

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee
(Summary Page)

1 / 19
(07/14/2000 11:48)

1. NAME OF COMMITTEE (in full) Friends of Bennie Thompson		2. FEC IDENTIFICATION NUMBER C00279851
ADDRESS (number and street) P.O. Box 100 P.O. Box 100	<input type="checkbox"/> Check if different than previously reported	
CITY, STATE, and ZIP CODE Bolton MS 39041-	STATE / DISTRICT MS / 2	3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

4. TYPE OF REPORT

- April 15 Quarterly Report Twelfth day report preceding General (election type)
- July 15 Quarterly Report election on _____ in the State of _____
- October 15 Quarterly Report Thirtieth day report following the General Election
- January 31 Year End Report on _____ in the State of _____
- July 31 Mid-Year Report (Non-election Year Only) Termination report

This report contains activity for Primary election General election Runoff election Special election

SUMMARY

5. Covering period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
<u>04/01/2000</u> through <u>06/30/2000</u>		
6. Net contributions (other than loans)		
(a) Total Contributions (other than loans) (from line 11(e))	54309.88	106572.68
(b) Total Contribution Refunds (from line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a))	54309.88	106572.68
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from line 17)	10545.98	27064.28
(b) Total Offsets to Operating Expenditures (from line 14)	104.00	436.72
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a))	10441.98	26627.56
8. Cash on Hand at Close of Reporting Period (from line 27)	357191.23	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
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	

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

Type or Print Name of Treasurer
Reuben V. Anderson

Signature of Treasurer

Date
07/14/2000

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

FEC FORM 3
(revised 4/87)

DETAILED SUMMARY PAGE
of Receipts and Disbursements
 (Page 2, FEC Form 3)

Name of Committee (in full) Friends of Bennie Thompson	Report Covering the Period From: 04/01/2000 To: 08/30/2000	
I. RECEIPTS	COLUMN A Total This Period	COLUMN B Calendar Year-To-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	22800.00	
(ii) Unitemized	1550.00	
(iii) Total of contributions from Individuals	24350.00	35570.00
(b) Political Party Committees	9.88	152.66
(c) Other Political Committees (such as PACs)	29950.00	70850.00
(d) The Candidate	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(iii), (b), (c) and (d))	54309.88	106572.66
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 13(a) and (b))	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	104.00	436.72
15. OTHER RECEIPTS (Dividends, Interest, etc.)	769.88	1856.80
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)	55183.76	108688.00
II. DISBURSEMENTS		
17. OPERATING EXPENDITURES	10545.98	27054.28
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)	10545.98	27054.28
III. CASH SUMMARY		
23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD		312553.45
24. TOTAL RECEIPTS THIS PERIOD (from Line 16)		55183.76
25. SUBTOTAL (add Line 23 and Line 24)		367737.21
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)		10545.98
27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)		357191.23

SCHEDULE A

ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11A1

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

NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name, Mailing Address, and ZIP Code Alvin Brown 1127 Buchanan Street NW Washington DC 20011-	Name of Employer Office of the Secretary Occupation Director	Date (month, day, year) 05/26/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code John Calhoun 1219 Fairmont Jackson MS 39204-	Name of Employer Integrated Mgt. Services Occupation President	Date (month, day, year) 04/27/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Gordon Cavanaugh 133 11th St. SE Washington DC 20003-3910	Name of Employer Rano & Cavanaugh, PLLC Occupation Attorney	Date (month, day, year) 04/03/2000	Amount of Each Receipt this Period 300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 400.00		
Full Name, Mailing Address, and ZIP Code Martin D. Chitwood 1290 Peach Tree Street Atlanta GA 30308-	Name of Employer Self-Employed Occupation Attorney	Date (month, day, year) 05/23/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code John Cook 107 Woodmont Way Ridgeland MS 39157-	Name of Employer United Health Care Occupation Government Operations Director	Date (month, day, year) 04/27/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Danny E. Cupit P.O. Box 22929 Jackson MS 39225-	Name of Employer Self-Employed Occupation Attorney	Date (month, day, year) 05/05/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Deborah Dawkins 22383 Meadowlark Dr. Pass Christian MS 39571-	Name of Employer MS State Senate Occupation Senator	Date (month, day, year) 04/27/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A		ITEMIZED RECEIPTS		4 / 18
			Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER 11A1
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.				
NAME OF COMMITTEE (in Full) Friends of Bennie Thompson				
Full Name, Mailing Address, and ZIP Code Roy Decker 836 Euclid Ave. Jackson MS 39202-1107	Name of Employer MSU School of Architecture	Date (month, day, year) 04/27/2000	Amount of Each Receipt this Period 500.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Director	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Frank Dixon P.O. Box 755 Ridgeland MS 39158-	Name of Employer Self-Employed	Date (month, day, year) 04/13/2000	Amount of Each Receipt this Period 500.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Businessman	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Robert Farr 1211 St. Ann St. Jackson MS 39202-	Name of Employer Self-Employed	Date (month, day, year) 04/27/2000	Amount of Each Receipt this Period 500.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Architect	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Robert G. Germany 4726 North Hampton Drive Jackson MS 39211-	Name of Employer Self-Employed	Date (month, day, year) 04/27/2000	Amount of Each Receipt this Period 1000.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Attorney	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Clare Hester 108 Clarendon Drive Ridgeland MS 39157-	Name of Employer Self-Employed	Date (month, day, year) 04/27/2000	Amount of Each Receipt this Period 500.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Businesswoman	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Sandra Irby 1026 Avondale St. Jackson MS 39216-	Name of Employer MS Tennis Association	Date (month, day, year) 04/27/2000	Amount of Each Receipt this Period 500.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Director	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Terry Jenkins P.O. Box 23579 Jackson MS 39225-	Name of Employer Self-Employed	Date (month, day, year) 05/02/2000	Amount of Each Receipt this Period 500.00	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Businessman	Aggregate Year-to-Date > \$ 500.00		
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	5 / 19
			FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (In Full)
Friends of Bonnie Thompson

Full Name, Mailing Address, and ZIP Code Wilton Johnson 1620 Belmont St. Jackson MS 39202-	Name of Employer McGlinchey Stafford Law Firm	Date (month, day, year) 05/05/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Attorney	Aggregate Year-to-Date > \$ 500.00	
Full Name, Mailing Address, and ZIP Code Jim Kitchens 610 North St. Jackson MS 39202-3116	Name of Employer Self-Employed	Date (month, day, year) 06/15/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Attorney	Aggregate Year-to-Date > \$ 1000.00	
Full Name, Mailing Address, and ZIP Code Joseph Marsh 4053 Boxwood Cir. Jackson MS 39211-	Name of Employer Benchmark Construction Co.	Date (month, day, year) 04/27/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation President	Aggregate Year-to-Date > \$ 500.00	
Full Name, Mailing Address, and ZIP Code M.D. McCurley P.O. Box 23579 Jackson MS 39225-	Name of Employer Self-Employed	Date (month, day, year) 05/02/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Contractor	Aggregate Year-to-Date > \$ 500.00	
Full Name, Mailing Address, and ZIP Code Robert McDuff 785 Pinhurst Apt #4 Jackson MS 39202-	Name of Employer Self-Employed	Date (month, day, year) 04/27/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Attorney	Aggregate Year-to-Date > \$ 500.00	
Full Name, Mailing Address, and ZIP Code Alan Moore 1510 Pinhurst Pl. Jackson MS 39202-	Name of Employer Self-Employed	Date (month, day, year) 04/27/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Attorney	Aggregate Year-to-Date > \$ 500.00	
Full Name, Mailing Address, and ZIP Code Jere B. Nash P.O. Box 1488 Jackson MS 39215-	Name of Employer Self-Employed	Date (month, day, year) 04/27/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Occupation Consultant	Aggregate Year-to-Date > \$ 500.00	

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
Friends of Bannie Thompson

Full Name, Mailing Address, and ZIP Code Billy J. Parks Rt. 3 Box 451 Belzoni MS 39038-	Name of Employer Self-Employed Occupation Farmer	Date (month, day, year) 08/22/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Lisa Percy 134 Bayou Rd. Greenville MS 38701-	Name of Employer Self-Employed Occupation Consultant	Date (month, day, year) 04/27/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Margaret Plogg 1217 Pinehurst Place Jackson MS 39202-	Name of Employer Jackson Public Schools Occupation Teacher	Date (month, day, year) 04/27/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Crymas G. Pittman 410 S. President Jackson MS 39201-	Name of Employer Self-Employed Occupation Attorney	Date (month, day, year) 04/27/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Crymas M. Pittman 2238 Southwood Rd. Jackson MS 39211-	Name of Employer Self-Employed Occupation Attorney	Date (month, day, year) 04/27/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code J.E. Roberts 410 S. President Street Jackson MS 39201-	Name of Employer Self-Employed Occupation Attorney	Date (month, day, year) 04/27/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code James Robertson P.O. Box 651 Jackson MS 39205-	Name of Employer Wisa, Carter, Child & Caraway, Occupation Attorney	Date (month, day, year) 04/27/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 500.00		

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name, Mailing Address, and ZIP Code Lance Stevens 104 Keystone Place Brandon MS 39042-	Name of Employer Self-Employed Occupation Attorney	Date (month, day, year) 04/27/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Joe Waggoner P.O. Box 23486 Jackson MS 39225-	Name of Employer Waggoner Engineering, Inc. Occupation Engineer	Date (month, day, year) 04/27/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code James Warren 1546 Northlake Dr. Jackson MS 39211-	Name of Employer Mitchell, McNitt Law Firm Occupation Attorney	Date (month, day, year) 04/27/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code David Warrington P.O. Box 7132 Jackson MS 39212-	Name of Employer U.S. Farm Service Agency Occupation Director	Date (month, day, year) 04/27/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code W. David Watkins P.O. Box 24297 Jackson MS 39225-	Name of Employer Self-Employed Occupation Attorney	Date (month, day, year) 04/27/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code C. Victor Walsh P.O. Box 22985 Jackson MS 39225-	Name of Employer Pitman, Germany, Roberts & Walsh Occupation Attorney	Date (month, day, year) 04/27/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Guy White 2033 Petit Bois Jackson MS 39211-	Name of Employer White Construction Occupation Executive Vice President	Date (month, day, year) 04/13/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (in Full)
Friends of Bennie Thompson

Full Name, Mailing Address, and ZIP Code Jesse Wilson 4919 Gaylyn Dr. Jackson MS 39208-	Name of Employer Self-Employed	Date (month, day, year) 04/27/2000	Amount of Each Receipt this Period 500.00
	Occupation Businessman		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code John P. Winburn 801 Pennsylvania Ave NW Ste 730 Washington DC 20004-	Name of Employer Winburn & Jenkins	Date (month, day, year) 04/20/2000	Amount of Each Receipt this Period 1000.00
	Occupation Consultant		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		

SUBTOTALS of Receipts This Page (Optional)	
TOTALS This Period (last page this line number only)	22800.00

SCHEDULE A

ITEMIZED RECEIPTS

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for each category of the
Detailed Summary Page

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FOR LINE NUMBER
11B

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NAME OF COMMITTEE (in Full)
Friends of Bennie Thompson

Full Name, Mailing Address, and ZIP Code

DCCC
430 South Capitol St
Washington DC 20003-

Name of Employer

**Date (month,
day, year)**
05/15/2000

**Amount of Each
Receipt this Period**
9.88

Occupation

Receipt For:

Primary

General

Other (specify):

Aggregate Year-to-Date \$ 152.68

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

9.88

SCHEDULE A

ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11C

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NAME OF COMMITTEE (in Full)
Friends of Bonnie Thompson

Full Name, Mailing Address, and ZIP Code Air Line Pilots Assoc PAC 1625 Massachusetts Ave. NW Washington DC 20036-	Name of Employer Occupation	Date (month, day, year) 04/03/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code American Maritime Officers Voluntary F 490 L'Enfant Plaza East, SW, Ste. Washington DC 20024-	Name of Employer Occupation	Date (month, day, year) 04/03/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code BellSouth Telecomm PAC 800 N 19th St, 12th Fl Birmingham AL 35203-	Name of Employer Occupation	Date (month, day, year) 06/22/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Boeing Political Action Committee 1200 Wilson Blvd. Arlington VA 22209-	Name of Employer Occupation	Date (month, day, year) 04/03/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Chicago Mercantile Exchange PAC 30 S. Wacker Drive Chicago IL 60605-	Name of Employer Occupation	Date (month, day, year) 04/07/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Dairy Farmers of Amer Inc., PAC 10220 N Executive Hills Blvd. Kansas City MO 64153-	Name of Employer Occupation	Date (month, day, year) 06/27/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 3000.00		
Full Name, Mailing Address, and ZIP Code Delphi Political Action Committee 5725 Delphi Drive Troy MI 48068-2815	Name of Employer Occupation	Date (month, day, year) 08/05/2000	Amount of Each Receipt this Period 400.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 400.00		

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER
11C

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NAME OF COMMITTEE (In Full)
Friends of Bannie Thompson

Full Name, Mailing Address, and ZIP Code Delta PAC P.O. Box 20706 Atlanta GA 30320-6001	Name of Employer Occupation	Date (month, day, year) 05/23/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Drive Political Fund 26 Louisiana Ave., NW Washington DC 20001-	Name of Employer Occupation	Date (month, day, year) 05/31/2000	Amount of Each Receipt this Period 5000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 5000.00		
Full Name, Mailing Address, and ZIP Code Employees Of Entergy PAC P.O. Box 1640 Jackson MS 39215-	Name of Employer Occupation	Date (month, day, year) 04/20/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		
Full Name, Mailing Address, and ZIP Code Florida Sugar Cane League PAC 1301 Pennsylvania Ave NW Ste 401 Washington DC 20004-1701	Name of Employer Occupation	Date (month, day, year) 04/03/2000	Amount of Each Receipt this Period 500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 500.00		
Full Name, Mailing Address, and ZIP Code Int'l Brotherhood of Electrical Worker 1125 - 15th Street, N.W. Washington DC 20005-	Name of Employer Occupation	Date (month, day, year) 04/03/2000	Amount of Each Receipt this Period 3000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 8000.00		
Full Name, Mailing Address, and ZIP Code Int'l Brotherhood of Electrical Worker 1125 - 15th Street, N.W. Washington DC 20005-	Name of Employer Occupation	Date (month, day, year) 05/09/2000	Amount of Each Receipt this Period 2000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 8000.00		
Full Name, Mailing Address, and ZIP Code Int'l Brotherhood of Boilermakers 2722 Merrilee Drive, #360 Fairfax VA 22031-	Name of Employer Occupation	Date (month, day, year) 05/09/2000	Amount of Each Receipt this Period 1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1000.00		
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11C

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NAME OF COMMITTEE (in Full)
Friends of Bennie Thompson

<p>Full Name, Mailing Address, and ZIP Code Int'l Union of Operating Eng 1125 17th Street Washington DC 20036-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 04/13/2000</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>Full Name, Mailing Address, and ZIP Code Int'l Union of Operating Eng 1125 17th Street Washington DC 20036-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 1000.00</p>	<p>Date (month, day, year) 08/15/2000</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>Full Name, Mailing Address, and ZIP Code Maintenance Way Pol League 2855 Evergreen Rd Ste 200 Southfield MI 48076-4225</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 1000.00</p>	<p>Date (month, day, year) 04/03/2000</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>Full Name, Mailing Address, and ZIP Code Philip Morris Co PAC 120 Park Avenue 24th Flr. New York NY 10017-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Philip Morris Companies PAC</p> <p>Occupation Phill - PAC Board of Directors</p> <p>Aggregate Year-to-Date > \$ 1000.00</p>	<p>Date (month, day, year) 04/27/2000</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>Full Name, Mailing Address, and ZIP Code SEIU COPE FUND PCC 1313 L Street, N.W. Washington DC 20005-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 4000.00</p>	<p>Date (month, day, year) 08/30/2000</p>	<p>Amount of Each Receipt this Period 4000.00</p>
<p>Full Name, Mailing Address, and ZIP Code SeaFarers Political Activity 5201 Auth Way Sultand MD 20745-</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 1000.00</p>	<p>Date (month, day, year) 04/03/2000</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>Full Name, Mailing Address, and ZIP Code Sierra Club Political Comm. 85 Second Street, 2nd Floor San Francisco CA 94105-3441</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date > \$ 500.00</p>	<p>Date (month, day, year) 04/07/2000</p>	<p>Amount of Each Receipt this Period 500.00</p>

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name, Mailing Address, and ZIP Code Sierra Club Political Comm. 85 Second Street, 2nd Floor San Francisco CA 94105-3441	Name of Employer	Date (month, day, year) 05/31/2000	Amount of Each Receipt this Period 50.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 550.00		

Full Name, Mailing Address, and ZIP Code Transport Workers Union of America 10 G Street, NE, Suite 420 Washington DC 20002-1536	Name of Employer	Date (month, day, year) 05/19/2000	Amount of Each Receipt this Period 500.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 500.00		

Full Name, Mailing Address, and ZIP Code U. A. Pol Ed. Comm 901 Massachusetts Ave NW Washington DC 20001-	Name of Employer	Date (month, day, year) 05/15/2000	Amount of Each Receipt this Period 1000.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 1000.00		

Full Name, Mailing Address, and ZIP Code United Auto Workers 8000 E. Jefferson Ave. Detroit MI 48214-	Name of Employer	Date (month, day, year) 04/07/2000	Amount of Each Receipt this Period 1000.00
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date \$ 4000.00		

SUBTOTALS of Receipts This Page (Optional)	
TOTALS This Period (last page this line number only)	29950.00

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER
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NAME OF COMMITTEE (in Full)
Friends of Bennie Thompson

Full Name, Mailing Address, and ZIP Code Bancorp South 525 East Capitol Street Jackson MS 39205-	Name of Employer Occupation	Date (month, day, year) 04/20/2000	Amount of Each Receipt this Period 4.37
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 17.17		
Full Name, Mailing Address, and ZIP Code Bancorp South 525 East Capitol Street Jackson MS 39205-	Name of Employer Occupation	Date (month, day, year) 05/16/2000	Amount of Each Receipt this Period 3.95
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 21.12		
Full Name, Mailing Address, and ZIP Code Bancorp South 525 East Capitol Street Jackson MS 39205-	Name of Employer Occupation	Date (month, day, year) 06/08/2000	Amount of Each Receipt this Period 4.66
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 25.78		
Full Name, Mailing Address, and ZIP Code Citibank P.O. Box 19748 Washington DC 20036-	Name of Employer Occupation	Date (month, day, year) 04/21/2000	Amount of Each Receipt this Period 45.46
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 198.72		
Full Name, Mailing Address, and ZIP Code Citibank P.O. Box 19748 Washington DC 20036-	Name of Employer Occupation	Date (month, day, year) 05/19/2000	Amount of Each Receipt this Period 45.99
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 244.71		
Full Name, Mailing Address, and ZIP Code Citibank P.O. Box 19748 Washington DC 20036-	Name of Employer Occupation	Date (month, day, year) 06/21/2000	Amount of Each Receipt this Period 47.38
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 292.09		
Full Name, Mailing Address, and ZIP Code Trustmark National Bank P.O. Box 291 Jackson MS 39205-0291	Name of Employer Occupation	Date (month, day, year) 04/20/2000	Amount of Each Receipt this Period 100.38
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 821.06		

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER
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NAME OF COMMITTEE (in Full)
Friends of Bennie Thompson

Full Name, Mailing Address, and ZIP Code Trustmark National Bank P.O. Box 291 Jackson MS 39205-0291	Name of Employer _____	Date (month, day, year) 05/18/2000	Amount of Each Receipt this Period 205.90
	Occupation _____		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): _____	Aggregate Year-to-Date > \$ 1026.98		
Full Name, Mailing Address, and ZIP Code Trustmark National Bank P.O. Box 291 Jackson MS 39205-0291	Name of Employer _____	Date (month, day, year) 06/08/2000	Amount of Each Receipt this Period 311.77
	Occupation _____		
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify): _____	Aggregate Year-to-Date > \$ 1338.73		

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

769.88

SCHEDULE B ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the Detailed Summary Page	16 / 19 FOR LINE NUMBER 17
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.			
NAME OF COMMITTEE (In Full) Friends of Bennie Thompson			
Full Name, Mailing Address, and ZIP Code American Express Suite 0001 Chicago IL 60679-0001	Purpose of Disbursement Operating Expenditure Travel & Travel Re Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Other	Date (month, day, year) 04/07/2000	Amount of Each Disbursement This Period 251.44
Full Name, Mailing Address, and ZIP Code American Express Suite 0001 Chicago IL 60679-0001	Purpose of Disbursement Operating Expenditure See Below Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Other	Date (month, day, year) 06/08/2000	Amount of Each Disbursement This Period 1139.42
Full Name, Mailing Address, and ZIP Code Sheraton Crystal Calington Lanewick VA 22504-	Purpose of Disbursement Memo Travel Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Other	Date (month, day, year) 06/08/2000	Amount of Each Disbursement This Period 492.80 Travel Expenses
Full Name, Mailing Address, and ZIP Code Southwest Airlines Jackson MS 39211-	Purpose of Disbursement Memo Travel Expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Other	Date (month, day, year) 05/08/2000	Amount of Each Disbursement This Period 209.00 Travel Expenses
Full Name, Mailing Address, and ZIP Code American Express Suite 0001 Chicago IL 60679-0001	Purpose of Disbursement Operating Expenditure Travel Related Exp Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Other	Date (month, day, year) 05/01/2000	Amount of Each Disbursement This Period 227.53
Full Name, Mailing Address, and ZIP Code BellSouth P.O. Box 740144 Atlanta GA 30374-0144	Purpose of Disbursement Operating Expenditure Phone Services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Other	Date (month, day, year) 06/08/2000	Amount of Each Disbursement This Period 206.88
Full Name, Mailing Address, and ZIP Code BellSouth P.O. Box 740144 Atlanta GA 30374-0144	Purpose of Disbursement Operating Expenditure Phone Services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Other	Date (month, day, year) 05/18/2000	Amount of Each Disbursement This Period 206.47
Full Name, Mailing Address, and ZIP Code BellSouth P.O. Box 740144 Atlanta GA 30374-0144	Purpose of Disbursement Operating Expenditure Phone Services Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Other	Date (month, day, year) 04/25/2000	Amount of Each Disbursement This Period 230.88
Full Name, Mailing Address, and ZIP Code Friends of Corina Brown 101 E. Union Street, Suite 104 Jacksonville FL 32202-	Purpose of Disbursement Operating Expenditure Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Other	Date (month, day, year) 05/26/2000	Amount of Each Disbursement This Period 500.00
SUBTOTALS of Disbursements This Page (Optional)			
TOTALS This Period (last page this line number only)			

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Troy D. Brown for Senate Campaign P.O. Box 525 Itta Bena MS 38941-	Operating Expenditure Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Other	05/30/2000	500.00
ConFish, INC. P.O. Box 271 Isola MS 38754-	Operating Expenditure Food for Reception Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Other	05/30/2000	540.00
Entergy P.O. Box 61825 New Orleans LA 70161-	Operating Expenditure Utilities Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Other	04/20/2000	38.28
Entergy P.O. Box 61825 New Orleans LA 70161-	Operating Expenditure Utilities Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Other	06/08/2000	48.83
Entergy P.O. Box 61825 New Orleans LA 70161-	Operating Expenditure Utilities Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Other	05/18/2000	38.71
Friends of Congressman Mike Forbes P.O. Box 505 Farmingville NY 11738-	Operating Expenditure Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Other	04/12/2000	500.00
Hilliard for Congress 2312 Warrior Rd., Ensley Birmingham AL 35202-	Operating Expenditure Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Other	05/28/2000	1000.00
Eleanor Jordan for Congress P.O. Box 21151 Louisville KY 40221-	Operating Expenditure Campaign Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Other	04/12/2000	1000.00
National Democratic Club 30 Ivy Street, SE Washington DC 20003-4701	Operating Expenditure Club Charges Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Other	04/25/2000	98.78

SUBTOTALS of Disbursements This Page (Optional)

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
Friends of Bennie Thompson

Full Name, Mailing Address, and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
National Democratic Club 30 Ivy Street, SE Washington DC 20003-4701	Operating Expenditure Club Charges Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Other	06/08/2000	243.86
National Democratic Club 30 Ivy Street, SE Washington DC 20003-4701	Operating Expenditure Club Charges Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Other	05/18/2000	137.78
Friends of Major Owens P.O. Box 2265 Brooklyn NY 11202	Operating Expenditure Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Other	05/30/2000	500.00
Progressive Art and Civic Club P.O. Box 5988 Greenville MS 38701	Operating Expenditure Donation Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Other	04/19/2000	300.00
Sierra Club Political Comm. 85 Second Street, 2nd Floor San Francisco CA 94105-3441	In-Kind In-Kind Listing on Web Page Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Other	05/31/2000 In-Kind Listing on Web Page	50.00
Congressman Bennie G. Thompson 103 L.C. Turner Circle Bolton MS 38041	Operating Expenditure Fundraising Expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Other	04/25/2000	106.48
Committee to Re-Elect Ed Towns 438 Lewis Ave. Brooklyn NY 11235	Operating Expenditure Contribution Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Other	05/26/2000	500.00
Trustmark National Bank P.O. Box 291 Jackson MS 39205-0291	Operating Expenditure Service Charge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Other	06/08/2000	3.16
Trustmark National Bank P.O. Box 291 Jackson MS 39205-0291	Operating Expenditure Service Charge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Other	06/08/2000	2.50

SUBTOTALS of Disbursements This Page (Optional)

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)
Friends of Bennie Thompson

<p>Full Name, Mailing Address, and ZIP Code Trustmark National Bank P.O. Box 291 Jackson MS 39205-0291</p>	<p>Purpose of Disbursement Operating Expenditure Service Charge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Other</p>	<p>Date (month, day, year) 05/18/2000</p>	<p>Amount of Each Disbursement This Period 2.50</p>
<p>Full Name, Mailing Address, and ZIP Code Trustmark National Bank P.O. Box 291 Jackson MS 39205-0291</p>	<p>Purpose of Disbursement Operating Expenditure Service Charge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Other</p>	<p>Date (month, day, year) 05/18/2000</p>	<p>Amount of Each Disbursement This Period 3.88</p>
<p>Full Name, Mailing Address, and ZIP Code Trustmark National Bank P.O. Box 291 Jackson MS 39205-0291</p>	<p>Purpose of Disbursement Operating Expenditure Service Charge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Other</p>	<p>Date (month, day, year) 04/20/2000</p>	<p>Amount of Each Disbursement This Period 5.22</p>
<p>Full Name, Mailing Address, and ZIP Code Trustmark National Bank P.O. Box 291 Jackson MS 39205-0291</p>	<p>Purpose of Disbursement Operating Expenditure Service Charge Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Other</p>	<p>Date (month, day, year) 04/20/2000</p>	<p>Amount of Each Disbursement This Period 12.50</p>
<p>Full Name, Mailing Address, and ZIP Code U.S. Postal Service Bolton MS 39041-</p>	<p>Purpose of Disbursement Operating Expenditure Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Other</p>	<p>Date (month, day, year) 06/01/2000</p>	<p>Amount of Each Disbursement This Period 231.00</p>
<p>Full Name, Mailing Address, and ZIP Code U.S. Postal Service Bolton MS 39041-</p>	<p>Purpose of Disbursement Operating Expenditure Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Other</p>	<p>Date (month, day, year) 06/28/2000</p>	<p>Amount of Each Disbursement This Period 199.00</p>
<p>Full Name, Mailing Address, and ZIP Code U.S. Postal Service Bolton MS 39041-</p>	<p>Purpose of Disbursement Operating Expenditure Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): Other</p>	<p>Date (month, day, year) 06/28/2000</p>	<p>Amount of Each Disbursement This Period 185.00</p>

SUBTOTALS of Disbursements This Page (Optional)

TOTALS This Period (last page this line number only)

8987.30

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input checked="" type="checkbox"/> Other (Specify): <i>Electronic Transmission</i>	Postmarked <i>7-14-00</i> and/or Date of Receipt
<input checked="" type="checkbox"/> Electronic Filing	
<i>JL</i> PREPARER	<i>7-14-00</i> DATE PREPARED