

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5
KELLY FOR CONGRESS

ADDRESS (number and street) 5221-A CLIFF GOOKIN BLVD
TUPLELO MS 38801
CITY STATE ZIP CODE

2. FEC IDENTIFICATION NUMBER C C00573980
3. IS THIS REPORT NEW (N) OR AMENDED (A) MS 01
STATE DISTRICT

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
[] April 15 Quarterly Report (Q1)
[] July 15 Quarterly Report (Q2)
[x] October 15 Quarterly Report (Q3)
[] January 31 Year-End Report (YE)
[] Termination Report (TER)
(b) 12-Day PRE-Election Report for the:
[] Primary (12P) [] General (12G) [] Runoff (12R)
[] Convention (12C) [] Special (12S)
(c) 30-Day POST-Election Report for the:
[] General (30G) [] Runoff (30R) [] Special (30S)

5. Covering Period 07 / 01 / 2020 through 09 / 30 / 2020

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
PAGE, FRED H, , ,
Type or Print Name of Treasurer
Signature of Treasurer PAGE, FRED H, , , [Electronically Filed] Date 10 / 15 / 2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
KELLY FOR CONGRESS

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

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	134287.00	770515.31
(b) Total Contribution Refunds (from Line 20(d))	1511.89	2511.89
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	132775.11	768003.42
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	77609.97	608165.19
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	77609.97	608165.19
8. Cash on Hand at Close of Reporting Period (from Line 27).....	199997.91	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

KELLY FOR CONGRESS

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

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	56750.00	327489.50
(ii) Unitemized.....	6052.00	35635.00
(iii) TOTAL of contributions from individuals ▶	62802.00	363124.50
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	71485.00	407390.81
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	134287.00	770515.31
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	5.01	17.54
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	134292.01	770532.85

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	77609.97	608165.19
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	5000.00	153981.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	1500.00	1500.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	11.89	1011.89
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	1511.89	2511.89
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	84121.86	764658.08

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	149827.76
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	134292.01
25. SUBTOTAL (add Line 23 and Line 24).....	284119.77
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	84121.86
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	199997.91

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

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

FOR LINE NUMBER: PAGE 5 OF 80
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ADAMS, BOYCE E, , ,

Mailing Address 2005 SEMINOLE ROAD

City COLUMBUS State MS Zip Code 39705

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

Name of Employer THEBIZ Occupation PRESIDENT

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 09 / 2020

Transaction ID : SA11AI.17489

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ALBEN N HOPKINS, PLLC

Mailing Address 2701 24TH AVENUE

City GULFPORT State MS Zip Code 39501

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 09 / 2020

Transaction ID : SA11AI.17460

Amount of Each Receipt this Period
 250.00

Memo Item

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

Mailing Address P O BOX 1510

City GULFPORT State MS Zip Code 39501

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

Name of Employer USA Occupation MAJOR GENERAL, RET

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 09 / 2020

Transaction ID : SA11AI.17460.0

Amount of Each Receipt this Period
 250.00

Memo Item

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

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

1250.00

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

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

FOR LINE NUMBER: PAGE 6 OF 80
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AUTREY, JERRY B, , ,
 Mailing Address 504 BROAD STREET
 City BATESVILLE State MS Zip Code 38606
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CITY OF BATESVILLE MS Occupation MAYOR
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2020
Transaction ID : SA11AI.17375
 Amount of Each Receipt this Period
 200.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
BARBOUR, HALEY, , ,
 Mailing Address 648 DOGWOOD DR
 City YAZOO CITY State MS Zip Code 39194
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BGR GROUP Occupation CONSULTANT
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 28 / 2020
Transaction ID : SA11AI.17305
 Amount of Each Receipt this Period
 1000.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
BARRETT, JOHN L, , ,
 Mailing Address 1510 SMALLWOOD DRIVE
 City OXFORD State MS Zip Code 38655
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FNB OXFORD Occupation DIRECTOR
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 09 / 2020
Transaction ID : SA11AI.17458
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1300.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 80
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BERTOLET, BARRY D, , ,

Mailing Address 988 CHARLESTON BOULEVARD

City TUPELO State MS Zip Code 38801

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

Name of Employer CARDIOLOGY ASSOCIATES Occupation PHYSICIAN

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
450.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 28 2020

Transaction ID : SA11AI.17297

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
BETHAY, JAMES H, , ,

Mailing Address POST OFFICE BOX 266

City BOONEVILLE State MS Zip Code 38829

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 28 2020

Transaction ID : SA11AI.17318

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 133 BISHOP DRIVE

City BALDWYN State MS Zip Code 38824

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 28 2020

Transaction ID : SA11AI.17290

Amount of Each Receipt this Period
200.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 80
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BOONE, HAROLD L, , ,
 Mailing Address 10100 PONTOTOC HIGHWAY 6 EAST
 City TUPELO State MS Zip Code 38801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 850.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 28 2020
Transaction ID : SA11AI.17327
 Amount of Each Receipt this Period
 150.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
BOONE, HAROLD L, , ,
 Mailing Address 10100 PONTOTOC HIGHWAY 6 EAST
 City TUPELO State MS Zip Code 38801
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 950.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 09 2020
Transaction ID : SA11AI.17437
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
BOUCHILLON, BARRY, , ,
 Mailing Address POST OFFICE BOX 284
 City SOUTHAVEN State MS Zip Code 38671
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF EMPLOYED Occupation INSURANCE
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 28 2020
Transaction ID : SA11AI.17317
 Amount of Each Receipt this Period
 250.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 OF 80	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BRIDGFORTH, BARRY W, , ,

Mailing Address 3606 BRIDGFORTH ROAD

City OLIVE BRANCH	State MS	Zip Code 38654
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FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED	Occupation REAL ESTATE
-----------------------------------	---------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
450.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 28 / 2020

Transaction ID : SA11AI.17335

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 121 HILLSIDE COVE

City MENDENHALL	State MS	Zip Code 39114
--------------------	-------------	-------------------

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

Name of Employer AMS SERVICES	Occupation MEMBER
----------------------------------	----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 28 / 2020

Transaction ID : SA11AI.17285

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
BRYAN, MARCIA L, , ,

Mailing Address ONE MAGNOLIA DRIVE

City WEST POINT	State MS	Zip Code 39773
--------------------	-------------	-------------------

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 18 / 2020

Transaction ID : SA11AI.17404

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	2250.00
TOTAL This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 10 OF 80
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CANADA, ROBERT F, , ,

Mailing Address 35 PARKWAY STREET

City HERNANO State MS Zip Code 38632

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

Name of Employer SELF EMPLOYED Occupation PHARMACIST

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 09 / 2020

Transaction ID : SA11AI.17453

Amount of Each Receipt this Period
 200.00

Memo Item

B. Full Name (Last, First, Middle Initial)
CANNON, MICHAEL JOE, , ,

Mailing Address 1305 ROBERT E LEE EXT

City GREENWOOD State MS Zip Code 38930

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

Name of Employer SELF EMPLOYED Occupation AUTO DEALER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 16 / 2020

Transaction ID : SA11AI.17372

Amount of Each Receipt this Period
 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CANUP, B J, , ,

Mailing Address 102 FRANCIS DRIVE

City FULTON State MS Zip Code 38843

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

Name of Employer TERMONT Occupation WHOLESALER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 09 / 2020

Transaction ID : SA11AI.17485

Amount of Each Receipt this Period
 1500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ **2700.00**

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

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

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

FOR LINE NUMBER: PAGE 11 OF 80
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CHANEY, SUSAN, , ,

Mailing Address 1730 HIGHWAY 25 NORTH

City AMORY	State MS	Zip Code 38871
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FEC ID number of contributing federal political committee. **C**

Name of Employer AMORY VOCATION CENTER	Occupation STUDENT SERVICES
---	--------------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 16 / 2020

Transaction ID : SA11AI.17361

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 1730 HIGHWAY 25 NORTH

City AMORY	State MS	Zip Code 38871
---------------	-------------	-------------------

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

Name of Employer AMORY VOCATION CENTER	Occupation STUDENT SERVICES
---	--------------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
525.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 28 / 2020

Transaction ID : SA11AI.17279

Amount of Each Receipt this Period
25.00

Memo Item

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

Mailing Address 1730 HIGHWAY 25 NORTH

City AMORY	State MS	Zip Code 38871
---------------	-------------	-------------------

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

Name of Employer AMORY VOCATION CENTER	Occupation STUDENT SERVICES
---	--------------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 18 / 2020

Transaction ID : SA11AI.17425

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	75.00
TOTAL This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 12 OF 80
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CRANE, II, JOHNNY L, , ,

Mailing Address 499 CROWN DRIVE

City: FULTON State: MS Zip Code: 38843

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

Name of Employer: F L CRANE & SONS Occupation: CONTRACTOR

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt: 08 / 24 / 2020

Transaction ID : SA11AI.17216

Amount of Each Receipt this Period: 1000.00

Memo Item
EARMARKED THROUGH WINRED

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

Mailing Address PO BOX 9891

City: ARLINGTON State: VA Zip Code: 22219

FEC ID number of contributing federal political committee: **C** C00694323

Name of Employer: Occupation:

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
49793.31

Date of Receipt: 08 / 24 / 2020

Transaction ID : SA11AI.17216.0

Amount of Each Receipt this Period: 1000.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED

C. Full Name (Last, First, Middle Initial)
DANTZLER PILKINTON AND PHILLIPS FARM

Mailing Address 251 SAGAMORE CIRCLE

City: COLUMBUS State: MS Zip Code: 39705

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

Name of Employer: Occupation:

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt: 09 / 09 / 2020

Transaction ID : SA11AI.17490

Amount of Each Receipt this Period: 500.00

Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 1500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 13 OF 80	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PILKINTON, CHARLES, BUCK, ,

Mailing Address P O BOX 881

City COLUMBUS	State MS	Zip Code 39703
------------------	-------------	-------------------

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

Name of Employer BETTER BRANDS DISTRIBUTING	Occupation PARTNER
--	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 09 / 2020

Transaction ID : SA11AI.17490.0

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 60 HESTER ROAD

City WALTHALL	State MS	Zip Code 39771
------------------	-------------	-------------------

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
225.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 09 / 2020

Transaction ID : SA11AI.17445

Amount of Each Receipt this Period
100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
DUNLAP, BETH ANN, , ,

Mailing Address POST OFFICE BOX 720

City BATESVILLE	State MS	Zip Code 38606
--------------------	-------------	-------------------

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 16 / 2020

Transaction ID : SA11AI.17362

Amount of Each Receipt this Period
2800.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	2900.00
TOTAL This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 14 OF 80
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GLACKIN, BRIAN J, ,

Mailing Address 1113 BEVERLY DRIVE

City ALEXANDRIA State VA Zip Code 22302

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

Name of Employer THE LIVINGSTON GROUP Occupation DEFENSE AND NATIONAL SECURITY PRAC

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2020

Transaction ID : SA11AI.17230

Amount of Each Receipt this Period
500.00

Memo Item
EARMARKED THROUGH WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
54893.31

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 23 / 2020

Transaction ID : SA11AI.17230.0

Amount of Each Receipt this Period
500.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED

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

Mailing Address 53 COUNTY ROAD 178

City IUKA State MS Zip Code 38852

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
425.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 28 / 2020

Transaction ID : SA11AI.17209

Amount of Each Receipt this Period
25.00

Memo Item
EARMARKED THROUGH WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶ 525.00

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

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

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

FOR LINE NUMBER: PAGE 15 OF 80
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
48443.31

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 28 2020

Transaction ID : SA11AI.17209.0

Amount of Each Receipt this Period
25.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED

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

Mailing Address 53 COUNTY ROAD 178

City IUKA State MS Zip Code 38852

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
475.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 18 2020

Transaction ID : SA11AI.17420

Amount of Each Receipt this Period
50.00

Memo Item

C. Full Name (Last, First, Middle Initial)
HANKINS, HAROLD W, , ,

Mailing Address 106 FOREST GATE ROAD

City RIPLEY State MS Zip Code 38663

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

Name of Employer Occupation
Hankins President

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 28 2020

Transaction ID : SA11AI.17306

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1050.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 16 OF 80	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HANKINS, II, JAMES, , ,

Mailing Address POST OFFICE BOX 517

City RIPLEY	State MS	Zip Code 38663
----------------	-------------	-------------------

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

Name of Employer HANKINS INC	Occupation LUMBERMAN
---------------------------------	-------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 27 / 2020

Transaction ID : SA11AI.17207

Amount of Each Receipt this Period
2800.00

Memo Item
EARMARKED THROUGH WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
48418.31

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 27 / 2020

Transaction ID : SA11AI.17207.0

Amount of Each Receipt this Period
2800.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED

C. Full Name (Last, First, Middle Initial)
HIPP, JR, VAN D, , ,

Mailing Address 809 N QUAKER LANE

City ALEXANDRIA	State VA	Zip Code 22302
--------------------	-------------	-------------------

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

Name of Employer ADI	Occupation Chairman
-------------------------	------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
750.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 09 / 2020

Transaction ID : SA11AI.17476

Amount of Each Receipt this Period
500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	3300.00
TOTAL This Period (last page this line number only)..... ▶	

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

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

FOR LINE NUMBER: PAGE 17 OF 80
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HODGES, ROY F, ,

Mailing Address POST OFFICE BOX 663

City DUMAS State MS Zip Code 38625

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 28 2020

Transaction ID : SA11AI.17308

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
HOSCH, BURTON, B, , JR

Mailing Address 707 CLIFT RD

City TUPELO State MS Zip Code 38804

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

Name of Employer RENASANT BANK Occupation BANKER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 09 2020

Transaction ID : SA11AI.17464

Amount of Each Receipt this Period
200.00

Memo Item

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

Mailing Address 124 DEER CIRCLE

City HOUSTON State MS Zip Code 38851

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 18 2020

Transaction ID : SA11AI.17419

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00

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

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

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

FOR LINE NUMBER: PAGE 18 OF 80
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LAMPTON, ROBERT, HOWARD, ,
 Mailing Address P O BOX 2401
 City JACKSON State MS Zip Code 39225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ERGON Occupation PRES OF SUPPLY
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 5500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 28 / 2020
Transaction ID : SA11AI.17275
 Amount of Each Receipt this Period
 2800.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
LAMPTON, WILLIAM, WALTER, ,
 Mailing Address P O BOX 2401
 City JACKSON State MS Zip Code 39225
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ERGON Occupation PRES OF ASPHALT
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 5500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 28 / 2020
Transaction ID : SA11AI.17274
 Amount of Each Receipt this Period
 2800.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
LANGE, JOHN ALAN, , ,
 Mailing Address 222 RIDGE DRIVE
 City JACKSON State MS Zip Code 39216
 FEC ID number of contributing federal political committee. **C**
 Name of Employer KINETIC STAFFING Occupation CEO
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 28 / 2020
Transaction ID : SA11AI.17287
 Amount of Each Receipt this Period
 500.00
 Memo Item

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

6100.00

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

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

FOR LINE NUMBER: PAGE 19 OF 80
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LILES, LOIS A, , ,

Mailing Address 151 MEGS LANE

City State Zip Code
SALTILLO MS 38866

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
275.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 28 2020

Transaction ID : SA11AI.17333

Amount of Each Receipt this Period
50.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MCRIGHT, JOHNNY P, , ,

Mailing Address 2481 STONEBRIDGE

City State Zip Code
GREENVILLE MS 38701

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

Name of Employer Occupation
MCRIGHT SERVICES, LLC MEMBER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 28 2020

Transaction ID : SA11AI.17294

Amount of Each Receipt this Period
2800.00

Memo Item

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

Mailing Address 1061 LAKESHIRE DR

City State Zip Code
TUPELO MS 38804

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

Name of Employer Occupation
INDEPENDENT FURNITURE SUPPLY SALES

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 22 2020

Transaction ID : SA11AI.17401

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3100.00

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

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

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

FOR LINE NUMBER: PAGE 20 OF 80
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MORRIS, SUSAN, , ,

Mailing Address 600 PINECREST COVE

City NEW ALBANY State MS Zip Code 38652

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 28 2020

Transaction ID : SA11AI.17309

Amount of Each Receipt this Period
250.00

Memo Item

B. Full Name (Last, First, Middle Initial)
NABERS, MCELLIS L, , ,

Mailing Address 203 OAK HAVEN CIRCLE

City BOONEVILLE State MS Zip Code 38829

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 28 2020

Transaction ID : SA11AI.17339

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 181 OLD PAYNE PL

City SALTILLO State MS Zip Code 38866

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

Name of Employer CIRCADENCE Occupation VP - FEDERAL SYSTEMS

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
750.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 07 2020

Transaction ID : SA11AI.17226

Amount of Each Receipt this Period
500.00

Memo Item
EARMARKED THROUGH WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶ 850.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 OF 80	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer	Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
54093.31

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 07 / 2020

Transaction ID : SA11AI.17226.0

Amount of Each Receipt this Period
500.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED

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

Mailing Address 11 WILLOWEND DRIVE

City HOUSTON	State TX	Zip Code 77024
-----------------	-------------	-------------------

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

Name of Employer OASIS	Occupation EXECUTIVE
---------------------------	-------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 13 / 2020

Transaction ID : SA11AI.17227

Amount of Each Receipt this Period
250.00

Memo Item
EARMARKED THROUGH WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer	Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
54343.31

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 13 / 2020

Transaction ID : SA11AI.17227.0

Amount of Each Receipt this Period
250.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED

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

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

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

FOR LINE NUMBER: PAGE 22 OF 80
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
POLICICCHIO, BRUNO, , ,
 Mailing Address 3137 NORTH HILL DRIVE
 City TUPELO State MS Zip Code 38804
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MAX HOUSE, LLC Occupation COO
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 16 / 2020
Transaction ID : SA11AI.17356
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
PREWETT SERVICES LLC
 Mailing Address POST OFFICE BOC 386
 City SOUTHAVEN State MS Zip Code 38671
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 2800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 28 / 2020
Transaction ID : SA11AI.17276
 Amount of Each Receipt this Period
 2800.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
PREWETT, BRUCE, , ,
 Mailing Address 6230 STATELINE RD
 City WALLS State MS Zip Code 38680
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 PREWETT HOLDINGS, LLC MEMBER
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 2800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 28 / 2020
Transaction ID : SA11AI.17276.0
 Amount of Each Receipt this Period
 2800.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3050.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 23 OF 80
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ROTOLO, DAVID W, , ,

Mailing Address 102 CHERRY LAUREL COURT

City: RIDGELAND State: MS Zip Code: 39157

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

Name of Employer: BRIAR HILL MANAGEMENT Occupation: ONWER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 28 / 2020

Transaction ID : SA11AI.17280

Amount of Each Receipt this Period
2500.00

Memo Item

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

Mailing Address 102 CHERRY LAUREL COURT

City: RIDGELAND State: MS Zip Code: 39157

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

Name of Employer: HOMEMAKER Occupation: HOMEMAKER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 28 / 2020

Transaction ID : SA11AI.17282

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ROTOLO, STACY H, , ,

Mailing Address 17441 W MUIRFIELD DRIVE

City: BATON ROUGE State: LA Zip Code: 70810

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

Name of Employer: HOMEMAKER Occupation: HOMEMAKER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 18 / 2020

Transaction ID : SA11AI.17421

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

6000.00

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

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

FOR LINE NUMBER: PAGE 24 OF 80
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RYAN, CURTIS, , ,
Mailing Address 157 DR 405

City: SALTILLO State: MS Zip Code: 38866

FEC ID number of contributing federal political committee: C

Name of Employer: RYAN WHOLESALE VINYL Occupation: OWNER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 600.00

Date of Receipt: 09 / 18 / 2020
Transaction ID : SA11AI.17424

Amount of Each Receipt this Period: 300.00

Memo Item

B. Full Name (Last, First, Middle Initial)
SCHILLING, JR, DAVID C, , ,
Mailing Address 40104 PICKLE ROAD

City: HAMILTON State: MS Zip Code: 39746

FEC ID number of contributing federal political committee: C

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 300.00

Date of Receipt: 08 / 28 / 2020
Transaction ID : SA11AI.17334

Amount of Each Receipt this Period: 100.00

Memo Item

C. Full Name (Last, First, Middle Initial)
SHIELDS, JOHN, , ,
Mailing Address 747 MEDICAL CENTER CIRCLE

City: WEST POINT State: MS Zip Code: 39773

FEC ID number of contributing federal political committee: C

Name of Employer: THE WOMENS GROUP Occupation: PHYSICIAN

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date: 300.00

Date of Receipt: 07 / 16 / 2020
Transaction ID : SA11AI.17357

Amount of Each Receipt this Period: 100.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 500.00

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

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

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

FOR LINE NUMBER: PAGE 25 OF 80
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SIMMONS, JR, HARRY, , ,
Mailing Address 2628 ERICKSON ROAD

City YAZOO CITY State MS Zip Code 39194

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

Name of Employer SELF EMPLOYED Occupation FARMER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 09 / 2020

Transaction ID : SA11AI.17444

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
SIMMONS, STACY, , ,
Mailing Address 2114 COLUMBINE

City TUPELO State MS Zip Code 38801

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

Name of Employer MIDSOUTH AUTO Occupation OWNER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 18 / 2020

Transaction ID : SA11AI.17423

Amount of Each Receipt this Period
1500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
SIMS, JOE, , ,
Mailing Address 3540 HAWTHORN DRIVE

City JACKSON State MS Zip Code 39216

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

Name of Employer CORNERSTONE GOVERNMENT RELATIO Occupation GOVERNMENT RELATIONS

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
750.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2020

Transaction ID : SA11AI.17235

Amount of Each Receipt this Period
250.00

Memo Item
EARMARKED THROUGH WINRED

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

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

2250.00

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

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

FOR LINE NUMBER: PAGE 26 OF 80
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
56266.42

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 30 2020

Transaction ID : SA11AI.17235.0

Amount of Each Receipt this Period
250.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED

B. Full Name (Last, First, Middle Initial)
SONGY, JOSEPH D, , ,

Mailing Address 107 COVINGTON WAY

City MADISON State MS Zip Code 39110

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

Name of Employer Occupation
BRYANT SONGY SNELL LLC PARTNER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 28 2020

Transaction ID : SA11AI.17288

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
SOUTHEASTERN TIMBER PRODUCTS, LLC

Mailing Address POST OFFICE BOX 5327

City JACKSON State MS Zip Code 39296

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

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 09 2020

Transaction ID : SA11AI.17487

Amount of Each Receipt this Period
2800.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 3300.00

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

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

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

FOR LINE NUMBER: PAGE 27 OF 80
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
VANDEVENDER, WILLIAM J, , ,
 Mailing Address 1300 MEADOWBROOK ROAD, STE 202
 City JACKSON State MS Zip Code 39211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CLAW FORESTRY Occupation CFO
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 2800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 09 / 2020
Transaction ID : SA11AI.17487.0
 Amount of Each Receipt this Period
 2800.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
STANFORD, LARRY, J, ,
 Mailing Address 1224 N FILLMORE ST
 City CORINTH State MS Zip Code 38834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LAKE HILL MOTORS INC Occupation FINANCE MANAGER
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 09 / 2020
Transaction ID : SA11AI.17481
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
SUNDBECK, JR, MILTON, , ,
 Mailing Address 37 TOWN CREEK ROAD
 City WEST POINT State MS Zip Code 39773
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SOUTHERN IONICS INC Occupation OWNER AND PRESIDENT
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2020
Transaction ID : SA11AI.17391
 Amount of Each Receipt this Period
 500.00
 Memo Item

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

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)		PAGE 28 OF 80	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SWANEY, WALKER, , ,

Mailing Address 634 N LAMAR BOULEVARD

City OXFORD	State MS	Zip Code 38655
----------------	-------------	-------------------

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

Name of Employer SELF EMPLOYED	Occupation DENTIST
-----------------------------------	-----------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 09 / 2020

Transaction ID : SA11AI.17434

Amount of Each Receipt this Period
100.00

Memo Item

B. Full Name (Last, First, Middle Initial)
TAYLOR, CHARLES, R, ,

Mailing Address 4507 SHILOH RD

City CORINTH	State MS	Zip Code 38834
-----------------	-------------	-------------------

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

Name of Employer COCA COLA BOTTLING	Occupation SALES EXECUTIVE
--	-------------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 09 / 2020

Transaction ID : SA11AI.17482

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
THE SMITH COMPANY

Mailing Address POST OFFICE BOX 849

City HOLLY SPRINGS	State MS	Zip Code 38635
-----------------------	-------------	-------------------

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 09 / 2020

Transaction ID : SA11AI.17467

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	600.00
TOTAL This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 29 OF 80	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SMITH, KENT, , ,

Mailing Address POST OFFICE BOX 849

City HOLLY SPRINGS	State MS	Zip Code 38635
-----------------------	-------------	-------------------

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

Name of Employer SMITH WHALEY PLLC	Occupation ATTORNEY
---------------------------------------	------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 09 / 2020

Transaction ID : SA11AI.17467.0

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 1600 E 8TH AVENUE STE A208

City TAMPA	State FL	Zip Code 33605
---------------	-------------	-------------------

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 04 / 2020

Transaction ID : SA11AI.17078

Amount of Each Receipt this Period
2800.00

Memo Item

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

Mailing Address 1600 E 8TH AVENUE STE A208

City TAMPA	State FL	Zip Code 33605
---------------	-------------	-------------------

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

Name of Employer ASHLEY INDUSTRIES	Occupation CHAIRMAN
---------------------------------------	------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 04 / 2020

Transaction ID : SA11AI.17075

Amount of Each Receipt this Period
2800.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	5600.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 30 OF 80
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WAX, RICHARD, , ,

Mailing Address P O BOX 60

City AMORY State MS Zip Code 38821

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

Name of Employer WAX SEED CO Occupation PRES/CEO

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 24 / 2020

Transaction ID : SA11AI.17218

Amount of Each Receipt this Period
2800.00

Memo Item
EARMARKED THROUGH WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
52693.31

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 24 / 2020

Transaction ID : SA11AI.17218.0

Amount of Each Receipt this Period
2800.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED

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

Mailing Address 818 CHARLOTTE AVENUE

City COLUMBIA State IL Zip Code 62236

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

Name of Employer DOMESTIC ENGINEER Occupation DOMESTIC ENGINEER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2020

Transaction ID : SA11AI.17221

Amount of Each Receipt this Period
500.00

Memo Item
EARMARKED THROUGH WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶ 3300.00

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

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

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

FOR LINE NUMBER: PAGE 31 OF 80
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
53393.31

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 31 2020

Transaction ID : SA11AI.17221.0

Amount of Each Receipt this Period
500.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC
LIMIT NOT AFFECTED

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

Mailing Address 104 FERN RIDGE ROAD

City TUPELO State MS Zip Code 38804

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 30 2020

Transaction ID : SA11AI.17374

Amount of Each Receipt this Period
250.00

Memo Item

C. Full Name (Last, First, Middle Initial)
WILLIAMS, DAVID J, , ,

Mailing Address 620 NORTH LAMAR BOULEVARD

City OXFORD State MS Zip Code 38655

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

Name of Employer Occupation
SELF EMPLOYED PHYSICIAN

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 09 2020

Transaction ID : SA11AI.17456

Amount of Each Receipt this Period
100.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 350.00

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

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

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

FOR LINE NUMBER: PAGE 32 OF 80
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WILLIAMS, H L, SANDY, , JR
 Mailing Address P O BOX 239
 City CORINTH State MS Zip Code 38835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CORINTH COCA COLA Occupation CHAIRMAN
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 09 / 2020
Transaction ID : SA11AI.17478
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Full Name (Last, First, Middle Initial)
WILLIAMS, KEN, , ,
 Mailing Address 132 AFTON DRIVE
 City CORINTH State MS Zip Code 38834
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BANCORP SOUTH Occupation MORTGAGE ORIGINATOR
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 09 / 2020
Transaction ID : SA11AI.17480
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. Full Name (Last, First, Middle Initial)
WILLIAMS, KENNETH, W, ,
 Mailing Address P O BOX 239
 City CORINTH State MS Zip Code 38835
 FEC ID number of contributing federal political committee. **C**
 Name of Employer COCO COLA OF CORINTH Occupation PRESIDENT
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Election Cycle-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 09 / 2020
Transaction ID : SA11AI.17477
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1250.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 33 OF 80
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WILLIAMS, T MARTIN, , ,

Mailing Address 13 NORTHWOOD AVENUE

City JACKSON State MS Zip Code 38834

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

Name of Employer COCA COLA BOTTLING WORKS INC Occupation GOVERNMENTAL COMMUNITY RELATIONS

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 09 / 2020

Transaction ID : SA11AI.17483

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 6636 GILMER WILBURN ROAD

City COLUMBUS State MS Zip Code 39701

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

Name of Employer SELF EMPLOYED Occupation CATTLE FARMER

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 09 / 2020

Transaction ID : SA11AI.17457

Amount of Each Receipt this Period
100.00

Memo Item

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

Mailing Address 10 CEDAR POINT DRIVE

City SAVANNAH State GA Zip Code 31405

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 20 / 2020

Transaction ID : SA11AI.17229

Amount of Each Receipt this Period
50.00

Memo Item
EARMARKED THROUGH WINRED

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 34 OF 80	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
54393.31

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 20 / 2020

Transaction ID : SA11AI.17229.0

Amount of Each Receipt this Period
50.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED

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

Mailing Address 10 CEDAR POINT DRIVE

City SAVANNAH State GA Zip Code 31405

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 29 / 2020

Transaction ID : SA11AI.17232

Amount of Each Receipt this Period
100.00

Memo Item
EARMARKED THROUGH WINRED

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

Mailing Address PO BOX 9891

City ARLINGTON State VA Zip Code 22219

FEC ID number of contributing federal political committee. **C** C00694323

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
55043.31

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 29 / 2020

Transaction ID : SA11AI.17232.0

Amount of Each Receipt this Period
100.00

Memo Item
TOTAL EARMARKED THROUGH CONDUIT. PAC LIMIT NOT AFFECTED

SUBTOTAL of Receipts This Page (optional)..... ▶	100.00
TOTAL This Period (last page this line number only)..... ▶	56750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 80	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ABB INC. POLICY IMPROVEMENT FUND

Mailing Address 1455 PENNSYLVANIA AVE., NW
SUITE 670

City WASHINGTON	State DC	Zip Code 20004
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FEC ID number of contributing federal political committee. **C** C00602516

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3300.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 09 / 2020

Transaction ID : SA11C.17471

Amount of Each Receipt this Period
1800.00

Memo Item

B. Full Name (Last, First, Middle Initial)
AMERICAN BANKERS ASSOCIATION QUALIFIED MULTI-CANDIDATE COMMITTEE

Mailing Address 1120 CONNECTICUT AVE NW

City WASHINGTON	State DC	Zip Code 20036
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00004275

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2020

Transaction ID : SA11C.17383

Amount of Each Receipt this Period
5000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
AMERICAN CRYSTAL SUGAR COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 101 NORTH 3RD STREET

City MOORHEAD	State MN	Zip Code 56560
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00110338

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 06 / 2020

Transaction ID : SA11C.16100

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	6800.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 36 OF 80
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN CRYSTAL SUGAR COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 101 NORTH 3RD STREET

City: MOORHEAD State: MN Zip Code: 56560

FEC ID number of contributing federal political committee: **C** C00110338

Name of Employer: Occupation:

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 03 / 06 / 2020

Transaction ID : SA11C.17499

Amount of Each Receipt this Period: - 5000.00

Memo Item Redesignate:

B. Full Name (Last, First, Middle Initial)
AMERICAN CRYSTAL SUGAR COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 101 NORTH 3RD STREET

City: MOORHEAD State: MN Zip Code: 56560

FEC ID number of contributing federal political committee: **C** C00110338

Name of Employer: Occupation:

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 09 / 22 / 2020

Transaction ID : SA11C.17398

Amount of Each Receipt this Period: 5000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
AMERICAN CRYSTAL SUGAR COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 101 NORTH 3RD STREET

City: MOORHEAD State: MN Zip Code: 56560

FEC ID number of contributing federal political committee: **C** C00110338

Name of Employer: Occupation:

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt: 09 / 30 / 2020

Transaction ID : SA11C.17500

Amount of Each Receipt this Period: 5000.00

Memo Item Redesignate:

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 80
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN WOOD COUNCIL POLITICAL ACTION COMMITTEE (WOOD-PAC)

Mailing Address 222 CATOCTIN CIR SE
#201

City LEESBURG	State VA	Zip Code 20175
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00602698

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 16 / 2020

Transaction ID : SA11C.17368

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
AT&T INC FEDERAL PAC

Mailing Address 208 S AKARD ST
STE 2701

City DALLAS	State TX	Zip Code 75202
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00109017

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2020

Transaction ID : SA11C.17380

Amount of Each Receipt this Period
3000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
CME GROUP INC. PAC

Mailing Address 20 SOUTH WACKER DRIVE

City CHICAGO	State IL	Zip Code 60606
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00076299

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 24 / 2020

Transaction ID : SA11C.17074

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	5000.00
TOTAL This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 38 OF 80	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
COMMUNITY BANCSHARES OF MISSISSIPPI PAC

Mailing Address DRAWER 59

City FOREST	State MS	Zip Code 39074
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00228924

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 28 / 2020

Transaction ID : SA11C.17267

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
CULAC THE PAC OF CREDIT UNION NATIONAL ASSOCIATION

Mailing Address 601 PENNSYLVANIA AVE NW
SOUTH BLDG STE 600

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 16 / 2020

Transaction ID : SA11C.17370

Amount of Each Receipt this Period
5000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
ELECT - THE PAC OF THE ALABAMA FARMERS FEDERATION

Mailing Address P. O. BOX 11000

City MONTGOMERY	State AL	Zip Code 36191
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00094573

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 18 / 2020

Transaction ID : SA11C.17407

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	10000.00
TOTAL This Period (last page this line number only)..... ▶	

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 OF 80
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Mailing Address 2980 FAIRVIEW PARK DRIVE

City FALLS CHURCH State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C** C00088591

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
10000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 09 / 2020

Transaction ID : SA11C.17484

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
EMPLOYEES OF NORTHROP GRUMMAN CORPORATION PAC

Mailing Address 2980 FAIRVIEW PARK DRIVE

City FALLS CHURCH State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C** C00088591

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
12500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2020

Transaction ID : SA11C.17385

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
GARRET GRAVES FOR CONGRESS

Mailing Address PO BOX 64845

City BATON ROUGE State LA Zip Code 70896

FEC ID number of contributing federal political committee. **C** C00558486

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2020

Transaction ID : SA11C.17381

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional) ▶ 6000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 40 OF 80	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GENERAL DYNAMICS CORPORATION POLITICAL ACTION COMMITTEE (GDC PAC)

Mailing Address 2941 FAIRVIEW PARK DR.
SUITE 100

City FALLS CHURCH	State VA	Zip Code 22042
----------------------	-------------	-------------------

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

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
6500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 09 / 2020

Transaction ID : SA11C.17472

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
ICE MILLER PAC

Mailing Address ONE AMERICAN SQUARE
SUITE 2900

City INDIANAPOLIS	State IN	Zip Code 46282
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00520973

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2020

Transaction ID : SA11C.17384

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
KANSAS CITY SOUTHERN EMPLOYEE PAC

Mailing Address 427 W 12TH STREET

City KANSAS CITY	State MO	Zip Code 64105
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00139451

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 28 / 2020

Transaction ID : SA11C.17269

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	3000.00
TOTAL This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 41 OF 80	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LEGETT & PLATT INCORPORATED POLITICAL ACTION COMMITTEE

Mailing Address NO 1 LEGETT ROAD

City CARTHAGE	State MO	Zip Code 64836
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00229435

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 28 / 2020

Transaction ID : SA11C.17273

Amount of Each Receipt this Period
 _____ 2000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
LIVESTOCK MARKETING ASSOCIATION POLITICAL ACTION COMMITTEE (LMA-PAC)

Mailing Address 10510 NW AMBASSADOR DRIVE

City KANSAS CITY	State MO	Zip Code 64153
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00244400

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 22 / 2020

Transaction ID : SA11C.17397

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
LOCKHEED MARTIN CORPORATION EMPLOYEES' POLITICAL ACTION COMMITTEE

Mailing Address 2121 CRYSTAL DRIVE
SUITE 100

City ARLINGTON	State VA	Zip Code 22202
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00303024

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____ 6000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 16 / 2020

Transaction ID : SA11C.17371

Amount of Each Receipt this Period
 _____ 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	_____ 4000.00
TOTAL This Period (last page this line number only)..... ▶	_____

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 OF 80
(check only one)
 11a 11b 11c 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MAYNARD COOPER & GALE PC PAC

Mailing Address 1901 SIXTH AVENUE NORTH
2400 REGIONS/HARBERT PLAZA

City BIRMINGHAM State AL Zip Code 35203

FEC ID number of contributing federal political committee. **C** C00272724

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 28 2020

Transaction ID : SA11C.17270

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
MAYNARD COOPER & GALE PC PAC

Mailing Address 1901 SIXTH AVENUE NORTH
2400 REGIONS/HARBERT PLAZA

City BIRMINGHAM State AL Zip Code 35203

FEC ID number of contributing federal political committee. **C** C00272724

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 30 2020

Transaction ID : SA11C.17388

Amount of Each Receipt this Period
500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
MICHIGAN SUGAR COMPANY GROWERS POLITICAL ACTION COMMITTEE

Mailing Address 2600 SOUTH EUCLID AVENUE

City BAY CITY State MI Zip Code 48706

FEC ID number of contributing federal political committee. **C** C00384354

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 25 2020

Transaction ID : SA11C.17392

Amount of Each Receipt this Period
1500.00

Memo Item

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 43 OF 80	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NAMMO TALLEY INC EMPLOYEES SECURING THE FUTURE PAC

Mailing Address PO BOX 34299

City MESA	State AZ	Zip Code 85277
--------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00502625

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 09 / 2020

Transaction ID : SA11C.17475

Amount of Each Receipt this Period
500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
NATIONAL BEER WHOLESALERS ASSOCIATION PAC

Mailing Address 1101 KING ST
STE 600

City ALEXANDRIA	State VA	Zip Code 22314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00144766

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
7500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 22 / 2020

Transaction ID : SA11C.17399

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
NATIONAL CATTLEMEN'S BEEF ASSOCIATION POLITICAL ACTION COMMITTEE (NCBA-PAC)

Mailing Address 1275 PENNSYLVANIA AVENUE NW
SUITE 801

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00028787

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 25 / 2020

Transaction ID : SA11C.17395

Amount of Each Receipt this Period
2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	5500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 80	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NATIONAL CHICKEN COUNCIL POLITICAL ACTION COMMITTEE

Mailing Address 1015 FIFTEENTH STREET NW

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00034272

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____,_____,_____ 5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 / 16 / 2020

Transaction ID : SA11C.17367

Amount of Each Receipt this Period
 _____,_____,_____ 2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
PATRIOTS IN ACTION

Mailing Address 10 N. CADDO ST.
PMB #174

City CLEBURNE	State TX	Zip Code 76031
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00531590

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____,_____,_____ 2800.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2020

Transaction ID : SA11C.17386

Amount of Each Receipt this Period
 _____,_____,_____ 2800.00

Memo Item

C. Full Name (Last, First, Middle Initial)
PLAINS ALL AMERICAN GP LLC PAC

Mailing Address 333 CLAY STREET
SUITE 1600

City HOUSTON	State TX	Zip Code 77002
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00686287

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
 _____,_____,_____ 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 18 / 2020

Transaction ID : SA11C.17410

Amount of Each Receipt this Period
 _____,_____,_____ 1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	_____ , _____ , _____ 6300.00
TOTAL This Period (last page this line number only)..... ▶	_____ , _____ , _____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 80	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PLAINS COTTON GROWERS INC. PAC

Mailing Address 4517 W LOOP 289

City LUBBOCK	State TX	Zip Code 79414
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00599084

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 25 / 2020

Transaction ID : SA11C.17396

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
RENASANT BANK EMPLOYEEES VOLUNTARY POLITICAL COMMITTEE

Mailing Address P O BOX 709

City TUPELO	State MS	Zip Code 38802
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00191759

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
3500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 18 / 2020

Transaction ID : SA11C.17406

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
T-MOBILE USA, INC. POLITICAL ACTION COMMITTEE (T-PAC)

Mailing Address 601 PENNSYLVANIA AVENUE NW
SUITE 800 NORTH BLDG.

City WASHINGTON	State DC	Zip Code 20004
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00361758

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 09 / 2020

Transaction ID : SA11C.17473

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	3000.00
TOTAL This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 46 OF 80	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
TELAPEX INC PAC

Mailing Address 1018 HIGHLAND COLONY PKWY #330

City RIDGELAND	State MS	Zip Code 39157
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00408500

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 25 / 2019

Transaction ID : SA11C.16278

Amount of Each Receipt this Period

2200.00

Memo Item

B. Full Name (Last, First, Middle Initial)
TELAPEX INC PAC

Mailing Address 1018 HIGHLAND COLONY PKWY #330

City RIDGELAND	State MS	Zip Code 39157
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00408500

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y
11 / 25 / 2019

Transaction ID : SA11C.17496

Amount of Each Receipt this Period

- 2200.00

Memo Item
Redesignate:

C. Full Name (Last, First, Middle Initial)
TELAPEX INC PAC

Mailing Address 1018 HIGHLAND COLONY PKWY #330

City RIDGELAND	State MS	Zip Code 39157
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00408500

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 28 / 2020

Transaction ID : SA11C.17268

Amount of Each Receipt this Period

5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	5000.00
TOTAL This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 47 OF 80	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
TELAPEX INC PAC

Mailing Address 1018 HIGHLAND COLONY PKWY
#330

City RIDGELAND	State MS	Zip Code 39157
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00408500

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2020

Transaction ID : SA11C.17497

Amount of Each Receipt this Period

2200.00

Memo Item
Redesignate:

B. Full Name (Last, First, Middle Initial)
THE BOEING COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 929 LONG BRIDGE DRIVE

City ARLINGTON	State VA	Zip Code 22202
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00142711

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 28 / 2020

Transaction ID : SA11C.17271

Amount of Each Receipt this Period

500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
THE WENDYS COMPANY POLITICAL ACTION COMMITTEE

Mailing Address PO BOX 15441

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00369090

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 22 / 2020

Transaction ID : SA11C.17400

Amount of Each Receipt this Period

2500.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	3000.00
TOTAL This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 OF 80	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
TOYOTA MOTOR NORTH AMERICA INC PAC AKA TOYOTA/LEXUS PAC

Mailing Address 601 THIRTEENTH STREET NW
STE 910 S

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00542365

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
8500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 28 / 2020

Transaction ID : SA11C.17272

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
VERIZON COMMUNICATIONS, INC. POLITICAL ACTION COMMITTEE (VERIZON PAC)

Mailing Address 1300 I ST NW, STE 500 EAST
ATTN: TAYLOR CRAIG

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00186288

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 25 / 2020

Transaction ID : SA11C.17393

Amount of Each Receipt this Period
1000.00

Memo Item

C. Full Name (Last, First, Middle Initial)
VNA HOLDING INC. POLITICAL ACTION COMMITTEE (VG PAC)

Mailing Address 2900 K STREET NW
SOUTH BUILDING, SUITE 410

City WASHINGTON	State DC	Zip Code 20007
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00652701

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 16 / 2020

Transaction ID : SA11C.17373

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	3000.00
TOTAL This Period (last page this line number only)..... ▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 49 OF 80	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)
KELLY FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
VNA HOLDING INC. POLITICAL ACTION COMMITTEE (VG PAC)

Mailing Address 2900 K STREET NW
SOUTH BUILDING, SUITE 410

City WASHINGTON	State DC	Zip Code 20007
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00652701

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
4000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
08 / 28 / 2020

Transaction ID : SA11C.17266

Amount of Each Receipt this Period
2000.00

Memo Item

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

Mailing Address PO BOX 9891

City ARLINGTON	State VA	Zip Code 22219
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00694323

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼
55916.42

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2020

Transaction ID : SA11C.17073

Amount of Each Receipt this Period
885.00

Memo Item
EARMARKED THROUGH CONDUIT. 43 CONTRIBUTIONS UNDER THE LIMIT

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Election Cycle-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶	2885.00
TOTAL This Period (last page this line number only)..... ▶	71485.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 80			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ALEXANDER THOMPSON ARNOLD, PLLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2020		
Mailing Address 5221 CLIFF GOOKIN BOULEVARD			FEC Identification Number C		
City TUPELO	State MS	Zip Code 38801	Amount of Each Disbursement this Period 543.75		
Purpose of Disbursement ACCOUNTING SERVICES		Category/ Type 001	Transaction ID : SB17.16961		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. ALEXANDER THOMPSON ARNOLD, PLLC			Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2020		
Mailing Address 5221 CLIFF GOOKIN BOULEVARD			FEC Identification Number C		
City TUPELO	State MS	Zip Code 38801	Amount of Each Disbursement this Period 793.75		
Purpose of Disbursement ACCOUNTING SERVICES		Category/ Type 001	Transaction ID : SB17.16981		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. ALEXANDER THOMPSON ARNOLD, PLLC			Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2020		
Mailing Address 5221 CLIFF GOOKIN BOULEVARD			FEC Identification Number C		
City TUPELO	State MS	Zip Code 38801	Amount of Each Disbursement this Period 806.25		
Purpose of Disbursement ACCOUNTING SERVICES		Category/ Type 001	Transaction ID : SB17.17014		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	2143.75
TOTAL This Period (last page this line number only).....▶	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 51 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

A. BALDWIN & ASSOCIATES, INC.

Full Name (Last, First, Middle Initial)
BALDWIN & ASSOCIATES, INC.

Mailing Address P O BOX 905

City TUPELO State MS Zip Code 38802

Purpose of Disbursement CAMPAIGN STRATEGY Category/Type 001

Candidate Name

Office Sought: House Senate President Disbursement For: 2020 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 01 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 8000.00

Transaction ID : SB17.16949

Memo Item

B. BALDWIN & ASSOCIATES, INC.

Full Name (Last, First, Middle Initial)
BALDWIN & ASSOCIATES, INC.

Mailing Address P O BOX 905

City TUPELO State MS Zip Code 38802

Purpose of Disbursement CAMPAIGN STRATEGY Category/Type 001

Candidate Name

Office Sought: House Senate President Disbursement For: 2020 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 01 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 8000.00

Transaction ID : SB17.16973

Memo Item

C. BALDWIN & ASSOCIATES, INC.

Full Name (Last, First, Middle Initial)
BALDWIN & ASSOCIATES, INC.

Mailing Address P O BOX 905

City TUPELO State MS Zip Code 38802

Purpose of Disbursement CAMPAIGN STRATEGY Category/Type 001

Candidate Name

Office Sought: House Senate President Disbursement For: 2020 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 01 / 2020

FEC Identification Number: C

Amount of Each Disbursement this Period: 8000.00

Transaction ID : SB17.16989

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 24000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 80			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BICE FOR CONGRESS			Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2020		
Mailing Address PO BOX 21315			FEC Identification Number C C00703843		
City OKLAHOMA CITY	State OK	Zip Code 73156	Amount of Each Disbursement this Period 1000.00		
Purpose of Disbursement DONATION		Category/ Type 001	Transaction ID : SB17.17029		
Candidate Name BICE, STEPHANIE, , ,		Memo Item <input type="checkbox"/>			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: OK	District: 05				

Full Name (Last, First, Middle Initial) B. BOOSTERS, INC.			Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2020		
Mailing Address P O BOX 70156			FEC Identification Number C		
City MONTGOMERY	State AL	Zip Code 36107	Amount of Each Disbursement this Period 1630.30		
Purpose of Disbursement SIGNS		Category/ Type 001	Transaction ID : SB17.16997		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State:	District:				

Full Name (Last, First, Middle Initial) C. BOOSTERS, INC.			Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2020		
Mailing Address P O BOX 70156			FEC Identification Number C		
City MONTGOMERY	State AL	Zip Code 36107	Amount of Each Disbursement this Period 1750.00		
Purpose of Disbursement SIGNS		Category/ Type 001	Transaction ID : SB17.17016		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....▶	4380.30
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 53 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BOOSTERS, INC.			Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2020	
Mailing Address P O BOX 70156			FEC Identification Number C	
City MONTGOMERY	State AL	Zip Code 36107	Amount of Each Disbursement this Period 1630.30	
Purpose of Disbursement SIGNS		Category/ Type 001	Transaction ID : SB17.17040	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. BRIAN FITZPATRICK FOR CONGRESS			Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2020	
Mailing Address PO BOX 939			FEC Identification Number C C00607416	
City LANGHORNE	State PA	Zip Code 19047	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement DONATION		Category/ Type 001	Transaction ID : SB17.17007	
Candidate Name FITZPATRICK, BRIAN, , ,		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: PA District: 01				

Full Name (Last, First, Middle Initial) C. BRYANT SONGY SNELL LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2020	
Mailing Address 300 CONCOURSE BOULEVARD #103			FEC Identification Number C	
City RIDGELAND	State MS	Zip Code 39157	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement CONSULTANT - FUNDRAISER		Category/ Type 001	Transaction ID : SB17.16951	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	4630.30
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 54 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BRYANT SONGY SNELL LLC			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2020	
Mailing Address 300 CONCOURSE BOULEVARD #103			FEC Identification Number C	
City RIDGELAND	State MS	Zip Code 39157	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement CONSULTANT - FUNDRAISER		Category/ Type 001	Transaction ID : SB17.16975	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. BRYANT SONGY SNELL LLC			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2020	
Mailing Address 300 CONCOURSE BOULEVARD #103			FEC Identification Number C	
City RIDGELAND	State MS	Zip Code 39157	Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement CONSULTANT - FUNDRAISER		Category/ Type 001	Transaction ID : SB17.16991	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. CINDY HYDE-SMITH FOR US SENATE			Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2020	
Mailing Address PO BOX 2930			FEC Identification Number C C00675348	
City JACKSON	State MS	Zip Code 39207	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement DONATION		Category/ Type 001	Transaction ID : SB17.17021	
Candidate Name HYDE-SMITH, CINDY, , ,			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: MS District: 00				

SUBTOTAL of Disbursements This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 55 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CLAUDIA TENNEY FOR CONGRESS			Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2020	
Mailing Address 8469 SENECA TPKE STE 105			FEC Identification Number C C00632828	
City NEW HARTFORD	State NY	Zip Code 13413	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement DONATION		Category/ Type 001	Transaction ID : SB17.17024	
Candidate Name TENNEY, CLAUDIA, , ,		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: NY District: 22				

Full Name (Last, First, Middle Initial) B. DIRECT MAIL SYSTEMS, INC			Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2020	
Mailing Address 12450 AUTOMOBILE BOULEVARD			FEC Identification Number C	
City CLEARWATER	State FL	Zip Code 33762	Amount of Each Disbursement this Period 2597.41	
Purpose of Disbursement PRINTING AND POSTAGE		Category/ Type 001	Transaction ID : SB17.16999	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. FIRST BANKCARD			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2020	
Mailing Address POST OFFICE BOX 2818			FEC Identification Number C	
City OMAHA	State NE	Zip Code 68103-2818	Amount of Each Disbursement this Period 1402.66	
Purpose of Disbursement CREDIT CARD PAYMENT		Category/ Type 001	Transaction ID : SB17.17051	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	5000.07
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 56 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. BLOOMERANG			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2020	
Mailing Address 5724 BIRTZ ROAD			FEC Identification Number C	
City INDIANAPOLIS	State IN	Zip Code 46216	Amount of Each Disbursement this Period 30.00	
Purpose of Disbursement SOFTWARE		Category/ Type 001	Transaction ID : SB17.17051.0	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. C SPIRE			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2020	
Mailing Address 1018 HIGHLAND COLONY PARKWAY SUITE 300			FEC Identification Number C	
City RIDGELAND	State MS	Zip Code 39157	Amount of Each Disbursement this Period 134.60	
Purpose of Disbursement TELEPHONE		Category/ Type 001	Transaction ID : SB17.17051.1	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. CAPITOL HILL CLUB			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2020	
Mailing Address 300 FIRST STREET SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 42.62	
Purpose of Disbursement CAMPAIGN DINNER EXPENSE		Category/ Type 001	Transaction ID : SB17.17051.2	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CHEVRON			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2020	
Mailing Address 1718 MCCULLOUGH BOULEVARD			FEC Identification Number C	
City TUPELO	State MS	Zip Code 39901	Amount of Each Disbursement this Period 25.01	
Purpose of Disbursement AUTO - FUEL		Category/ Type 001	Transaction ID : SB17.17051.3	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. CONSTANT CONTACT			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2020	
Mailing Address 85 SECOND STREET, STE 100			FEC Identification Number C	
City SAN FRANCISCO	State CA	Zip Code 94105	Amount of Each Disbursement this Period 219.35	
Purpose of Disbursement E-MAIL PROGRAM		Category/ Type 001	Transaction ID : SB17.17051.5	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. Exxon			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2020	
Mailing Address 108 TURNER PARK ROAD			FEC Identification Number C	
City SALTILLO	State MS	Zip Code 38866	Amount of Each Disbursement this Period 26.00	
Purpose of Disbursement AUTO - FUEL		Category/ Type 001	Transaction ID : SB17.17051.6	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 58 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FASTLANE - SALTILLO			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2020	
Mailing Address 1770 Birmingham Ridge Rd			FEC Identification Number C	
City SALTILLO	State MS	Zip Code 38866	Amount of Each Disbursement this Period 157.01	
Purpose of Disbursement AUTO - FUEL		Category/ Type 001	Transaction ID : SB17.17051.7	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. MUGSHOTS TUPELO			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2020	
Mailing Address 374 EAST MAIN STREET			FEC Identification Number C	
City TUPELO	State MS	Zip Code 38804	Amount of Each Disbursement this Period 37.21	
Purpose of Disbursement CAMPAIGN DINNER EXPENSE		Category/ Type 001	Transaction ID : SB17.17051.11	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. NATIONBUILDER			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2020	
Mailing Address 520 SOUTH GRAND AVENUE			FEC Identification Number C	
City LOS ANGELES	State CA	Zip Code 90071	Amount of Each Disbursement this Period 29.00	
Purpose of Disbursement WEBSITE		Category/ Type 001	Transaction ID : SB17.17051.12	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 59 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PAPA V'S			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2020	
Mailing Address 438 E MAIN ST			FEC Identification Number C	
City TUPELO	State MS	Zip Code 38804	Amount of Each Disbursement this Period 32.15	
Purpose of Disbursement AUTO - FUEL		Category/ Type 001	Transaction ID : SB17.17051.14	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. TICO'S STEAKHOUSE			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2020	
Mailing Address 1536 E COUNTY LINE RD			FEC Identification Number C	
City RIDGELAND	State MS	Zip Code 39157	Amount of Each Disbursement this Period 433.26	
Purpose of Disbursement CAMPAIGN DINNER EXPENSE		Category/ Type 001	Transaction ID : SB17.17051.16	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. FIRST BANKCARD			Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2020	
Mailing Address POST OFFICE BOX 2818			FEC Identification Number C	
City OMAHA	State NE	Zip Code 68103-2818	Amount of Each Disbursement this Period 1496.24	
Purpose of Disbursement CREDIT CARD PAYMENT		Category/ Type 001	Transaction ID : SB17.17053	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	1496.24
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 60 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. 5 GUYS		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2020
Mailing Address 2401 SOUTH SMITH BOULEVARD		FEC Identification Number C
City ARLINGTON	State VA	Zip Code 22202
Purpose of Disbursement MEAL	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 13.56
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.17053.0 <input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. FIRST BANKCARD		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2020
Mailing Address POST OFFICE BOX 2818		FEC Identification Number C
City OMAHA	State NE	Zip Code 68103-2818
Purpose of Disbursement FEES	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 78.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.17053.1 <input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. BLOOMERANG		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2020
Mailing Address 5724 BIRTZ ROAD		FEC Identification Number C
City INDIANAPOLIS	State IN	Zip Code 46216
Purpose of Disbursement SOFTWARE	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 30.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.17053.2 <input checked="" type="checkbox"/> Memo Item
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 61 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. C SPIRE		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2020
Mailing Address 1018 HIGHLAND COLONY PARKWAY SUITE 300		FEC Identification Number C
City RIDGELAND	State MS	Zip Code 39157
Purpose of Disbursement TELEPHONE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 134.60
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.17053.3 <input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. CAPITOL HILL CLUB		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2020
Mailing Address 300 FIRST STREET SE		FEC Identification Number C
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement CAMPAIGN DINNER EXPENSE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 95.87
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.17053.4 <input checked="" type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) C. FASTLANE - SALTILLO		Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2020
Mailing Address 1770 Birmingham Ridge Rd		FEC Identification Number C
City SALTILLO	State MS	Zip Code 38866
Purpose of Disbursement AUTO - FUEL	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 173.51
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.17053.6 <input checked="" type="checkbox"/> Memo Item
State: District:		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 62 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. KROGER FUEL			Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2020	
Mailing Address 960 MAIL STREET			FEC Identification Number C	
City TUPELO	State MS	Zip Code 38801	Amount of Each Disbursement this Period 44.00	
Purpose of Disbursement AUTO - FUEL		Category/ Type 001	Transaction ID : SB17.17053.10	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. SHELL OIL - TUPELO			Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2020	
Mailing Address 792 MAIN STREET			FEC Identification Number C	
City TUPELO	State MS	Zip Code 38804	Amount of Each Disbursement this Period 50.00	
Purpose of Disbursement AUTO - FUEL		Category/ Type 001	Transaction ID : SB17.17053.15	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. BULLFEATHERS			Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2020	
Mailing Address 410 FIRST ST SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 121.80	
Purpose of Disbursement CAMPAIGN DINNER EXPENSE		Category/ Type 001	Transaction ID : SB17.17053.17	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 63 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. HAWK N DOVE			Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2020	
Mailing Address 329 Pennsylvania Ave SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 416.95	
Purpose of Disbursement EVENT CATERING		Category/ Type 001	Transaction ID : SB17.17053.18	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. FIRST BANKCARD			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2020	
Mailing Address POST OFFICE BOX 2818			FEC Identification Number C	
City OMAHA	State NE	Zip Code 68103-2818	Amount of Each Disbursement this Period 2093.00	
Purpose of Disbursement CREDIT CARD PAYMENT		Category/ Type 001	Transaction ID : SB17.17055	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. BLOOMERANG			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2020	
Mailing Address 5724 BIRTZ ROAD			FEC Identification Number C	
City INDIANAPOLIS	State IN	Zip Code 46216	Amount of Each Disbursement this Period 30.00	
Purpose of Disbursement SOFTWARE		Category/ Type 001	Transaction ID : SB17.17055.2	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	2093.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 64 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. C SPIRE		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2020
Mailing Address 1018 HIGHLAND COLONY PARKWAY SUITE 300		FEC Identification Number C
City RIDGELAND	State MS	Zip Code 39157
Purpose of Disbursement TELEPHONE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 144.60
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.17055.4
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. DIRECT MAIL SYSTEMS, INC		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2020
Mailing Address 12450 AUTOMOBILE BOULEVARD		FEC Identification Number C
City CLEARWATER	State FL	Zip Code 33762
Purpose of Disbursement PRINTING AND POSTAGE	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 839.10
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.17055.5
State: District:	<input checked="" type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. FASTLANE - SALTILLO		Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2020
Mailing Address 1770 Birmingham Ridge Rd		FEC Identification Number C
City SALTILLO	State MS	Zip Code 38866
Purpose of Disbursement AUTO - FUEL	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 113.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.17055.6
State: District:	<input checked="" type="checkbox"/> Memo Item	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 65 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. KROGER FUEL			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2020	
Mailing Address 960 MAIL STREET			FEC Identification Number C	
City TUPELO	State MS	Zip Code 38801	Amount of Each Disbursement this Period 34.00	
Purpose of Disbursement AUTO - FUEL		Category/ Type 001	Transaction ID : SB17.17055.9	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. MT FUJI JAPANESE SEAFOOD			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2020	
Mailing Address 837 KINGS CROSSING DRIVE #1			FEC Identification Number C	
City TUPELO	State MS	Zip Code 38804	Amount of Each Disbursement this Period 92.00	
Purpose of Disbursement CAMPAIGN DINNER EXPENSE		Category/ Type 001	Transaction ID : SB17.17055.11	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) C. MUGSHOTS TUPELO			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2020	
Mailing Address 374 EAST MAIN STREET			FEC Identification Number C	
City TUPELO	State MS	Zip Code 38804	Amount of Each Disbursement this Period 92.76	
Purpose of Disbursement CAMPAIGN DINNER EXPENSE		Category/ Type 001	Transaction ID : SB17.17055.12	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: _____	District: _____			

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 66 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PARK HEIGHTS			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2020	
Mailing Address 335 E MAIN ST			FEC Identification Number C	
City TUPELO	State MS	Zip Code 38804	Amount of Each Disbursement this Period 148.54	
Purpose of Disbursement CAMPAIGN DINNER EXPENSE		Category/ Type 001	Transaction ID : SB17.17055.14	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. PAPA V'S			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2020	
Mailing Address 438 E MAIN ST			FEC Identification Number C	
City TUPELO	State MS	Zip Code 38804	Amount of Each Disbursement this Period 38.68	
Purpose of Disbursement AUTO - FUEL		Category/ Type 001	Transaction ID : SB17.17055.15	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. SNACK BAR			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2020	
Mailing Address 721 NORTH LAMAR BOULEVARD			FEC Identification Number C	
City OXFORD	State MS	Zip Code 38655	Amount of Each Disbursement this Period 39.50	
Purpose of Disbursement CAMPAIGN DINNER EXPENSE		Category/ Type 001	Transaction ID : SB17.17055.17	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 67 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 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)
KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. TRATTORIA ALBERTO			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2020	
Mailing Address 506 8TH STREET SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 137.09	
Purpose of Disbursement CAMPAIGN DINNER EXPENSE		Category/ Type 001	Transaction ID : SB17.17055.18	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. HAWK N DOVE			Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2020	
Mailing Address 329 Pennsylvania Ave SE			FEC Identification Number C	
City WASHINGTON	State DC	Zip Code 20003	Amount of Each Disbursement this Period 256.84	
Purpose of Disbursement CAMAPGIN DINNER EXPENSE		Category/ Type 001	Transaction ID : SB17.17055.19	
Candidate Name		Memo Item <input checked="" type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. FRIENDS OF HAGEDORN			Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2020	
Mailing Address 11 CIVIC CENTER PLZ STE 7			FEC Identification Number C C00550707	
City MANKATO	State MN	Zip Code 56001	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement DONATION		Category/ Type 001	Transaction ID : SB17.17008	
Candidate Name HAGEDORN, JAMES, , ,		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: MN District: 01				

SUBTOTAL of Disbursements This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 80			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. GOLDEN NEEDLE		Date of Disbursement M M / D D / Y Y Y Y 08 / 26 / 2020
Mailing Address 4123 WEST MAIN STREET		FEC Identification Number C
City TUPELO	State MS	Zip Code 38801
Purpose of Disbursement PROMOTIONAL MATERIALS	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 300.30
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.16985
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. GOOD FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2020
Mailing Address PO BOX 117		FEC Identification Number C C00721308
City LOVINGSTON	State VA	Zip Code 22949
Purpose of Disbursement DONATION	Category/Type 001	
Candidate Name GOOD, ROBERT G., , ,		Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.17018
State: VA District: 05	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. HIGH COTTON CONSULTING, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2020
Mailing Address 1251 NW BRIARCLIFF PKWY, STE 85		FEC Identification Number C
City KANSAS CITY	State MO	Zip Code 64116
Purpose of Disbursement CONSULTANT - FUNDRAISER	Category/Type 001	
Candidate Name		Amount of Each Disbursement this Period 4805.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.16967
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	6105.30
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 69 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. HIGH COTTON CONSULTING, LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2020
Mailing Address 1251 NW BRIARCLIFF PKWY, STE 85		FEC Identification Number C
City KANSAS CITY	State MO	Zip Code 64116
Purpose of Disbursement POSTAGE REIMBURSEMENT		001
Candidate Name		Amount of Each Disbursement this Period 73.21
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.16983
State: District:		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. HUDSON FOR CONGRESS		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2020
Mailing Address P O BOX 5053		FEC Identification Number C H2NC08185
City CONCORD	State NC	Zip Code 28027
Purpose of Disbursement DONATION		001
Candidate Name HUDSON, RICHARD L. JR., , ,		Amount of Each Disbursement this Period 2000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.17005
State: NC District: 08		<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. JACKSON NEW MEDIA INC		Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2020
Mailing Address POST OFFICE BOX 55914		FEC Identification Number C
City JACKSON	State MS	Zip Code 39296
Purpose of Disbursement ONLINE ADVERTISING		001
Candidate Name		Amount of Each Disbursement this Period 500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.17049
State: District:		<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	2573.21
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 70 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. JACKSON NEW MEDIA INC			Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2020	
Mailing Address POST OFFICE BOX 55914			FEC Identification Number C	
City JACKSON	State MS	Zip Code 39296	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement ONLINE ADVERTISING		Category/ Type 001	Transaction ID : SB17.17059	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State:	District:			

Full Name (Last, First, Middle Initial) B. JACKSON NEW MEDIA INC			Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2020	
Mailing Address POST OFFICE BOX 55914			FEC Identification Number C	
City JACKSON	State MS	Zip Code 39296	Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement ONLINE ADVERTISING		Category/ Type 001	Transaction ID : SB17.17061	
Candidate Name		Memo Item <input type="checkbox"/>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State:	District:			

Full Name (Last, First, Middle Initial) C. KATKO FOR CONGRESS			Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2020	
Mailing Address 228 S WASHINGTON ST STE 115			FEC Identification Number C C00556365	
City ALEXANDRIA	State VA	Zip Code 22314	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement DONATION		Category/ Type 001	Transaction ID : SB17.17001	
Candidate Name KATKO, JOHN M, , ,		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: NY	District: 24			

SUBTOTAL of Disbursements This Page (optional).....▶	2000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 71 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. LETLOW FOR CONGRESS			Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2020
Mailing Address 905 JULIA STREET			FEC Identification Number C C00742106
City RAYVILLE	State LA	Zip Code 71269	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement DONATION		Category/ Type 001	Transaction ID : SB17.17042
Candidate Name LETLOW, LUKE JOSHUA, , ,		Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: LA District: 05		

Full Name (Last, First, Middle Initial) B. MAKE AMERICA GREAT AGAIN STRIKE FORCE			Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2020
Mailing Address 95 WHITE BRIDGE ROAD, STE 207			FEC Identification Number C
City NASHVILLE	State TN	Zip Code 37205	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement DONATION		Category/ Type 001	Transaction ID : SB17.16969
Candidate Name		Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) C. NANCY MACE FOR CONGRESS			Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2020
Mailing Address 295 SEVEN FARMS DRIVE SUITE C-186			FEC Identification Number C C00710103
City CHARLESTON	State SC	Zip Code 29492	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement DONATION		Category/ Type 001	Transaction ID : SB17.17026
Candidate Name MACE, NANCY, , ,		Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: SC District: 01		

SUBTOTAL of Disbursements This Page (optional).....▶	3000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 72 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. NEW BEGINNINGS		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2020
Mailing Address 2164 SOUTHRIDGE DRIVE		FEC Identification Number C
City TUPELO	State MS	Zip Code 38801
Purpose of Disbursement DONATION	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.16987
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. PERKINS, SANDRA, , ,		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2020
Mailing Address 4044 MEADOW CIRCLE		FEC Identification Number C
City BELDEN	State MS	Zip Code 38826
Purpose of Disbursement CONTRACT LABOR - CLERICAL	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.16953
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PERKINS, SANDRA, , ,		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2020
Mailing Address 4044 MEADOW CIRCLE		FEC Identification Number C
City BELDEN	State MS	Zip Code 38826
Purpose of Disbursement POSTAGE REIMBURSEMENT	Category/ Type 001	
Candidate Name		Amount of Each Disbursement this Period 55.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB17.16963
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	1055.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 80			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PERKINS, SANDRA, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2020		
Mailing Address 4044 MEADOW CIRCLE			FEC Identification Number C		
City BELDEN	State MS	Zip Code 38826	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement CONTRACT LABOR - CLERICAL		Category/ Type 001	Transaction ID : SB17.16977		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) B. PERKINS, SANDRA, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2020		
Mailing Address 4044 MEADOW CIRCLE			FEC Identification Number C		
City BELDEN	State MS	Zip Code 38826	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement CONTRACT LABOR - CLERICAL		Category/ Type 001	Transaction ID : SB17.16995		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

Full Name (Last, First, Middle Initial) C. PREMIUM VIDEO PRODUCTIONS LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 16 / 2020		
Mailing Address 398 EAST MAIN STREET, STE 116			FEC Identification Number C		
City TUPELO	State MS	Zip Code 38804	Amount of Each Disbursement this Period 500.00		
Purpose of Disbursement VIDEO PRODUCTION		Category/ Type 001	Transaction ID : SB17.16965		
Candidate Name		Memo Item <input type="checkbox"/>			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 74 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. RODNEY FOR CONGRESS			Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2020	
Mailing Address PO BOX 344			FEC Identification Number C C00521948	
City TAYLORVILLE	State IL	Zip Code 62568	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement DONATION		Category/ Type 001	Transaction ID : SB17.17011	
Candidate Name DAVIS, RODNEY L, , ,		Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IL District: 13			

Full Name (Last, First, Middle Initial) B. SOILEAU, JACQUE, , ,			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2020	
Mailing Address 300 OVERLOOK DRIVE			FEC Identification Number C	
City BRANDON	State MS	Zip Code 39042	Amount of Each Disbursement this Period 315.00	
Purpose of Disbursement CONTRACT LABOR - REPORTING		Category/ Type 001	Transaction ID : SB17.16955	
Candidate Name		Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

Full Name (Last, First, Middle Initial) C. SOILEAU, JACQUE, , ,			Date of Disbursement M M / D D / Y Y Y Y 08 / 03 / 2020	
Mailing Address 300 OVERLOOK DRIVE			FEC Identification Number C	
City BRANDON	State MS	Zip Code 39042	Amount of Each Disbursement this Period 1678.75	
Purpose of Disbursement CONTRACT LABOR - REPORTING		Category/ Type 001	Transaction ID : SB17.16979	
Candidate Name		Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	2993.75
TOTAL This Period (last page this line number only).....▶	2993.75

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 75 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SOILEAU, JACQUE, , ,			Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2020	
Mailing Address 300 OVERLOOK DRIVE			FEC Identification Number C	
City BRANDON	State MS	Zip Code 39042	Amount of Each Disbursement this Period 63.75	
Purpose of Disbursement CONTRACT LABOR - REPORTING		Category/ Type 001	Transaction ID : SB17.16993	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) B. THE PROSPER GROUP CORPORATION			Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2020	
Mailing Address 150 WEST MARKET STREET, STE 500			FEC Identification Number C	
City INDIANAPOLIS	State IN	Zip Code 46204	Amount of Each Disbursement this Period 2544.69	
Purpose of Disbursement ONLINE CONSULTANT		Category/ Type 001	Transaction ID : SB17.17047	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

Full Name (Last, First, Middle Initial) C. THE PROSPER GROUP CORPORATION			Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2020	
Mailing Address 150 WEST MARKET STREET, STE 500			FEC Identification Number C	
City INDIANAPOLIS	State IN	Zip Code 46204	Amount of Each Disbursement this Period 2537.28	
Purpose of Disbursement ONLINE CONSULTANT		Category/ Type 001	Transaction ID : SB17.17057	
Candidate Name			<input type="checkbox"/> Memo Item	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....▶	5145.72
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 76 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

A. THE PROSPER GROUP CORPORATION

Full Name (Last, First, Middle Initial)
Mailing Address 150 WEST MARKET STREET, STE 500

City INDIANAPOLIS State IN Zip Code 46204

Purpose of Disbursement ONLINE CONSULTANT Category/Type 001

Candidate Name

Office Sought: House Senate President Disbursement For: 2020 Primary General Other (specify) ▼

State: District:

Date of Disbursement 09 / 23 / 2020

FEC Identification Number C

Amount of Each Disbursement this Period 1030.00

Transaction ID : SB17.17063

Memo Item

B. WINRED TECHNICAL SERVICES, LLC

Full Name (Last, First, Middle Initial)
Mailing Address 1776 WILSON BOULEVARD, STE 530

City ARLINGTON State VA Zip Code 22219

Purpose of Disbursement PROCESSING FEES Category/Type 001

Candidate Name

Office Sought: House Senate President Disbursement For: 2020 Primary General Other (specify) ▼

State: District:

Date of Disbursement 09 / 30 / 2020

FEC Identification Number C

Amount of Each Disbursement this Period 433.33

Transaction ID : SB17.17045

Memo Item

C. YOUNG FOR IOWA, INC.

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 162

City VAN METER State IA Zip Code 50261

Purpose of Disbursement DONATION Category/Type 001

Candidate Name YOUNG, DAVID, , ,

Office Sought: House Senate President Disbursement For: 2020 Primary General Other (specify) ▼

State: IA District: 03

Date of Disbursement 09 / 15 / 2020

FEC Identification Number C C00545616

Amount of Each Disbursement this Period 1000.00

Transaction ID : SB17.17032

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶ 2463.33

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 77 OF 80	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. YOUNG KIM FOR CONGRESS			Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2020	
Mailing Address PO BOX 2186			FEC Identification Number C C00665638	
City FULLERTON	State CA	Zip Code 92837	Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement DONATION		Category/ Type 001	Transaction ID : SB17.17035	
Candidate Name KIM, YOUNG, , ,		Memo Item <input type="checkbox"/>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: CA District: 39				

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

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

SUBTOTAL of Disbursements This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	77579.97

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 78 OF 80	
	<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. TRENT'S TROOPS PAC			Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2020	
Mailing Address 5221-A CLIFF GOOKIN BOULEVARD			FEC Identification Number C C00624510	
City TUPELO	State MS	Zip Code 38801	Amount of Each Disbursement this Period 5000.00	
Purpose of Disbursement DONATION		Category/ Type 001		
Candidate Name		Transaction ID : SB18.17038		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>	
State: _____	District: _____			

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

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

SUBTOTAL of Disbursements This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 80			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. GOLDFEDER, ADRIENNE, , ,		Date of Disbursement MM / DD / YYYY 07 / 09 / 2020
Mailing Address 5000 INDEPENDENCE AVENUE		FEC Identification Number C
City BRONX	State NY	Zip Code 10471
Purpose of Disbursement REFUND OF CONTRIBUTION	Category/ Type 001	Amount of Each Disbursement this Period 1500.00
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Transaction ID : SB20A.16959
State: District:	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY
Mailing Address		FEC Identification Number C
City	State	Zip Code
Purpose of Disbursement	Category/ Type	Amount of Each Disbursement this Period
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Memo Item
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

SUBTOTAL of Disbursements This Page (optional).....▶	1500.00
TOTAL This Period (last page this line number only).....▶	1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 80 OF 80	
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
KELLY FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WINRED		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2020
Mailing Address PO BOX 9891		FEC Identification Number C C00694323
City ARLINGTON	State VA	Zip Code 22219
Purpose of Disbursement REFUND OF NON ITEMIZED CONTRIBUTIONS		Category/ Type 001
Candidate Name		Amount of Each Disbursement this Period 11.89
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID : SB20C.17070
State: District:		<input type="checkbox"/> Memo Item

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

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

SUBTOTAL of Disbursements This Page (optional).....▶	11.89
TOTAL This Period (last page this line number only).....▶	11.89