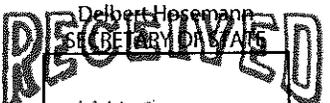


  
**Political Committee**  
**REPORT OF RECEIPTS AND DISBURSEMENTS**  
**2011 Elections**

  
 Delbert Hosemann  
 SECRETARY OF STATE  
 JAN 09 2012  
 Secretary of State  
 Capitol Office  
 DATE STAMP

Name of Committee The Committee to Re-elect G. Scott Bounds  
 Address PO Box 512, Phila, MS 39350 County Neshoba  
 Telephone 601-656-1765 Fax 601-482-0111  
 Treasurer Brad M. Bounds Email Address CSbounds@bellsouth.net

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
  - 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.

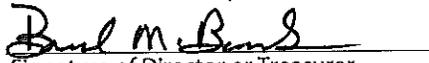
(2) Until a Candidate files a Termination Report, annual and periodic reports must still be filed in accordance with Miss. Code Ann. § 23-15-807 (b) (ii) and (iii).

(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	\$ -0-	+	\$ 400 <sup>00</sup>	=	\$ 400 <sup>00</sup>	\$ 5,599 <sup>68</sup>
Total amount of disbursements	\$ 150 <sup>00</sup>	+	\$ 545.42	=	\$ 695.42	\$ 8,222 <sup>90</sup>
Total amount of cash on hand	\$ 43,318.55					

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

1-9-2012  
 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.

Name of Candidate or Committee The Committee to Re-elect C. Scott Bonds  
 Reporting period Oct 30, 2011 through Dec 31, 2011

## ITEMIZED DISBURSEMENTS

A. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Golf Classics</u>		
Mailing Address	<u>5/28/11</u>	\$ <u>150.00</u>
<u>PO Box 850</u>		
City, State, Zip Code	<u>12/2/11</u>	\$ <u>150.00</u>
<u>Mc Minnville, TN 37111</u>		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>300.00</u>
<u>Signage - Advantag</u>		
B. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u>  /  /  </u>	\$
City, State, Zip Code	<u>  /  /  </u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u>  /  /  </u>	\$
City, State, Zip Code	<u>  /  /  </u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u>  /  /  </u>	\$
City, State, Zip Code	<u>  /  /  </u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u>  /  /  </u>	\$
City, State, Zip Code	<u>  /  /  </u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u>  /  /  </u>	\$
City, State, Zip Code	<u>  /  /  </u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$