

2012 ELECTION CYCLE


 Political Committee
REPORT OF RECEIPTS AND DISBURSEMENTS
 2012 Election



Name of Committee The Committee to Elect Josiah Dennis
 Address PO Box 1960, Oxford, MS 38655 County Lafayette
 Telephone 662-234-0703 Fax 662-234-0704
 Treasurer Colby Carmichael Email Address ccarmichael@devoecarr.com

- Check here if above is different from previous report
- May 10, 2012 Periodic Report (January 1, 2012, through April 30, 2012).....Mandatory
 - June 8, 2012 Periodic Report (May 1, 2012, through May 31, 2012).....Mandatory
 - July 10, 2012 Periodic Report (June 1, 2012, through June 30, 2012)..... Mandatory
 - October 10, 2012 Periodic Report (July 1, 2012 through September 30, 2012).....Mandatory
 - October 30, 2012 Pre-Election Report (October 1, 2012, through October 27, 2012).....Mandatory
 - November 20, 2012 Pre-Election Report (October 28, 2012, through November 17, 2012).....Runoff Candidates only
 - January 10, 2013 Periodic Report (October 28, 2012, through December 31, 2012).....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.

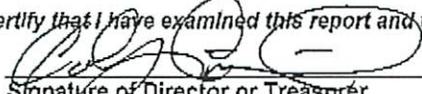
(2) Until a Candidate files a Termination Report, annual and periodic reports must still be filed in accordance with Miss. Code Ann. § 23-15-807 (b) (II) and (III).

(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 | \$ 11,250.00 +\$ 652.00 | \$ 11,902.00 | \$ 11,902.00 |
| Total amount of disbursements | \$ 10,000.00 +\$ 242.06 | \$ 10,242.06 | \$ 10,242.06 |
| Total amount of cash on hand | | \$ 1,659.94 | |

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


 Signature of Director or Treasurer May 10, 2012
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 138, Jackson, MS 39206 or fax to 601-576-2545
 2. Candidates for countywide and county district offices should return forms to their county Circuit Clerk.

Name of Candidate or Committee The Committee to Elect Josiah Dennis Coleman

Reporting period January 1, 2012 through April 30, 2012

ITEMIZED RECEIPTS

| A. Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> | Date (Mo., Day, Year) | Amount of each receipt this period |
|--|---------------------------|--|
| Other (please specify) _____ | | |
| Full name <u>BankPlus PAC</u> | <u>03 / 19 / 12</u> | \$ <u>5,000.00</u> |
| Mailing Address <u>1068 Highland colony Pkwy</u> | <u> / / </u> | \$ _____ |
| City, State, Zip Code <u>Ridgeland, MS 39157</u> | <u> / / </u> | \$ _____ |
| Name of Employer (Required) <u>N/A</u> | <u> / / </u> | \$ _____ |
| Occupation (Required) <u>N/A</u> | Aggregate year-to-date | \$ <u>5,000.00</u> |
| B. Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> | | |
| Other (please specify) _____ | | |
| Full name <u>Mississippi Physicians PAC</u> | <u>03 / 29 / 12</u> | \$ <u>5,000.00</u> |
| Mailing Address <u>404 West Parkway Place</u> | <u> / / </u> | \$ _____ |
| City, State, Zip Code <u>Ridgeland, MS 39157</u> | <u> / / </u> | \$ _____ |
| Name of Employer (Required) <u>N/A</u> | <u> / / </u> | \$ _____ |
| Occupation (Required) <u>N/A</u> | Aggregate year-to-date | \$ <u>5,000.00</u> |
| C. Source <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> | | |
| Other (please specify) _____ | | |
| Full name <u>Heath Hall</u> | <u>03 / 26 / 12</u> | \$ <u>1,000.00</u> |
| Mailing Address <u>PO Box 2223</u> | <u> / / </u> | \$ _____ |
| City, State, Zip Code <u>Madison, MS 39110</u> | <u> / / </u> | \$ _____ |
| Name of Employer (Required) <u>Strategic Marketing Group, LLC</u> | <u> / / </u> | \$ _____ |
| Occupation (Required) <u>President</u> | Aggregate year-to-date | \$ <u>1,000.00</u> |
| D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> | | |
| Other (please specify) _____ | | |
| Full name <u>George G. Patterson</u> | <u>03 / 29 / 12</u> | \$ <u>250.00</u> |
| Mailing Address <u>PO Box 1035</u> | <u> / / </u> | \$ _____ |
| City, State, Zip Code <u>Oxford, MS 38655</u> | <u> / / </u> | \$ _____ |
| Name of Employer (Required) <u>City of Oxford</u> | <u> / / </u> | \$ _____ |
| Occupation (Required) <u>Mayor</u> | Aggregate year-to-date | \$ <u>250.00</u> |

Name of Candidate or Committee The Committee to Elect Josiah Dennis Coleman
 Reporting period January 1, 2012 through April 30, 2012

ITEMIZED DISBURSEMENTS

| | | |
|---|---|--|
| A. Full name Strategic Marketing Group, LLC | Date (Mo., Day, Year) | Amount of each disbursement this period |
| Mailing Address PO Box 2223 | 03 / 17 / 12 | \$ 5,000.00 |
| City, State, Zip Code Madison, MS 39110 | 04 / 16 / 12 | \$ 5,000.00 |
| Purpose of Disbursement (Optional) | Aggregate Year-to-date | \$ 10,000.00 |
| 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 | \$ |