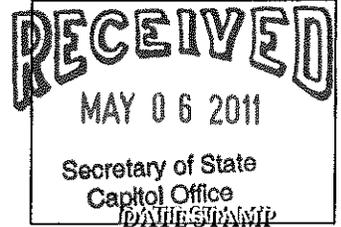




Candidate
REPORT OF RECEIPTS AND DISBURSEMENTS
2011 Election



Name of Candidate J. Shawn Walley
 Address 2000 Herndon RD Hakesville, MS 39451 Greene County
 Telephone Work 601-606-5603 Home _____ Fax _____
 Contact Name Shawn Walley Email Address JSWALLEY@TDS.NET
 Office Sought House of Representatives D 105 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
 - 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	\$ 0 +\$ 0	\$ 0	\$ 0
Total amount of disbursements	\$ 350 +\$ 848.40	\$ 1198.40	\$ 1198.40
Total amount of cash on hand		\$ 2883.52	

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

J. Shawn Walley
Signature of Candidate

5-6-11
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. §§ 23-15-814 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.

Name of Candidate or Committee J. Shawn Welley

Reporting period January 1, 2011 through April 30, 2011

ITEMIZED DISBURSEMENTS

A. Full name <u>Greene County Herald</u>	Date (Mo., Day, Year) <u>1/17/11</u>	Amount of each disbursement this period \$ <u>100.⁰⁰</u>
Mailing Address <u>P.O. Box 220</u>	<u>1/17/11</u>	\$ <u>250.⁰⁰</u>
City, State, Zip Code <u>Leakesville MS 39451</u>	<u>1/17/11</u>	\$ <u>350.⁰⁰</u>
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
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	\$