, MD 21279-0337	Purpose of Disbursement Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/03/200	Amount of Each Disbursement This Period \$60.00
D. Full Name, Mailing Address and Zip Code Coca Cola Enterprises P.O. Box 79337 Baltimore, MD 21279-0337	Purpose of Disbursement Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/13/200	Amount of Each Disbursement This Period \$240.00
E. Full Name, Mailing Address and Zip Code Coca Cola Enterprises P.O. Box 79337 Baltimore, MD 21279-0337	Purpose of Disbursement Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/22/200	Amount of Each Disbursement This Period \$60.00
F. Full Name, Mailing Address and Zip Code Coca Cola Enterprises P.O. Box 79337 Baltimore, MD 21279-0337	Purpose of Disbursement Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/22/200	Amount of Each Disbursement This Period \$360.00
G. Full Name, Mailing Address and Zip Code Coca Cola Enterprises P.O. Box 79337 Baltimore, MD 21279-0337	Purpose of Disbursement Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/08/200	Amount of Each Disbursement This Period \$90.00

SUBTOTAL of Disbursements This Page (optional)

\$3198.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule for each category of the Detailed Summary Page

PAGE	OF
8	33
FOR LINE NUMBER	
17	

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Coca Cola Enterprises P.O. Box 79337 Baltimore, MD 21279-0337	Purpose of Disbursement Office Supplies	Date (month, day, year) 05/17/200	Amount of Each Disbursement This Period \$90.00
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
B. Full Name, Mailing Address and Zip Code Coca Cola Enterprises P.O. Box 79337 Baltimore, MD 21279-0337	Purpose of Disbursement Office Supplies	Date (month, day, year) 05/25/200	Amount of Each Disbursement This Period \$240.00
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
C. Full Name, Mailing Address and Zip Code Coca Cola Enterprises P.O. Box 79337 Baltimore, MD 21279-0337	Purpose of Disbursement Office Supplies	Date (month, day, year) 04/27/200	Amount of Each Disbursement This Period \$60.00
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
D. Full Name, Mailing Address and Zip Code Coffee Plus 2324 B Montgomery Street Silver Spring, MD 20910-	Purpose of Disbursement Office Supplies	Date (month, day, year) 05/15/200	Amount of Each Disbursement This Period \$32.55
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
E. Full Name, Mailing Address and Zip Code Coffee Plus 2324 B Montgomery Street Silver Spring, MD 20910-	Purpose of Disbursement Office Supplies	Date (month, day, year) 05/25/200	Amount of Each Disbursement This Period \$27.00
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
F. Full Name, Mailing Address and Zip Code Coffee Plus 2324 B Montgomery Street Silver Spring, MD 20910-	Purpose of Disbursement Office Supplies	Date (month, day, year) 05/04/200	Amount of Each Disbursement This Period \$54.00
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		
G. Full Name, Mailing Address and Zip Code Coffee Plus 2324 B Montgomery Street Silver Spring, MD 20910-	Purpose of Disbursement Office Supplies	Date (month, day, year) 06/22/200	Amount of Each Disbursement This Period \$57.35
	Disbursement for: ☐ Primary ☐ General ☐ Other (specify)		

SUBTOTAL of Disbursements This Page (optional)

\$560.90

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 9 OF 33
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Coffee Plus 2324 B Montgomery Street Silver Spring, MD 20910-	Purpose of Disbursement Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 06/08/200	Amount of Each Disbursement This Period \$72.05
B. Full Name, Mailing Address and Zip Code Coffee Plus 2324 B Montgomery Street Silver Spring, MD 20910-	Purpose of Disbursement Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 04/13/200	Amount of Each Disbursement This Period \$50.40
C. Full Name, Mailing Address and Zip Code William Lafayette Cox, I P.O. Box 821 Southaven, MS 38671-	Purpose of Disbursement Campaign Consulting-Field Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 06/29/200	Amount of Each Disbursement This Period \$2500.00
D. Full Name, Mailing Address and Zip Code 	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and Zip Code D.C. Office of Tax and Revenue 941 North Capitol Street, NE Washington, DC 20002-	Purpose of Disbursement State Withholding Tax Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 06/08/200	Amount of Each Disbursement This Period \$3355.48
F. Full Name, Mailing Address and Zip Code Dirt Road Productions 53 Old Farm Road Stowe, VT 05672-	Purpose of Disbursement Advertising Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 06/01/200	Amount of Each Disbursement This Period \$3412.00
G. Full Name, Mailing Address and Zip Code Dynamex P.O. Box 99188 Pittsburgh, PA 15233-	Purpose of Disbursement Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 04/13/200	Amount of Each Disbursement This Period \$71.90

SUBTOTAL of Disbursements This Page (optional)

9,461.83

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 10 OF 33
FOR LINE NUMBER
17

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Dynamex P.O. Box 99188 Pittsburgh, PA 15233-	Purpose of Disbursement Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/15/200	Amount of Each Disbursement This Period \$36.45
B. Full Name, Mailing Address and Zip Code Doc Everett P.O. Box 2931 Meridian, MS 39302-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/26/200	Amount of Each Disbursement This Period \$1000.00
C. Full Name, Mailing Address and Zip Code Doc Everett P.O. Box 2931 Meridian, MS 39302-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/31/200	Amount of Each Disbursement This Period \$1000.00
D. Full Name, Mailing Address and Zip Code Doc Everett P.O. Box 2931 Meridian, MS 39302-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/30/200	Amount of Each Disbursement This Period \$1000.00
E. Full Name, Mailing Address and Zip Code Federal Express Corporation P.O. Box 1140 Memphis, TN 38101-1140	Purpose of Disbursement Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/22/200	Amount of Each Disbursement This Period \$11.78
F. Full Name, Mailing Address and Zip Code Federal Express Corporation P.O. Box 1140 Memphis, TN 38101-1140	Purpose of Disbursement Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/08/200	Amount of Each Disbursement This Period \$58.30
G. Full Name, Mailing Address and Zip Code Federal Express Corporation P.O. Box 1140 Memphis, TN 38101-1140	Purpose of Disbursement Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/27/200	Amount of Each Disbursement This Period \$71.49

SUBTOTAL of Disbursements This Page (optional)

\$3178.02

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 11 OF 33
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Federal Express Corporation P.O. Box 1140 Memphis, TN 38101-1140	Purpose of Disbursement Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/04/200	Amount of Each Disbursement This Period \$66.83
B. Full Name, Mailing Address and Zip Code Federal Express Corporation P.O. Box 1140 Memphis, TN 38101-1140	Purpose of Disbursement Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/29/200	Amount of Each Disbursement This Period \$29.47
C. Full Name, Mailing Address and Zip Code Federal Express Corporation P.O. Box 1140 Memphis, TN 38101-1140	Purpose of Disbursement Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/30/200	Amount of Each Disbursement This Period \$1290.00
D. Full Name, Mailing Address and Zip Code Federal Express Corporation P.O. Box 1140 Memphis, TN 38101-1140	Purpose of Disbursement Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/17/200	Amount of Each Disbursement This Period \$25.49
E. Full Name, Mailing Address and Zip Code Federal Express Corporation P.O. Box 1140 Memphis, TN 38101-1140	Purpose of Disbursement Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/13/200	Amount of Each Disbursement This Period \$32.85
F. Full Name, Mailing Address and Zip Code Federal Express Corporation P.O. Box 1140 Memphis, TN 38101-1140	Purpose of Disbursement Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/01/200	Amount of Each Disbursement This Period \$11.13
G. Full Name, Mailing Address and Zip Code Federal Express Corporation P.O. Box 1140 Memphis, TN 38101-1140	Purpose of Disbursement Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/03/200	Amount of Each Disbursement This Period \$43.81

SUBTOTAL of Disbursements This Page (optional)

\$1499.58

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

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate sheets for each category of the Detailed Summary Page

PAGE 12 OF 33
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Federal Express Corporation P.O. Box 1140 Memphis, TN 38101-1140	Purpose of Disbursement Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/15/200	Amount of Each Disbursement This Period \$26.56
B. Full Name, Mailing Address and Zip Code Federal Express Corporation P.O. Box 1140 Memphis, TN 38101-1140	Purpose of Disbursement Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/15/200	Amount of Each Disbursement This Period \$388.96
C. Full Name, Mailing Address and Zip Code Federal Express Corporation P.O. Box 1140 Memphis, TN 38101-1140	Purpose of Disbursement Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/15/200	Amount of Each Disbursement This Period \$404.55
D. Full Name, Mailing Address and Zip Code Federal Express Corporation P.O. Box 1140 Memphis, TN 38101-1140	Purpose of Disbursement Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/04/200	Amount of Each Disbursement This Period \$369.76
E. Full Name, Mailing Address and Zip Code Federal Express Corporation P.O. Box 1140 Memphis, TN 38101-1140	Purpose of Disbursement Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/06/200	Amount of Each Disbursement This Period \$29.17
F. Full Name, Mailing Address and Zip Code Gold Key Lease, Inc. 2424 Edenborn Avenue, Suite 320 Metairie, LA 70001-	Purpose of Disbursement Automobile Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/04/200	Amount of Each Disbursement This Period \$433.45
G. Full Name, Mailing Address and Zip Code Gold Key Lease, Inc. 2424 Edenborn Avenue, Suite 320 Metairie, LA 70001-	Purpose of Disbursement Automobile Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/08/200	Amount of Each Disbursement This Period \$433.45

SUBTOTAL of Disbursements This Page (optional)

\$2085.90

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Subsidy PagePAGE 13 OF 33
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Gold Key Lease, Inc. 2424 Edenborn Avenue, Suite 320 Metairie, LA 70001-	Purpose of Disbursement Auto Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/26/200	Amount of Each Disbursement This Period \$2.25
B. Full Name, Mailing Address and Zip Code Gold Key Lease, Inc. 2424 Edenborn Avenue, Suite 320 Metairie, LA 70001-	Purpose of Disbursement Automobile Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/26/200	Amount of Each Disbursement This Period \$476.79
C. Full Name, Mailing Address and Zip Code William Gottshall P.O. Box 22824 Jackson, MS 39225	Purpose of Disbursement Meeting Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/08/200	Amount of Each Disbursement This Period \$231.75
D. Full Name, Mailing Address and Zip Code William Gottshall P.O. Box 22824 Jackson, MS 39225	Purpose of Disbursement Meeting Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/13/200	Amount of Each Disbursement This Period \$280.05
E. Full Name, Mailing Address and Zip Code Mack Heidelberg 277 Peach Orchard Drive Ridgeland, MS 39157-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/15/200	Amount of Each Disbursement This Period \$1447.70
F. Full Name, Mailing Address and Zip Code Mack Heidelberg 277 Peach Orchard Drive Ridgeland, MS 39157-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/30/200	Amount of Each Disbursement This Period \$1447.70
G. Full Name, Mailing Address and Zip Code Jackson Air Charter P.O. Box 98248 Jackson, MS 39298-	Purpose of Disbursement Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/25/200	Amount of Each Disbursement This Period \$2171.75

SUBTOTAL of Disbursements This Page (optional)

\$6057.99

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 14 OF 33
FOR LINE NUMBER
17

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Jackson Air Charter P.O. Box 98248 Jackson, MS 39298-	Purpose of Disbursement Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/15/200	Amount of Each Disbursement This Period \$3081.66
B. Full Name, Mailing Address and Zip Code Jackson Hilton 1001 East County Line Road Jackson, MS 39211-	Purpose of Disbursement Event Expense - Facility rental Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/11/200	Amount of Each Disbursement This Period \$2009.70
C. Full Name, Mailing Address and Zip Code Jimmy Zee's Services P.O. Box 253 Clinton, MS 20735-	Purpose of Disbursement Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/03/200	Amount of Each Disbursement This Period \$62.50
D. Full Name, Mailing Address and Zip Code Jimmy Zee's Services P.O. Box 253 Clinton, MS 20735-	Purpose of Disbursement Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/22/200	Amount of Each Disbursement This Period \$50.46
E. Full Name, Mailing Address and Zip Code Jimmy Zee's Services P.O. Box 253 Clinton, MS 20735-	Purpose of Disbursement Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/27/200	Amount of Each Disbursement This Period \$55.02
F. Full Name, Mailing Address and Zip Code Jimmy Zee's Services P.O. Box 253 Clinton, MS 20735-	Purpose of Disbursement Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/17/200	Amount of Each Disbursement This Period \$27.29
G. Full Name, Mailing Address and Zip Code Jimmy Zee's Services P.O. Box 253 Clinton, MS 20735-	Purpose of Disbursement Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/04/200	Amount of Each Disbursement This Period \$35.49

SUBTOTAL of Disbursements This Page (optional)

\$5322.12

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 15 OF 39
FOR LINE NUMBER
17

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Jimmy Zee's Services P.O. Box 253 Clinton, MS 20735-	Purpose of Disbursement Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/01/200	Amount of Each Disbursement This Period \$37.16
B. Full Name, Mailing Address and Zip Code Maurice H. Joseph, Inc. P.O. Box 425 Jackson, MS 39205-0425	Purpose of Disbursement Rent Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/27/200	Amount of Each Disbursement This Period \$4008.04
C. Full Name, Mailing Address and Zip Code Maurice H. Joseph, Inc. P.O. Box 425 Jackson, MS 39205-0425	Purpose of Disbursement Rent Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/15/200	Amount of Each Disbursement This Period \$4008.04
D. Full Name, Mailing Address and Zip Code Maurice H. Joseph, Inc. P.O. Box 425 Jackson, MS 39205-0425	Purpose of Disbursement Rent Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/17/200	Amount of Each Disbursement This Period \$4008.04
E. Full Name, Mailing Address and Zip Code Maurice H. Joseph, Inc. P.O. Box 425 Jackson, MS 39205-0425	Purpose of Disbursement Rent Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/06/200	Amount of Each Disbursement This Period \$4008.04
F. Full Name, Mailing Address and Zip Code Teresa Love 105 Spencer Cove Clinton, MS 39056-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/31/200	Amount of Each Disbursement This Period \$1633.76
G. Full Name, Mailing Address and Zip Code Teresa Love 105 Spencer Cove Clinton, MS 39056-	Purpose of Disbursement Travel and Lodging Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/01/200	Amount of Each Disbursement This Period \$241.50

SUBTOTAL of Disbursements This Page (optional)

\$17944.58

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 16 OF 33
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Teresa Love 105 Spencer Cove Clinton, MS 39056-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 05/15/200	Amount of Each Disbursement This Period \$1633.76
B. Full Name, Mailing Address and Zip Code Teresa Love 105 Spencer Cove Clinton, MS 39056-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 04/28/200	Amount of Each Disbursement This Period \$1633.76
C. Full Name, Mailing Address and Zip Code Teresa Love 105 Spencer Cove Clinton, MS 39056-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 06/15/200	Amount of Each Disbursement This Period \$1633.76
D. Full Name, Mailing Address and Zip Code Teresa Love 105 Spencer Cove Clinton, MS 39056-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 06/30/200	Amount of Each Disbursement This Period \$1633.76
E. Full Name, Mailing Address and Zip Code MCI P.O. Box 85059 Louisville, KY 40285-	Purpose of Disbursement Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 05/11/200	Amount of Each Disbursement This Period \$588.50
F. Full Name, Mailing Address and Zip Code 	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and Zip Code Mississippi Tax Commission P.O. Box 1033 Jackson, MS 39215-	Purpose of Disbursement State Withholding Tax Disbursement for: ☐ Primary ☐ General ☐ Other (specify):	Date (month, day, year) 06/08/200	Amount of Each Disbursement This Period \$2570.00

SUBTOTAL of Disbursements This Page (optional)

9,693.54

TOTAL This Period (last page this line number only)

SCHEDULE B
ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Summary Page

 PAGE 17 OF 33
 FOR LINE NUMBER 17

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NAME OF COMMITTEE (in full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Medgar Evers/B.B. King Homecoming 1024 Pecan Park Circle Jackson, MS 39209-	Purpose of Disbursement Advertising Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/15/200	Amount of Each Disbursement This Period \$250.00
B. Full Name, Mailing Address and Zip Code Mercury Aviation, Inc. 1052 Highland Colony Parkway Suite 202 Ridgeland, MS 39157-	Purpose of Disbursement Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/25/200	Amount of Each Disbursement This Period \$1250.00
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and Zip Code Mid State Telephone Contractors P.O. Box 54456 Jackson, MS 39288-4456	Purpose of Disbursement Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/27/200	Amount of Each Disbursement This Period \$107.00
E. Full Name, Mailing Address and Zip Code Mid State Telephone Contractors P.O. Box 54456 Jackson, MS 39288-4456	Purpose of Disbursement Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/15/200	Amount of Each Disbursement This Period \$80.25
F. Full Name, Mailing Address and Zip Code Mid State Telephone Contractors P.O. Box 54456 Jackson, MS 39288-4456	Purpose of Disbursement Telephone Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/08/200	Amount of Each Disbursement This Period \$128.40
G. Full Name, Mailing Address and Zip Code Mississippi Gala P.O. Box 60 Jackson, MS 39205-	Purpose of Disbursement Event Expense - Catering Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/22/200	Amount of Each Disbursement This Period \$1000.00

SUBTOTAL of Disbursements This Page (optional)

2,815.65

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 18 OF 33
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Mobile Air Center P O Box 88027 Mobile, AL 36608-	Purpose of Disbursement Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/25/200	Amount of Each Disbursement This Period \$2377.78
B. Full Name, Mailing Address and Zip Code Mobile Air Center P O Box 88027 Mobile, AL 36608-	Purpose of Disbursement Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/27/200	Amount of Each Disbursement This Period \$1563.03
C. Full Name, Mailing Address and Zip Code Mobile Air Center P O Box 88027 Mobile, AL 36608-	Purpose of Disbursement Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/03/200	Amount of Each Disbursement This Period \$1335.19
D. Full Name, Mailing Address and Zip Code 	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and Zip Code 	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and Zip Code Paychex 3060 Williams Drive #300 Fairfax, VA 22031-	Purpose of Disbursement Payroll Service Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/10/200	Amount of Each Disbursement This Period \$108.51
G. Full Name, Mailing Address and Zip Code Paychex 3060 Williams Drive #300 Fairfax, VA 22031-	Purpose of Disbursement Payroll Taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/30/200	Amount of Each Disbursement This Period \$3944.89

SUBTOTAL of Disbursements This Page (optional)

9,329.40

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SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 19 OF 33
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Paychex 3060 Williams Drive #300 Fairfax, VA 22031-	Purpose of Disbursement Payroll Taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/15/200	Amount of Each Disbursement This Period \$5054.08
B. Full Name, Mailing Address and Zip Code Paychex 3060 Williams Drive #300 Fairfax, VA 22031-	Purpose of Disbursement Payroll Service Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/12/200	Amount of Each Disbursement This Period \$100.69
C. Full Name, Mailing Address and Zip Code Paychex 3060 Williams Drive #300 Fairfax, VA 22031-	Purpose of Disbursement Payroll Taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/31/200	Amount of Each Disbursement This Period \$4472.51
D. Full Name, Mailing Address and Zip Code Paychex 3060 Williams Drive #300 Fairfax, VA 22031-	Purpose of Disbursement Payroll Taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/30/200	Amount of Each Disbursement This Period \$537.62
E. Full Name, Mailing Address and Zip Code Paychex 3060 Williams Drive #300 Fairfax, VA 22031-	Purpose of Disbursement Payroll Taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/30/200	Amount of Each Disbursement This Period \$5346.26
F. Full Name, Mailing Address and Zip Code Paychex 3060 Williams Drive #300 Fairfax, VA 22031-	Purpose of Disbursement Payroll Taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/15/200	Amount of Each Disbursement This Period \$3643.79
G. Full Name, Mailing Address and Zip Code Paychex 3060 Williams Drive #300 Fairfax, VA 22031-	Purpose of Disbursement Payroll Service Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/10/200	Amount of Each Disbursement This Period \$127.46

SUBTOTAL of Disbursements This Page (optional)

\$19282.41

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 20 OF 33
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Paychex 3060 Williams Drive #300 Fairfax, VA 22031-	Purpose of Disbursement Payroll Taxes Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/15/200	Amount of Each Disbursement This Period \$4177.41
B. Full Name, Mailing Address and Zip Code Petty Cash 201 North Union Street Suite 530 Alexandria, VA 22314-	Purpose of Disbursement Petty Cash Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/08/200	Amount of Each Disbursement This Period \$116.85
C. Full Name, Mailing Address and Zip Code Petty Cash 201 North Union Street Suite 530 Alexandria, VA 22314-	Purpose of Disbursement Petty Cash Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/04/200	Amount of Each Disbursement This Period \$132.09
D. Full Name, Mailing Address and Zip Code Petty Cash 201 North Union Street Suite 530 Alexandria, VA 22314-	Purpose of Disbursement Petty Cash Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/22/200	Amount of Each Disbursement This Period \$197.99
E. Full Name, Mailing Address and Zip Code Petty Cash 201 North Union Street Suite 530 Alexandria, VA 22314-	Purpose of Disbursement Petty Cash Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/03/200	Amount of Each Disbursement This Period \$136.96
F. Full Name, Mailing Address and Zip Code Petty Cash 201 North Union Street Suite 530 Alexandria, VA 22314-	Purpose of Disbursement Petty Cash Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/13/200	Amount of Each Disbursement This Period \$197.14
G. Full Name, Mailing Address and Zip Code Philip Morris Management Corp. 1341 G Street, NW Suite 900 Washington, DC 20005-	Purpose of Disbursement Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/17/200	Amount of Each Disbursement This Period \$3800.00

SUBTOTAL of Disbursements This Page (optional)

\$8758.44

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 21 OF 33
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)
Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code R.J. Reynolds 1455 Pennsylvania Avenue, NW Suite 925 Washington, DC 20004-1077	Purpose of Disbursement Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/22/200	Amount of Each Disbursement This Period \$1947.50
B. Full Name, Mailing Address and Zip Code Reynolds, Ernest D. Jr. 1701 Midway Road Clinton, MS 39056-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/15/200	Amount of Each Disbursement This Period \$2049.36
C. Full Name, Mailing Address and Zip Code Reynolds, Ernest D. Jr. 1701 Midway Road Clinton, MS 39056-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/28/200	Amount of Each Disbursement This Period \$2049.36
D. Full Name, Mailing Address and Zip Code Reynolds, Ernest D. Jr. 1701 Midway Road Clinton, MS 39056-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/15/200	Amount of Each Disbursement This Period \$2049.36
E. Full Name, Mailing Address and Zip Code Reynolds, Ernest D. Jr. 1701 Midway Road Clinton, MS 39056-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/30/200	Amount of Each Disbursement This Period \$2049.36
F. Full Name, Mailing Address and Zip Code Reynolds, Ernest D. Jr. 1701 Midway Road Clinton, MS 39056-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/14/200	Amount of Each Disbursement This Period \$2049.36
G. Full Name, Mailing Address and Zip Code Reynolds, Ernest D. Jr. 1701 Midway Road Clinton, MS 39056-	Purpose of Disbursement Travel and Office Expenses Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/15/200	Amount of Each Disbursement This Period \$687.45

SUBTOTAL of Disbursements This Page (optional)

\$12881.75

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SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 22 OF 33
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Reynolds, Ernest D. Jr. 1701 Midway Road Clinton, MS 39056-	Purpose of Disbursement Office Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/06/200	Amount of Each Disbursement This Period \$493.11
B. Full Name, Mailing Address and Zip Code Reynolds, Ernest D. Jr. 1701 Midway Road Clinton, MS 39056-	Purpose of Disbursement Expense Report-Travel Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/04/200	Amount of Each Disbursement This Period \$1243.64
C. Full Name, Mailing Address and Zip Code Reynolds, Ernest D. Jr. 1701 Midway Road Clinton, MS 39056-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/31/200	Amount of Each Disbursement This Period \$2049.36
D. Full Name, Mailing Address and Zip Code Service Printers, Inc. P.O. Box 55749 Jackson, MS 39296-5749	Purpose of Disbursement Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/03/200	Amount of Each Disbursement This Period \$1887.48
E. Full Name, Mailing Address and Zip Code Service Printers, Inc. P.O. Box 55749 Jackson, MS 39296-5749	Purpose of Disbursement Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/08/200	Amount of Each Disbursement This Period \$82.00
F. Full Name, Mailing Address and Zip Code Service Printers, Inc. P.O. Box 55749 Jackson, MS 39296-5749	Purpose of Disbursement Printing Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/17/200	Amount of Each Disbursement This Period \$107.00
G. Full Name, Mailing Address and Zip Code Service Printers, Inc. P.O. Box 55749 Jackson, MS 39296-5749	Purpose of Disbursement Printing Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/27/200	Amount of Each Disbursement This Period \$2247.00

SUBTOTAL of Disbursements This Page (optional)

\$8109.59

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 23 OF 33
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Sheriff's Annual Gospel Sing P.O. Box 603 Gulfport, MS 39502-	Purpose of Disbursement Advertising Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/15/200	Amount of Each Disbursement This Period \$500.00
B. Full Name, Mailing Address and Zip Code Dirk P. Smith 1825 T Street, NW, #202 Washington, DC 20009-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/15/200	Amount of Each Disbursement This Period \$454.50
C. Full Name, Mailing Address and Zip Code Dirk P. Smith 1825 T Street, NW, #202 Washington, DC 20009-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/30/200	Amount of Each Disbursement This Period \$454.50
D. Full Name, Mailing Address and Zip Code Dirk P. Smith 1825 T Street, NW, #202 Washington, DC 20009-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/15/200	Amount of Each Disbursement This Period \$454.50
E. Full Name, Mailing Address and Zip Code Dirk P. Smith 1825 T Street, NW, #202 Washington, DC 20009-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/14/200	Amount of Each Disbursement This Period \$454.50
F. Full Name, Mailing Address and Zip Code Dirk P. Smith 1825 T Street, NW, #202 Washington, DC 20009-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/28/200	Amount of Each Disbursement This Period \$454.50
G. Full Name, Mailing Address and Zip Code Dirk P. Smith 1825 T Street, NW, #202 Washington, DC 20009-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/31/200	Amount of Each Disbursement This Period \$454.50

SUBTOTAL of Disbursements This Page (optional)

\$3227.00

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of item
Detailed Summary PagePAGE 24 OF 33
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code State Farm Mutual Auto Ins. Co 100 State Farm Parkway Birmingham, AL 35297-	Purpose of Disbursement Automobile Insurance Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/01/200	Amount of Each Disbursement This Period \$588.68
B. Full Name, Mailing Address and Zip Code 	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and Zip Code The Neshoba Democrat P.O. Box 30 Philadelphia, MS 39350-	Purpose of Disbursement Advertising Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/22/200	Amount of Each Disbursement This Period \$1025.00
D. Full Name, Mailing Address and Zip Code The Terrance Group 211 N. Union Street Suite 200 Alexandria, VA 22314-	Purpose of Disbursement Polling Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/27/200	Amount of Each Disbursement This Period \$26400.00
E. Full Name, Mailing Address and Zip Code Judith B. Thompson 2026 Utica Road Crystal Springs, MS 39059-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/15/200	Amount of Each Disbursement This Period \$1042.18
F. Full Name, Mailing Address and Zip Code Judith B. Thompson 2026 Utica Road Crystal Springs, MS 39059-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/15/200	Amount of Each Disbursement This Period \$1042.18
G. Full Name, Mailing Address and Zip Code Judith B. Thompson 2026 Utica Road Crystal Springs, MS 39059-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/30/200	Amount of Each Disbursement This Period \$1042.18

SUBTOTAL of Disbursements This Page (optional)

31,140.22

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
detailed summary page

PAGE 25 OF 33
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Judith B. Thompson 2026 Utica Road Crystal Springs, MS 39059-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/14/200	Amount of Each Disbursement This Period \$1042.18
B. Full Name, Mailing Address and Zip Code Judith B. Thompson 2026 Utica Road Crystal Springs, MS 39059-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/31/200	Amount of Each Disbursement This Period \$1042.18
C. Full Name, Mailing Address and Zip Code Judith B. Thompson 2026 Utica Road Crystal Springs, MS 39059-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/28/200	Amount of Each Disbursement This Period \$1042.18
D. Full Name, Mailing Address and Zip Code Torpedo Factory Associates 34 Wygant Road P O Box 239 Creamridge, NJ 08514-	Purpose of Disbursement Rent Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/15/200	Amount of Each Disbursement This Period \$1643.47
E. Full Name, Mailing Address and Zip Code Torpedo Factory Associates 34 Wygant Road P O Box 239 Creamridge, NJ 08514-	Purpose of Disbursement Rent Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/27/200	Amount of Each Disbursement This Period \$1636.87
F. Full Name, Mailing Address and Zip Code Torpedo Factory Associates 34 Wygant Road P O Box 239 Creamridge, NJ 08514-	Purpose of Disbursement Rent Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/09/200	Amount of Each Disbursement This Period \$26.34
G. Full Name, Mailing Address and Zip Code Torpedo Factory Associates 34 Wygant Road P O Box 239 Creamridge, NJ 08514-	Purpose of Disbursement Rent Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/17/200	Amount of Each Disbursement This Period \$1650.06

SUBTOTAL of Disbursements This Page (optional)

\$8083.28

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 26 OF 33
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Torpedo Factory Associates 34 Wygant Road P O Box 239 Creamridge, NJ 08514-	Purpose of Disbursement Rent Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/06/200	Amount of Each Disbursement This Period \$1636.87
B. Full Name, Mailing Address and Zip Code Foundation	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and Zip Code U.S. Postmaster South Washington Street Alexandria, VA 22314-	Purpose of Disbursement Postage Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/08/200	Amount of Each Disbursement This Period \$330.00
E. Full Name, Mailing Address and Zip Code U.S. Postmaster South Washington Street Alexandria, VA 22314-	Purpose of Disbursement Postage Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/27/200	Amount of Each Disbursement This Period \$10364.39
F. Full Name, Mailing Address and Zip Code U.S. Postmaster-MD 1710 Underpass Way Hagerstown, MD 21740-	Purpose of Disbursement Postage Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/13/200	Amount of Each Disbursement This Period \$330.00
G. Full Name, Mailing Address and Zip Code U.S. Postmaster-MD 1710 Underpass Way Hagerstown, MD 21740-	Purpose of Disbursement Postage Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/25/200	Amount of Each Disbursement This Period \$9000.00

SUBTOTAL of Disbursements This Page (optional)

29,661.26

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 27 OF 33
FOR LINE NUMBER 17

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

NAME OF COMMITTEE (in full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code U.S. Postmaster-MD 1710 Underpass Way Hagerstown, MD 21740-	Purpose of Disbursement Postage Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/15/200	Amount of Each Disbursement This Period \$5000.00
B. Full Name, Mailing Address and Zip Code U.S. Postmaster-MD 1710 Underpass Way Hagerstown, MD 21740-	Purpose of Disbursement Postage Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/27/200	Amount of Each Disbursement This Period \$5000.00
C. Full Name, Mailing Address and Zip Code U.S. Senate Gift Shop 180 Russell Senate Office Bldg Washington, DC 20510-	Purpose of Disbursement Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/22/200	Amount of Each Disbursement This Period \$74.00
D. Full Name, Mailing Address and Zip Code U.S. Senate Gift Shop 180 Russell Senate Office Bldg Washington, DC 20510-	Purpose of Disbursement Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/17/200	Amount of Each Disbursement This Period \$37.00
E. Full Name, Mailing Address and Zip Code U.S. Senate Gift Shop 180 Russell Senate Office Bldg Washington, DC 20510-	Purpose of Disbursement Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/27/200	Amount of Each Disbursement This Period \$340.00
F. Full Name, Mailing Address and Zip Code U.S. Senate Gift Shop 180 Russell Senate Office Bldg Washington, DC 20510-	Purpose of Disbursement Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/13/200	Amount of Each Disbursement This Period \$41.40
G. Full Name, Mailing Address and Zip Code U.S. Senate Gift Shop 180 Russell Senate Office Bldg Washington, DC 20510-	Purpose of Disbursement Office Supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/01/200	Amount of Each Disbursement This Period \$74.00

SUBTOTAL of Disbursements This Page (optional)

\$10566.40

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

 use separate schedule(s)
for each category of line
Detailed Summary Page

 PAGE 28 OF 33
FOR LINE NUMBER 17

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

NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code U.S. Senate Restaurant First and C Streets, N.E. Washington, DC 20510-	Purpose of Disbursement Meals Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/17/200	Amount of Each Disbursement This Period \$296.84
B. Full Name, Mailing Address and Zip Code U.S. Senate Restaurant First and C Streets, N.E. Washington, DC 20510-	Purpose of Disbursement Meeting Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/27/200	Amount of Each Disbursement This Period \$1219.06
C. Full Name, Mailing Address and Zip Code U.S. Senate Restaurant First and C Streets, N.E. Washington, DC 20510-	Purpose of Disbursement Event Expense-Meals Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/18/200	Amount of Each Disbursement This Period \$4.23
D. Full Name, Mailing Address and Zip Code U.S. Senate Restaurant First and C Streets, N.E. Washington, DC 20510-	Purpose of Disbursement Meeting Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/03/200	Amount of Each Disbursement This Period \$54.15
E. Full Name, Mailing Address and Zip Code U.S. Senate Restaurant First and C Streets, N.E. Washington, DC 20510-	Purpose of Disbursement Event Expense-Meals Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/17/200	Amount of Each Disbursement This Period \$346.14
F. Full Name, Mailing Address and Zip Code U.S. Senate Restaurant First and C Streets, N.E. Washington, DC 20510-	Purpose of Disbursement Meeting Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/06/200	Amount of Each Disbursement This Period \$30.15
G. Full Name, Mailing Address and Zip Code USA Direct 2901 Blackbridge Road York, PA 17402-	Purpose of Disbursement Direct Mail Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/08/200	Amount of Each Disbursement This Period \$25239.08

SUBTOTAL of Disbursements This Page (optional)

\$27189.65

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 29 OF 33
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code United Parcel Service P.O. Box 505820 Las Vegas, NV 88905-	Purpose of Disbursement Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/29/200	Amount of Each Disbursement This Period \$49.07
B. Full Name, Mailing Address and Zip Code United Parcel Service P.O. Box 505820 Las Vegas, NV 88905-	Purpose of Disbursement Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/01/200	Amount of Each Disbursement This Period \$38.50
C. Full Name, Mailing Address and Zip Code United Parcel Service P.O. Box 505820 Las Vegas, NV 88905-	Purpose of Disbursement Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/17/200	Amount of Each Disbursement This Period \$63.00
D. Full Name, Mailing Address and Zip Code United Parcel Service P.O. Box 505820 Las Vegas, NV 88905-	Purpose of Disbursement Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/15/200	Amount of Each Disbursement This Period \$39.75
E. Full Name, Mailing Address and Zip Code United Parcel Service P.O. Box 505820 Las Vegas, NV 88905-	Purpose of Disbursement Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/25/200	Amount of Each Disbursement This Period \$80.00
F. Full Name, Mailing Address and Zip Code United Parcel Service P.O. Box 505820 Las Vegas, NV 88905-	Purpose of Disbursement Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/15/200	Amount of Each Disbursement This Period \$57.50
G. Full Name, Mailing Address and Zip Code United Parcel Service P.O. Box 505820 Las Vegas, NV 88905-	Purpose of Disbursement Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/06/200	Amount of Each Disbursement This Period \$71.20

SUBTOTAL of Disbursements This Page (optional)

\$399.02

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 30 OF 33
FOR LINE NUMBER
17

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code United Parcel Service P.O. Box 505620 Las Vegas, NV 88905-	Purpose of Disbursement Delivery Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/22/200	Amount of Each Disbursement This Period \$31.69
B. Full Name, Mailing Address and Zip Code Visa P.O. Box 114 Jackson, MS 39205-0114	Purpose of Disbursement Expenses (see memo entries) Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/18/200	Amount of Each Disbursement This Period \$424.45
C. Full Name, Mailing Address and Zip Code Visa P.O. Box 114 Jackson, MS 39205-0114	Purpose of Disbursement Expense (see memo entries) Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/25/200	Amount of Each Disbursement This Period \$39.89
D. Full Name, Mailing Address and Zip Code Visa P.O. Box 114 Jackson, MS 39205-0114	Purpose of Disbursement Travel Expense (see memo entries) Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/15/200	Amount of Each Disbursement This Period \$1479.97
E. Full Name, Mailing Address and Zip Code Warfield & Walsh 701 Prince Street Alexandria, VA 22314-	Purpose of Disbursement Direct Mail Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/01/200	Amount of Each Disbursement This Period \$11416.36
F. Full Name, Mailing Address and Zip Code Warfield & Walsh 701 Prince Street Alexandria, VA 22314-	Purpose of Disbursement Direct Mail Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/15/200	Amount of Each Disbursement This Period \$12678.47
G. Full Name, Mailing Address and Zip Code Warfield & Walsh 701 Prince Street Alexandria, VA 22314-	Purpose of Disbursement Direct Mail Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/27/200	Amount of Each Disbursement This Period \$4665.64

SUBTOTAL of Disbursements This Page (optional)

\$30736.47

TOTAL This Period (last page this line number only)

Trent Lott for Mississippi

July 15, 2000 Quarterly Report

Ultimate Vendors for payment to
Visa on 5/18/00

Schedule B, Page 30 of 33 for line number 17
Block B

Vendor	Amount	Purpose
Delta Airlines Atlanta, GA	\$218.00	Travel Expense

No other vendors requiring itemization.

Trent Lott for Mississippi

July 15, 2000 Quarterly Report

Ultimate Vendors for payment to
Visa on 4/25/00

Schedule B, Page 30 of 33 for line number 17
Block C

Vendor	Amount	Purpose
U.S. Senate Photo Studio	19.00	Photography

No other vendors requiring itemization.

Trent Lott for Mississippi

July 15, 2000 Quarterly Report

Ultimate Vendors for payment to
Visa on 6/15/00

Schedule B, Page 30 of 33 for line number 17
Block D

Vendor	Amount	Purpose
Beau Rivage Biloxi, MS	\$248.40	Lodging Expense
Delta Airlines Washington, DC	\$561.00	Travel Expense
Ramada Inns Natchez, MS	\$203.98	Lodging and Meals Expense
The Briers Inn Natchez, MS	\$434.50	Lodging Expense

No other vendors requiring itemization.

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule for
for each category of the
Detailed Summary PagePAGE 31 OF 33
FOR LINE NUMBER
17

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Warfield & Walsh 701 Prince Street Alexandria, VA 22314-	Purpose of Disbursement Direct Mail Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/13/200	Amount of Each Disbursement This Period \$8963.40
B. Full Name, Mailing Address and Zip Code Clovis Williams P.O. Box 22824 Jackson, MS 39225-	Purpose of Disbursement Travel Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/06/200	Amount of Each Disbursement This Period \$485.12
C. Full Name, Mailing Address and Zip Code Clovis Williams P.O. Box 22824 Jackson, MS 39225-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/28/200	Amount of Each Disbursement This Period \$1802.23
D. Full Name, Mailing Address and Zip Code Clovis Williams P.O. Box 22824 Jackson, MS 39225-	Purpose of Disbursement Meeting Expense / Travel expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/04/200	Amount of Each Disbursement This Period \$337.47
E. Full Name, Mailing Address and Zip Code Clovis Williams P.O. Box 22824 Jackson, MS 39225-	Purpose of Disbursement Meeting Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/08/200	Amount of Each Disbursement This Period \$1416.72
F. Full Name, Mailing Address and Zip Code Clovis Williams P.O. Box 22824 Jackson, MS 39225-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/15/200	Amount of Each Disbursement This Period \$1802.23
G. Full Name, Mailing Address and Zip Code Clovis Williams P.O. Box 22824 Jackson, MS 39225-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/30/200	Amount of Each Disbursement This Period \$1802.23

SUBTOTAL of Disbursements This Page (optional)

\$16609.40

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE **32** OF **33**
FOR LINE NUMBER
17

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Clovis Williams P.O. Box 22824 Jackson, MS 39225-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/14/200	Amount of Each Disbursement This Period \$1802.23
B. Full Name, Mailing Address and Zip Code Clovis Williams P.O. Box 22824 Jackson, MS 39225-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/31/200	Amount of Each Disbursement This Period \$1802.23
C. Full Name, Mailing Address and Zip Code Clovis Williams P.O. Box 22824 Jackson, MS 39225-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/15/200	Amount of Each Disbursement This Period \$1802.23
D. Full Name, Mailing Address and Zip Code Karen Yeager 1301 Pennsylvania Ave., N.W. Suite 500 Washington, DC 20004-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/15/200	Amount of Each Disbursement This Period \$1150.93
E. Full Name, Mailing Address and Zip Code Karen Yeager 1301 Pennsylvania Ave., N.W. Suite 500 Washington, DC 20004-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/15/200	Amount of Each Disbursement This Period \$1150.93
F. Full Name, Mailing Address and Zip Code Karen Yeager 1301 Pennsylvania Ave., N.W. Suite 500 Washington, DC 20004-	Purpose of Disbursement Internet Expense Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/10/200	Amount of Each Disbursement This Period \$39.00
G. Full Name, Mailing Address and Zip Code Karen Yeager 1301 Pennsylvania Ave., N.W. Suite 500 Washington, DC 20004-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/14/200	Amount of Each Disbursement This Period \$1150.93

SUBTOTAL of Disbursements This Page [optional]

\$8898.48

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Summary Page

 PAGE 33 OF 33
 FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Karen Yeager 1301 Pennsylvania Ave., N.W. Suite 500 Washington, DC 20004-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/28/200	Amount of Each Disbursement This Period \$1150.93
B. Full Name, Mailing Address and Zip Code Karen Yeager 1301 Pennsylvania Ave., N.W. Suite 500 Washington, DC 20004-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/30/200	Amount of Each Disbursement This Period \$1150.93
C. Full Name, Mailing Address and Zip Code Karen Yeager 1301 Pennsylvania Ave., N.W. Suite 500 Washington, DC 20004-	Purpose of Disbursement Payroll Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 05/31/200	Amount of Each Disbursement This Period \$1150.93
D. Full Name, Mailing Address and Zip Code 	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) / /	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and Zip Code 	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) / /	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and Zip Code 	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) / /	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and Zip Code 	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) / /	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

\$3452.79

TOTAL This Period (last page this line number only)

327,001.88

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 20a

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Mary Jenkins 603 North 5th St Cambridge, OH 43725-1327	Purpose of Disbursement Contribution Refund Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 05/25/200	Amount of Each Disbursement This Period \$690.00
B. Full Name, Mailing Address and Zip Code 	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) / /	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and Zip Code 	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) / /	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and Zip Code 	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) / /	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and Zip Code 	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) / /	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and Zip Code 	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) / /	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and Zip Code 	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) / /	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

\$690.00

TOTAL This Period (last page this line number only)

\$690.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 20c

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NAME OF COMMITTEE (In Full)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code International Paper PAC 1101 Pennsylvania Ave NW Suite 200 Washington, DC 20004-	Purpose of Disbursement contribution refund Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 04/13/200	Amount of Each Disbursement This Period \$1000.00
B. Full Name, Mailing Address and Zip Code 	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) / /	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and Zip Code 	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) / /	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and Zip Code 	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) / /	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and Zip Code 	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) / /	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and Zip Code 	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) / /	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and Zip Code 	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) / /	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

\$1000.00

TOTAL This Period (last page this line number only)

\$1000.00

SCHEDULE B
ITEMIZED DISBURSEMENTS

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

 PAGE **1** OF
FOR LINE NUMBER
21

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NAME OF COMMITTEE (In Full)

Trent Lott for Mississippi

A. Full Name, Mailing Address and ZIP Code Cardinal Hill Foundation 2050 Versailles Road Lexington, KY 40504	Purpose of Disbursement contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/4/00	Amount of Each Disbursement This Period 1,000.00
B. Full Name, Mailing Address and ZIP Code Cystic Fibrosis Foundation-Mississippi 4800 McWillie Circle, Suite B-6 Jackson, MS 39206	Purpose of Disbursement contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 4/6/00	Amount of Each Disbursement This Period 500.00
C. Full Name, Mailing Address and ZIP Code Mississippi Republican Party P.O. Box 60 Jackson, MS 39205	Purpose of Disbursement contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/17/00	Amount of Each Disbursement This Period 500.00
D. Full Name, Mailing Address and ZIP Code Metro Jackson Chamber of Commerce P.O. Box 22548 Jackson, MS 39225	Purpose of Disbursement contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/8/00	Amount of Each Disbursement This Period 1,000.00
E. Full Name, Mailing Address and ZIP Code Mount Vernon Ladies Association Mount Vernon, VA 22121	Purpose of Disbursement contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/4/00	Amount of Each Disbursement This Period 250.00
F. Full Name, Mailing Address and ZIP Code TeenAge Republicans of Mississippi 321 Avalon Way Brandon, MS 39047	Purpose of Disbursement contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/8/00	Amount of Each Disbursement This Period 500.00
G. Full Name, Mailing Address and ZIP Code University of Mississippi Foundation P.O. Box 249 University, MS 38677	Purpose of Disbursement contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 6/22/00	Amount of Each Disbursement This Period 2,000.00
H. Full Name, Mailing Address and ZIP Code University of Mississippi Gospel Choir Office of the Dean of Students 406 Student Union Building University, MS 38677	Purpose of Disbursement contribution Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 4/6/00	Amount of Each Disbursement This Period 500.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

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

6,250.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 2
FOR LINE NUMBER 21

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)

Trent Lott For Mississippi

A. Full Name, Mailing Address and Zip Code Advance America Cash Advance Center Inc 961 East Main Street Spartanburg, SC 29302-	Purpose of Disbursement Travel Expense for Sen. Rod Grams (Airfare) (see memo entry below) Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 04/12/200	Amount of Each Disbursement This Period \$783.50
B. Full Name, Mailing Address and Zip Code Fred Johnson for State Representative 230 Wallace Drive Morton, MS 39117	Purpose of Disbursement 2000 Special Election Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 05/10/200	Amount of Each Disbursement This Period \$500.00
C. Full Name, Mailing Address and Zip Code National Republican Senatorial Committee 425 Second Street, NE Washington, DC 20002-	Purpose of Disbursement Transfer of Surplus Funds Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 06/20/200	Amount of Each Disbursement This Period \$100000.00
D. Full Name, Mailing Address and Zip Code Slade Gorton for Senate 425 Second Street, NE Washington, DC 20002-	Purpose of Disbursement Contribution US Senate-WA Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	Date (month, day, year) 06/01/200	Amount of Each Disbursement This Period \$1000.00
E. Full Name, Mailing Address and Zip Code Slade Gorton for Senate 425 Second Street, NE Washington, DC 20002-	Purpose of Disbursement Contribution US Senate - WA Disbursement for: ☒ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 06/01/200	Amount of Each Disbursement This Period \$1000.00

***memo-entry:**

Rod Grams for Senate
 507 Capitol Court NE, #100
 Washington, DC 20002

travel expense - airfare 4/12/00 783.50
 US Senate-MN (memo-entry)
 (Primary)

SUBTOTAL of Disbursements This Page (optional)	\$103283.50
TOTAL This Period (last page this line number only)	109,533.50

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

☐ HAND DELIVERED	_____	Date of Receipt
☐ FAX (48-HOUR NOTICES)	_____	Date of Receipt
☐ INSIDE MAIL	_____	Date of Receipt
☐ RECEIVED FROM THE LEGISLATIVE RESOURCE CENTER	_____	Date of Receipt
☐ RECEIVED FROM THE FEDERAL ELECTION COMMISSION	_____	Date of Receipt
☐ FIRST CLASS MAIL	_____	Postmarked
☒ REGISTERED/CERTIFIED MAIL	7/15/00	Postmarked
☐ NO POSTMARK	☐ POSTMARK ILLEGIBLE	
☐ OTHER (Specify): _____		
☐ AIRBORNE EXPRESS		
☐ EXPRESS MAIL		
☐ FEDERAL EXPRESS		
☐ UPS		
Postmark and/or Date of Receipt		
R.D.	7/18/00	
Preparer	Date prepared	