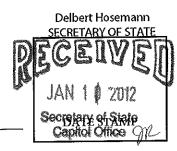
REPORT OF RE



Name of Candidate	Elton Gregory "Greg" Snowden			Capitol Office Office
	Avenue, Meridian, Mississippi 39305	County _	Lauderdale	Reduing Autor Alter
Telephone 601-693	3-5700	Fax60	601-693-5040	
Office Sought Miss.	House of Representatives, Dist. 83	_ Political Party	Republican	
Office Joughice		Email Address	area@areasi	snowden.com
Check here if abo	ove is different from previous report			
May 10, 2011 Perio	dic Report (January 1, 2011, through April	, 30, 2011)		Mandatory
	odic Report (May 1, 2011, through May 31,			
	ic Report (June 1, 2011, through June 30, 2			
	lection Report (July 1, 2011, through July 2			
	e-Election Report (July 24, 2011, through A			
 ·	eriodic Report (July 1, 2011, through Septe			
	Pre-Election Report (October 1, 2011, thro			
	1 Pre-Election Report (October 30, 2011, ti			
	eriodic Report (October 1, 2011, through [
 Termination Report	t (Candidate will no longer accept contribuures and has no outstanding campaign deb	utions or make		
	IMPORT	<u> </u>		
(1) Pre-Election report shall submit a repo	ts are mandatory, even if no contributions or ort indicating "0" (Zero) for total amount of	or expenditures h	ave occurred. I utions and expe	In such case, the candidate enditures 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

Itemi	zed +	Non-Itemized	= This Period	Calendar Year-To-Date
Total amount of contributions \$ 250.0	00 +\$	750.00	\$ 1,000.00	\$ 45,140.00
Total amount of disbursements \$ 13,44	0.18 +\$	708.69	\$ 14,148.87	\$ 48,176.15
Total amount of cash on hand			\$ 12,224.59	

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 Candidate

Authority: Refer to Miss. Code Ang. §23,15,601 (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	Iton Gregory "Greg" Snowden	
Reporting period November 1, 2011	through December 31, 2011	

ITEMIZED RECEIPTS

A. Source: Corporation PAC Individual Loan	Date (Mo., Day, Year)	Amount of each receipt
Other (please specify)	(Mo., Day, Tear)	this period
Full name Dr. Gus A. "Sonny" Rush, III	<u> </u>	\$ 250,00
Mailing Address	\Box . \Box . \Box	
Post Office Box 2147		\$
City, State, Zip Code		\$
Meridian, Mississippi 39302-2147	<u> </u>	P
Name of Employer (Required) Physician, self-employed (Rush Medical Group)		\$
Occupation (Required) Physician/surgeon	Aggregate year–to-date	\$ 250.00
B. Source: Corporation PAC Individual Loan	Date	Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name		\$
	<u> </u>	Y L
Mailing Address		\$ [
City, State, Zip Code		\$ [
	<u> </u>	Ψ [
Name of Employer (Required)	$\square / \square / \square$	\$
Occupation (Required)	Aggregate	
	year–to-date	\$
	year–to-date	
Other (please specify)		Amount of each receipt this period
C. Source Corporation PAC Individual Loan	year–to-date Date	Amount of each receipt
Other (please specify)	year–to-date Date	Amount of each receipt this period
Other (please specify) Full name Mailing Address	year–to-date Date	Amount of each receipt this period
Other (please specify) Full name Mailing Address	year–to-date Date	Amount of each receipt this period
Other (please specify) Other (please specify) Full name Mailing Address City, State, Zip Code	year-to-date Date (Mo., Day, Year) / / / /	Amount of each receipt this period
Other (please specify) Other (please specify) Full name Mailing Address City, State, Zip Code	year–to-date Date	Amount of each receipt this period
Other (please specify) Full name Mailing Address	year-to-date Date (Mo., Day, Year) / / / /	Amount of each receipt this period \$ \$ \$ \$ \$ \$ \$ \$
Other (please specify) Full name Mailing Address City, State, Zip Code	year-to-date Date (Mo., Day, Year) / / / / / / / / / Aggregate year-to-date	Amount of each receipt this period \$
Other (please specify) Full name Mailing Address City, State, Zip Code Name of Employer (Required)	year-to-date Date (Mo., Day, Year) / / / / / / / Aggregate	Amount of each receipt this period \$
Other (please specify) Full name Mailing Address City, State, Zip Code Name of Employer (Required) Occupation (Required) O. Source: Corporation PAC Individual Loan Other (please specify)	year-to-date Date (Mo., Day, Year) / / / / / / / Aggregate year-to-date Date	Amount of each receipt this period \$
Other (please specify) Full name Mailing Address City, State, Zip Code Name of Employer (Required) Occupation (Required) Occupation (Required) Other (please specify) Full name	year-to-date Date (Mo., Day, Year) / / / / / / / Aggregate year-to-date Date	Amount of each receipt this period \$
Other (please specify) Full name Mailing Address City, State, Zip Code Name of Employer (Required) Occupation (Required) Occupation (Required) Other (please specify) Full name	year-to-date Date (Mo., Day, Year) / / / / / / / Aggregate year-to-date Date	Amount of each receipt this period \$
Other (please specify) Full name Mailing Address City, State, Zip Code Name of Employer (Required) Occupation (Required) O. Source: Corporation PAC Individual Loan Other (please specify)	year-to-date Date (Mo., Day, Year) / / / / / / / Aggregate year-to-date Date	Amount of each receipt this period \$
Other (please specify) Full name Mailing Address City, State, Zip Code Name of Employer (Required) Occupation (Required) Other (please specify) Other (please specify) Full name Mailing Address	year-to-date Date (Mo., Day, Year) / / / / / / / Aggregate year-to-date Date	Amount of each receipt this period \$
Other (please specify) Full name Mailing Address City, State, Zip Code Name of Employer (Required) Occupation (Required) Other (please specify) Full name Mailing Address City, State, Zip Code	year-to-date Date (Mo., Day, Year) / / / / / / / Aggregate year-to-date Date	Amount of each receipt this period \$

through December 31, 2011

ITEMIZED DISBURSEMENTS

A. Full name	Date	Amount of each
Aaron Williams	(Mo., Day, Year)	disbursement this period
Mailing Address	11 / 1 / 11	S 1,500.00
1428 Mississippi Drive	$\frac{11}{2} / \frac{1}{2} / \frac{11}{2}$	\$ 1,500.00
City, State, Zip Code	11 , 9 , 11	\$ 2,000.00
Waynesboro, Mississippi 39367	11 / 9 / 11	3 2,000.00
Purpose of Disbursement (Optional)	Aggregate	\$ 6,750.00
Campaign assistance and organization	Year-to-date	\$ 0,730.00
B. Full name	Date	Amount of each
Clarke County Tribune	(Mo., Day, Year)	disbursement this period
Mailing Address	11 , 1 , 11	
101 Main Street	$\frac{11}{1} / \frac{1}{1} / \frac{11}{1}$	\$ 672.00
City, State, Zip Code		
Quitman, Mississippi 39355	''-	S
Purpose of Disbursement (Optional)	Aggregate	
Printed campaign advertisement	Year-to-date	\$ 672.00
C. Full name	Date	Amount of each
Winning Edge Communications	(Mo., Day, Year)	disbursement this period
Mailing Address	11 / 1 / 11	\$ 1,610.77
Post Office Box 13643	11 / 1 / 11	1,010.77
City, State, Zip Code	11 /2 / 11	\$ 1,610.77
Jackson, Mississippi 39236-3643	\ \frac{\frac{1}{2}}{2} \frac{1}{2} \frac{1}{2}	\$ 1,610.77
Purpose of Disbursement (Optional)	Aggregate	\$ "D" below
See "D" below	Year-to-date	2 D below
D. Full name	Date	Amount of each
Winning Edge Communications	(Mo., Day, Year)	disbursement this period
Mailing Address	11 , 4 , 11	6 000 00
Post Office Box 13643	$\frac{11}{2} / \frac{4}{2} / \frac{11}{2}$	\$ 300.00
City, State, Zip Code	, ,	_
Jackson, Mississippi 39236-3643	//	\$
Purpose of Disbursement (Optional)	Aggregate	6 7 107 06
Direct mail advertising	Year-to-date	\$ 7,137.36
E. Full name	Date	Amount of each
The Meridian Star	(Mo., Day, Year)	disbursement this period
Mailing Address	11 . 2 . 11	6
Post Office Box 1591	$\frac{11}{2} / \frac{2}{2} / \frac{11}{2}$	\$ 2,197.50
City, State, Zip Code	, ,	c
Meridian, Mississippi 39302-1591	''-	S
Purpose of Disbursement (Optional)	Aggregate	6 00000
Drinted assumption advantagement	Year-to-date	\$ 3,097.50
Printed campaign advertisement		Amount of each
F. Full name	Date	
	Date (Mo., Day, Year)	disbursement this period
F. Full name	(Mo., Day, Year)	disbursement this period
F. Full name WMOX Radio	B	
F. Full name WMOX Radio Mailing Address	(Mo., Day, Year)	\$ 200.00
F. Full name WMOX Radio Mailing Address Post Office Box 5184	(Mo., Day, Year)	disbursement this period
F. Full name WMOX Radio Mailing Address Post Office Box 5184 City, State, Zip Code	(Mo., Day, Year)	\$ 200.00

Reporting period November 1, 2011

through December 31, 2011

ITEMIZED DISBURSEMENTS

A. Full name		
David White	Date (Ma. Day Vaar)	Amount of each
Mailing Address	(Mo., Day, Year)	disbursement this period
2421 46th Street	11 / 3 / 11	\$ 99.14
City, State, Zip Code		
Meridian, Mississippi 39305	<u>11 / 7 / 11</u>	\$ 300.00
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 699.14
Campaign call center organization/management/supervision B. Full name	Year-to-date	
	Date	Amount of each
Amanda Cole	(Mo., Day, Year)	disbursement this period
Mailing Address	11 / 7 / 11	S 150.00
2641 Pickard Campbell Road		•
City, State, Zip Code	, ,	S
Meridian, Mississippi 39301		9
Purpose of Disbursement (Optional)	Aggregate	S 250.00
Call center volunteer	Year-to-date	
C. Full name	Date	Amount of each
Teresa Parten	(Mo., Day, Year)	disbursement this period
Mailing Address	11 /7 / 11	\$ 150.00
2269 County Road 660	11 / 7 / 11	\$ 150.00
City, State, Zip Code	, ,	e
Quitman, Mississippi 39355	-/-/-	\$
Purpose of Disbursement (Optional)	Aggregate	6 000 00
Call center volunteer	Year-to-date	\$ 300.00
D. Full name	Date	Amount of each
Erin Hayes	(Mo., Day, Year)	disbursement this period
Mailing Address	11 . 7 . 11	
3606 50th Street	11 / 7 / 11	\$ 150.00
City, State, Zip Code		
Meridian, Mississippi 39305		\$
Purpose of Disbursement (Optional)	Aggregate	
Call center volunteer	Year-to-date	\$ 300.00
E. Full name	Date	Amount of each
April Morris	(Mo., Day, Year)	disbursement this period
Mailing Address		
211 58th Avenue	$\frac{11}{2} / \frac{7}{2} / \frac{11}{2}$	S 150.00
City, State, Zip Code		
Meridian, Mississippi 39307	//	\$
Purpose of Disbursement (Optional)		
Call center volunteer	Aggregate Year-to-date	\$ 300.00
F. Full name		
Liesa Tew	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	(NO., Day, Tear)	aispaisement mis henon
_	<u>11 / 7 / 11</u>	\$ 150,00
8790 Old Highway 19 South		
City, State, Zip Code	/ /	\$
Collinsville, Mississippi 39325	<u> </u>	
Purpose of Disbursement (Optional) Call center volunteer	Aggregate Year-to-date	\$ 300.00
	, , , , , , , , , , , , , , , , , , , ,	

through December 31, 2011

ITEMIZED DISBURSEMENTS

A. Full name		
Michael White	Date	Amount of each
	(Mo., Day, Year)	disbursement this period
Mailing Address 2426 46th Street	11 /7 / 11	§ 100.00
City, State, Zip Code		
Meridian, Mississippi 39305	1 1	s
Purpose of Disbursement (Optional) Call center volunteer	Aggregate	\$ 200.00
B. Full name	Year-to-date	
	Date	Amount of each
Jennifer Parker	(Mo., Day, Year)	disbursement this period
Mailing Address	11 / 7 / 11	S 150.00
28 County Road 514		~
City, State, Zip Code	//	\$
Meridian, Mississippi 39301		
Purpose of Disbursement (Optional)	Aggregate	S 250.00
Call center volunteer	Year-to-date	
C. Full name	Date	Amount of each
Brenda Alexander	(Mo., Day, Year)	disbursement this period
Mailing Address	11 / 7 / 11	\$ 100.00
2005 43rd Avenue, Apt. C		
City, State, Zip Code	1 1	S
Meridian, Mississippi 39307		3
Purpose of Disbursement (Optional)	Aggregate	\$ 250.00
Call center volunteer	Year-to-date	\$ 250.00
D. Full name	Date	Amount of each
Barbara Taylor	(Mo., Day, Year)	disbursement this period
Mailing Address	11 , 7 , 11	S 50.00
12175 Fire Tower Road	11 / 7 / 11	S 50.00
City, State, Zip Code	, ,	_
Collinsville, Mississippi 39325	_'_'	S
Purpose of Disbursement (Optional)	Aggregate	\$ 200.00
Call center volunteer	Year-to-date	\$ 200.00
E. Full name	Date	Amount of each
Ken Williams	(Mo., Day, Year)	disbursement this period
Mailing Address	11 , 10 , 11	0
506 Azalea Drive	11 / 19 / 11	\$ 300.00
City, State, Zip Code		0
Waynesboro, Mississippi 39367	//	S
Purpose of Disbursement (Optional)	Aggregate	S 700 0F
Campaign signage placement/removal/storage	Year-to-date	\$ 700.05
F. Full name	Date	Amount of each
Stevie L. Fielder	(Mo., Day, Year)	disbursement this period
Mailing Address	-	
6496 Confederate Drive	11 / 19 / 11	\$ 500.00
City, State, Zip Code		§ 1,000.00
City, State, Zip Code Marion, Mississippi 39342	11 / 21 / 11	3 1,000.00
·	Aggregate	\$ 2,650.00