2011 ELECTION CYCLE

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Campaign Finance
Secretary of State
Delbert Hosemann
SECRETARY OF STATE

Candidate
REPORT OF RECEIPTS AND DISBURSEMENTS
2011 Elections

Name of Candidate: Joel Gill
Address: PO Box 338 Pickens, MS 39146 County: Holmes
Telephone: 601-613-1235 Fax: 662-468-2175
Office Sought: Commissioner of Agriculture and Commerce Political Party: Democratic
Email Address: joelpickens@aol.com

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
X **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	$ 1,500.00	+$	1,131.10		$ 2,631.10	$ 57,502.07
Total amount of disbursements	$ 13,835.58	+$	200.00		$ 14,035.58	$ 57,344.71
Total amount of cash on hand					$ 157.36	

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: [signature] Date: 1-09-11

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.

SOS 07-11

Name of Candidate or Committee: Joel Gill

Reporting period: 10-30-2011 through 12-31-2011

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Milton Parish	11 / 01 / 11	$ 300.00
Mailing Address: Hwy 17 N	/ /	$
City, State, Zip Code: Lexinton, MS 39095	/ /	$
Name of Employer (Required): Self	/ /	$
Occupation (Required): Farmer	Aggregate year-to-date	$ 300.00

B. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Louis Clifford	11 / 01 / 11	$ 250.00
Mailing Address: Box 1099	/ /	$
City, State, Zip Code: Jackson, MS 39205	/ /	$
Name of Employer (Required): Clifford Law Firm	/ /	$
Occupation (Required): Attorney	Aggregate year-to-date	$ 500.00

C. Source ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Scott Petroleum	11 / 01 / 11	$ 250.00
Mailing Address: 102 Main	/ /	$
City, State, Zip Code: Itta Bena, MS 38941	/ /	$
Name of Employer (Required):	/ /	$
Occupation (Required):	Aggregate year-to-date	$ 250.00

D. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify): County Party	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Harrison Co. Democratic Executive Committee	11 / 07 / 11	$ 700.00
Mailing Address:	/ /	$
City, State, Zip Code: Gulfport, MS	/ /	$
Name of Employer (Required):	/ /	$
Occupation (Required):	Aggregate year-to-date	$ 1,200.00

Name of Candidate or Committee Joel Gill

Reporting period 10-30-2011 through 12-31-2011

ITEMIZED DISBURSEMENTS

A. Full name WLBT	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address Jefferson St.	11 / 01 / 11	$ 2932.50
City, State, Zip Code Jackson, MS	/ /	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 2932.50
B. Full name WDAM	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
Mailing Address	11 / 01 / 11	$ 4,455.00
City, State, Zip Code Hattiesburg, MS	/ /	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 4,455.00
C. Full name Clear Channel Radio	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
Mailing Address Beasley Rd.	11 / 01 / 11	$ 1,843.65
City, State, Zip Code Jackson, MS	/ /	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 2,702.15
D. Full name WRQO	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
Mailing Address Monticello St.	11 / 01 / 11	$ 395.00
City, State, Zip Code Brookhaven, MS	/ /	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 645.00
E. Full name Southwest Broadcasting	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
Mailing Address	11 / 01 / 11	$ 600.00
City, State, Zip Code McComb, MS	/ /	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 600.00
F. Full name Urban Radio	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
Mailing Address	11 / 02 / 11	$ 862.75
City, State, Zip Code Jackson, MS	/ /	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 862.75

Name of Candidate or Committee Joel Gill

Reporting period 10-30-2011 through 12-31-2011

ITEMIZED DISBURSEMENTS

A. Full name WKRA	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	11 / 03 / 11	$ 300.00
City, State, Zip Code Jackson, MS	/ /	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 300.00
B. Full name Stacy Carter	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
Mailing Address	11 / 08 / 11	$ 500.00
City, State, Zip Code New Albany, MS	/ /	$
Purpose of Disbursement (Optional) Reimbursement	Aggregate Year-to-date	$ 1,000.00
C. Full name Joel Gill	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
Mailing Address PO Box 338	12 / 05 / 11	$ 1,946.68
City, State, Zip Code Pickens, MS 39146	/ /	$
Purpose of Disbursement (Optional) repay loan / balance of loan converted to donation	Aggregate Year-to-date	$ 1,946.68
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	$