2011 ELECTION CYCLE

Delbert Hosemann
SECRETARY OF STATE

RECEIVED
JAN 06 2012
ELECTIONS DIVISION
SECRETARY OF STATE

REPORT OF RECEIPTS AND DISBURSEMENTS
2011 Election

Name of Candidate: Bob M. Dearing

Address: 305 Melrose-Montebello Parkway County: Adams

Telephone Work: 601-446-7651 Home: 601-442-0486 Fax: 601-446-7651

Contact Name: Bob M. Dearing Email Address: bobmdearing@yahoo.com

Office Sought: Senate District 37 Political Party: Democrat

☐ 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 24, 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 30, 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) — Required to terminate reporting obligations

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	$ 4,300.00 +	$ 1,200.00	$ 5,500.00	$ 58,800.00
Total amount of disbursements	$ 26,873.01 +	$	$ 26,873.01	$ 72,800.00
Total amount of cash on hand		—	— $ 14,000.00	

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

Bob M. Dearing — Signature of Candidate

1/6/12 — Date

Authority: Refer to Miss. Code Ann. §23-15-801 (1972) et. seq. for statutory requirements.
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. §§ 23-15-811 and 813 (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 601-359-1499 or 601-576-2819.
2. Candidates for countywide and county district offices should return forms to their county Circuit Clerk.

SOS 12-10

Name of Candidate or Committee Bob M. Dearing

Reporting period 10/30/11 through 12/31/11

ITEMIZED RECEIPTS

	Date (Mo., Day, Year)	Amount of each receipt this period
A. Source: ☐ Corporation ☒ PAC ☐ Individual ☐ Loan ☐ Other (please specify)		
Full name: U.S. Oil & Gas Association PAC	11/1/11	$ 4000.00
Mailing Address: 513 North State Street, Ste 202	__/__/__	$
City, State, Zip Code: Jackson, MS 39215	__/__/__	$
Name of Employer (Required): Ben Thompson	__/__/__	$
Occupation (Required): Ex. Director	Aggregate year-to-date	$ 2,000.00
B. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify)		
Full name: Alton Hall	11/11/11	$ 1,000.00
Mailing Address: 300 South Pearl Street	__/__/__	$
City, State, Zip Code: Natchez, MS 39120	__/__/__	$
Name of Employer (Required): Self	__/__/__	$
Occupation (Required): Vet	Aggregate year-to-date	$ 1,000.00
C. Source: ☐ Corporation ☒ PAC ☐ Individual ☐ Loan ☐ Other (please specify)		
Full name: GM-PAC	11/31/11	$ 500.00
Mailing Address: 25 Massachusetts Avenue, NW Ste 400	__/__/__	$
City, State, Zip Code: Washington, DC 20001	__/__/__	$
Name of Employer (Required): Bob Ferguson	__/__/__	$ 500.00
Occupation (Required): VP Gov. Affairs	Aggregate year-to-date	$
D. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☒ Other (please specify) Company		
Full name: Ridge Point Consultants	11/21/11	$ 500.00
Mailing Address: 710 Homochitto Camport Road SE	__/__/__	$
City, State, Zip Code: Meadville, MS 39653	__/__/__	$
Name of Employer (Required): Howard Herring	__/__/__	$
Occupation (Required): Owner	Aggregate year-to-date	$ 500.00

Name of Candidate or Committee Bob M. Dearing

Reporting period 10/30/11 through 12/31/11

ITEMIZED RECEIPTS

	Date (Mo., Day, Year)	Amount of each receipt this period
A. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☒ Other (please specify) Company	11/21/11	$ 250.00
Full name: LFB Regions	__/__/__	$
Mailing Address: P.O. Box 9998	__/__/__	$
City, State, Zip Code: Jackson, MS 39286-0998	__/__/__	$
Name of Employer (Required): L. Forrest Berry	Aggregate year-to-date	$ 250.00
Occupation (Required): CEO		
B. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: S Pencer Stutzman	11/21/11	$ 300.00
Mailing Address: P.O. Box 19703	__/__/__	$
City, State, Zip Code: Natchez, MS 39122	__/__/__	$
Name of Employer (Required): Self	Aggregate year-to-date	$
Occupation (Required): Self		
C. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☒ Other (please specify) Company	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Aldridge Operating Company	11/7/11	$ 500.00
Mailing Address: P. O. Box 629	__/__/__	$
City, State, Zip Code: Natchez, MS 39121	__/__/__	$
Name of Employer (Required): Courtney Aldridge	Aggregate year-to-date	$ 500.00
Occupation (Required): Oil & Gas		
D. Source: ☐ Corporation ☒ PAC ☐ Individual ☐ Loan ☒ Other (please specify) Company	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Chevron Products Company	11/7/11	$ 1,000.00
Mailing Address: P.O. Box 1300	__/__/__	$
City, State, Zip Code: Pascagoula, MS 39568	__/__/__	$
Name of Employer (Required): Alan Suddath	Aggregate year-to-date	$ 1,000.00
Occupation (Required): Mgr. Public Affairs		

Name of Candidate or Committee Bob M. Dearing

Reporting period 10/30/11 through 12/31/11

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Richard King	11/7/11	$ 25000
Mailing Address: P.O. Box 134	__/__/__	$
City, State, Zip Code: Buckatunna, MS 39360	__/__/__	$
Name of Employer (Required): Self	__/__/__	$
Occupation (Required): Pharmacist	Aggregate year-to-date	$ 5000

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 Bob M. Dearing

Reporting period 10/30/11 through 12/31/11

ITEMIZED DISBURSEMENTS

	Date (Mo., Day, Year)	Amount of each disbursement this period
A. Full name First Natchez Radio Group Mailing Address	10/30/11	$ 1,407.00
City, State, Zip Code Natchez, MS 39120 Purpose of Disbursement (Optional)	11/8/11 Aggregate Year-to-date	$ $ 1,407.00
B. Full name WTYJ Mailing Address	10/30/11	$ 1,224.00
City, State, Zip Code Natchez, MS 39120 Purpose of Disbursement (Optional)	11/8/11 Aggregate Year-to-date	$ $ 1,224.00
C. Full name Addison Hall Designs Mailing Address	10/30/11	$ 1,724.40
City, State, Zip Code Madison, MS Purpose of Disbursement (Optional)	11/8/11 Aggregate Year-to-date	$ $ 1,724.40
D. Full name Natchez Democrat Mailing Address	10/30/11	$ 1,298.75
City, State, Zip Code Purpose of Disbursement (Optional)	11/8/11 Aggregate Year-to-date	$ $ 1,298.75
E. Full name Southwest Broadcasters Mailing Address	10/30/11	$ 125.00
City, State, Zip Code McComb, MS Purpose of Disbursement (Optional)	11/8/11 Aggregate Year-to-date	$ $ 125.00
F. Full name Enterprise Journal Mailing Address	10/30/11	$ 250.00
City, State, Zip Code Purpose of Disbursement (Optional) McComb, MS	11/8/11 Aggregate Year-to-date	$ $ 835.00

Name of Candidate or Committee Bob M. Dearing

Reporting period 10/30/11 through 12/31/11

ITEMIZED DISBURSEMENTS

A. Full name: Copy Cow	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	10/30/11	$ 258.35
City, State, Zip Code: Starkville, MS	11/8/11	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 443.90
B. Full name: KETCO	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	10/30/11	$ 503.83
City, State, Zip Code: Natchez, MS	11/8/11	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 2,628.93
C. Full name: Franklin Advocate	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	10/30/11	$ 130.00
City, State, Zip Code: Meadville, MS	11/15/11	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 130.00
D. Full name: Southern Herald	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	10/30/11	$ 45.00
City, State, Zip Code: Lilaty, MS	11/15/11	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 140.00
E. Full name: Smith Printing	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	10/30/11	$ 1,043.25
City, State, Zip Code	11/8/11	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 1,374.74
F. Full name: Washington Political Group	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	10/30/11	$ 1,167.40
City, State, Zip Code: Washington, DC	11/8/11	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 1,167.40

Name of Candidate or Committee Bob M. Dearing

Reporting period 10/30/11 through 12/31/11

ITEMIZED DISBURSEMENTS

A. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Precinct Coordinator	10/30/11	$ 1,000.00
Mailing Address ~~15 @ $100 each~~	11/8/11	$
City, State, Zip Code		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 1,000.00

B. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Precinct Workers	11/8/11	$ 1,500.00
Mailing Address 15 @ $100 each		
City, State, Zip Code		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 1,500.00

C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Precinct Drivers	11/8/11	$ 1,200.00
Mailing Address 12 @ $100 each		
City, State, Zip Code		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 1,200.00

D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Door-To-Door Coordinator	10/30/11	$ 1,000.00
Mailing Address		
City, State, Zip Code	11/7/11	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 1,000.00

E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Door-To-Door Helpers	10/30/11	$ 800.00
Mailing Address 8 @ $100 each		
City, State, Zip Code	11/7/11	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 800.00

F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Sign Coordinator	10/30/11	$ 1,000.00
Mailing Address		
City, State, Zip Code	11/15/11	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 1,000.00

Name of Candidate or Committee Bob M. Dearing

Reporting period 10/30/11 through 12/31/11

ITEMIZED DISBURSEMENTS

	Date (Mo., Day, Year)	Amount of each disbursement this period
A. Full name: Sign Helpers Mailing Address: 15 @ $100 each City, State, Zip Code: Purpose of Disbursement (Optional):	10/30/11 11/7/11	$ 1,500.00 $
	Aggregate Year-to-date	$
B. Full name: GAS - AUTO Mailing Address: City, State, Zip Code: Purpose of Disbursement (Optional):	10/30/11 12/31/11	$ 3,689.64 $
	Aggregate Year-to-date	$ 8,821.45
C. Full name: AT&T Mailing Address: City, State, Zip Code: Purpose of Disbursement (Optional):	10/30/11 12/31/11	$ 1,027.20 $
	Aggregate Year-to-date	$ 3,481.65
D. Full name: Mailing Address: Larry Waltman City, State, Zip Code: 730 Davis Crossing Road Purpose of Disbursement (Optional): Canton, MS 39180	10/30/11 / /	$ 120.00 $
	Aggregate Year-to-date	$ 1,812.00
E. Full name: Daniel Thomas 3/17 Mailing Address: P.O. Box 2223 City, State, Zip Code: Madison, MS 39110 Purpose of Disbursement (Optional):	10/30/11 11/7/11	$ 145.00 $
	Aggregate Year-to-date	$ 2,270.25
F. Full name: Home Depot Mailing Address: City, State, Zip Code: Vaiden, MS Purpose of Disbursement (Optional):	10/30/11 / /	$ 208.00 $
	Aggregate Year-to-date	$ 208.00

Name of Candidate or Committee Bob M. Dearing

Reporting period 10/32/11 through 12/31/11

ITEMIZED DISBURSEMENTS

	Date (Mo., Day, Year)	Amount of each disbursement this period
A. Full name: Smith Bell Consultants Mailing Address: City, State, Zip Code: Fayette, MS Purpose of Disbursement (Optional):	10/31/11 11/7/11 Aggregate Year-to-date	$ 800.00 $ $ 800.00
B. Full name: Storage Mailing Address: City, State, Zip Code: Canton, MS Purpose of Disbursement (Optional):	10/31/11 12/31/11 Aggregate Year-to-date	$ 600.00 $ $ 600.00
C. Full name: Gil Ford Photo Mailing Address: ~~Gil Ford Photo~~ City, State, Zip Code: Jackson, MS Purpose of Disbursement (Optional):	10/30/11 __/__/__ Aggregate Year-to-date	$ 425.00 $ $
D. Full name: Fernandez Creative Mailing Address: ~~Jackson, MS~~ City, State, Zip Code: Jackson, MS Purpose of Disbursement (Optional):	10/30/11 __/__/__ Aggregate Year-to-date	$ 487.56 $ $
E. Full name: Jeffrey Marshall Mailing Address: ~~Jeffrey Marshall~~ City, State, Zip Code: Jackson, MS Purpose of Disbursement (Optional):	10/10/11 __/__/__ Aggregate Year-to-date	$ 350.00 $ $ 350.00
F. Full name: ~~Misc~~ Motel Mailing Address: 8 @ $80.00 City, State, Zip Code: McComb, MS Purpose of Disbursement (Optional):	10/30/11 11/6/11 Aggregate Year-to-date	$ 640.00 $ $ 640.00

Name of Candidate or Committee Bob M. Dearing

Reporting period 10/30/11 through 12/31/11

ITEMIZED DISBURSEMENTS

A. Full name: Election Night Party	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	11/8/11	$ 1,150.50
City, State, Zip Code: Natchez, MS	__/__/__	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 1,150.50

B. Full name: MISC	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	10/30/11	$ 256.09
City, State, Zip Code	11/8/11	$
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	$