2011 ELECTION CYCLE

Delbert Hosemann
SECRETARY OF STATE

RECEIVED
JAN 10 2012
Campaign Finance
Secretary of State
DATE STAMP

REPORT OF RECEIPTS AND DISBURSEMENTS

Candidate
2011 Elections

Name of Candidate: Adrienne Wooten
Address: P.O. Box 1617, Jackson, MS 39225-2341 County: Hinds
Telephone: 601-707-5705 Fax: 601-707-9057
Office Sought: State Representative Political Party: Democrat
Email Address: adrienneahooper@yahoo.com

Check here if above is different from previous report

____ **May 10, 2011 Periodic Report** (January 1, 2011, through April 30, 2011) ____ Mandatory
____ **June 10, 2011 Periodic Report** (May 1, 2011, through May 31, 2011) ____ Mandatory
____ **July 8, 2011 Periodic Report** (June 1, 2011, through June 30, 2011) ____ Mandatory
____ **July 26, 2011 Pre-Election Report** (July 1, 2011, through July 23, 2011) ____ Primary Candidates
____ **August 16, 2011 Pre-Election Report** (July 24, 2011, through August 13, 2011) ____ Runoff Candidates Only
____ **October 10, 2011 Periodic Report** (July 1, 2011, through September 30, 2011) ____ Mandatory
____ **November 1, 2011 Pre-Election Report** (October 1, 2011, through October 29, 2011) ____ Mandatory
____ **November 22, 2011 Pre-Election Report** (October 30, 2011, through November 19, 2011) ____ Runoff Candidates Only
x **January 10, 2012 Periodic Report** (October 1, 2011, through December 31, 2011) ____ Mandatory
____ **Termination Report** (Candidate will no longer accept contributions or make Campaign expenditures and has no outstanding campaign debt obligation)

IMPORTANT

(1) Pre-Election reports are mandatory, even if no contributions or expenditures have occurred. In such case, the candidate shall submit a report indicating "0" (Zero) for total amount of reported contributions and expenditures during this period.

(2) Until a Candidate files a Termination Report, annual and periodic reports must still be filed in accordance with Miss. **Code Ann. § 23-15-807 (b) (ii) and (iii).**

(3) The receiving authority must be in actual receipt of the required reports by 5:00 p.m. on the reporting day. If the deadline falls on a weekend or a holiday, the office must be in actual receipt of the required reports by 5:00 p.m. on the first working day before the deadline. Faxed reports are acceptable.

REPORTED CONTRIBUTIONS AND DISBURSEMENTS

	Itemized	+	Non-Itemized	=	This Period	Calendar Year-To-Date
Total amount of contributions	$ 250.00	+$	800.00		$ 1050.00	$ 2325.00
Total amount of disbursements	$ 250.00	+$			$ 250.00	$ 350.00
Total amount of cash on hand					$ 3745.86	

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

Adrienne Wooten
Signature of Candidate

1/10/2012
Date

Authority: Refer to Miss. Code Ann. §23-15-801 (1972) et. seq. for statutory requirement.
Penalties: Failure to submit required reports, or failure to submit reports in accordance with statutory deadlines, or failure to submit valid reports shall result in fines of $50 per day and / or prosecution in accordance with Miss. Code Ann. §§ 23-15-8-11 (1972).

SEND TO: 1. Candidates for Statewide, State district, multi-county and all legislative offices should return form to Secretary of State, Elections Division, P.O. Box 136, Jackson, MS 39205 or fax to 601-576-2545.
2. Candidates for county wide and county district offices should return forms to their county Circuit Clerk.

SOS 07-11

Name of Candidate or Committee: Adrienne Wooten

Reporting period: October 1, 2011 through December 31, 2011

ITEMIZED RECEIPTS

A. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Entergy	12 / 5 / 11	$ 250.00
Mailing Address: P.O. Box 1640	/ /	$
City, State, Zip Code: Jackson, MS 39215-1640	/ /	$
Name of Employer (Required)	/ /	$
Occupation (Required)	Aggregate year-to-date	$ 250.00

B. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	/ /	$
Mailing Address	/ /	$
City, State, Zip Code	/ /	$
Name of Employer (Required)	/ /	$
Occupation (Required)	Aggregate year-to-date	$

C. Source ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	/ /	$
Mailing Address	/ /	$
City, State, Zip Code	/ /	$
Name of Employer (Required)	/ /	$
Occupation (Required)	Aggregate year-to-date	$

D. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	/ /	$
Mailing Address	/ /	$
City, State, Zip Code	/ /	$
Name of Employer (Required)	/ /	$
Occupation (Required)	Aggregate year-to-date	$

Name of Candidate or Committee Adrienne Wooten

Reporting period October 1, 2011 through December 31, 2011

ITEMIZED DISBURSEMENTS

A. Full name Tyrone Lewis	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address P.O. Box 11551	10 / 22 / 11	$ 250.00
City, State, Zip Code Jackson, MS 39283	/ /	$
Purpose of Disbursement (Optional) Contribution	Aggregate Year-to-date	$ 250.00
B. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	/ /	$
City, State, Zip Code	/ /	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$
C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	/ /	$
City, State, Zip Code	/ /	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$
D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	/ /	$
City, State, Zip Code	/ /	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	/ /	$
City, State, Zip Code	/ /	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$
F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	/ /	$
City, State, Zip Code	/ /	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$