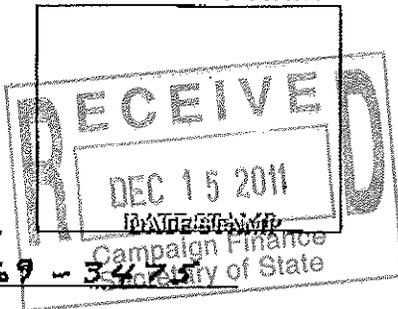


2011 ELECTION CYCLE

Delbert Hosemann
SECRETARY OF STATE



Candidate
REPORT OF RECEIPTS AND DISBURSEMENTS
2011 Election



Name of Candidate MANLY BARTON
Address 2905 PECAN RIDGE, MOSS POINT, MS 39562 County JACKSON
Telephone Work 228-769-3403 Home 228-588-2763 Fax 228-769-3475
Contact Name MANLY BARTON Email Address MGB2763@CABLEONE.NET
Office Sought MS HOUSE DISTRICT 109 Political Party REPUBLICAN

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

Required to terminate reporting obligations

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	\$ 800.00 + \$ 0	\$ 800.00	\$ 35300.00
Total amount of disbursements	\$ 600.00 + \$ 1128.87	\$ 1728.87	\$ 14898.59
Total amount of cash on hand		\$ 20401.41	

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

Manly B. Barton
Signature of Candidate

12/15/11
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. §§ 23-15-811 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 136, Jackson, MS 39209 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 MANLY BARTON

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

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>AT&T MS PAC</u>	<u>11/5/11</u>	\$ <u>300.00</u>
Mailing Address <u>175 E. CAPITAL ST. # 703</u>	__/__/__	\$
City, State, Zip Code <u>JACKSON, MS 39201</u>	__/__/__	\$
Name of Employer (Required) _____	__/__/__	\$
Occupation (Required) _____	Aggregate year-to-date	\$ <u>300.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>JAMES BROADDUS</u>	<u>11/15/11</u>	\$ <u>500.00</u>
Mailing Address <u>605 RAINBOW COVR</u>	__/__/__	\$
City, State, Zip Code <u>AUSTIN, TX 78746</u>	__/__/__	\$
Name of Employer (Required) <u>BROADDUS & ASSOCIATES</u>	__/__/__	\$
Occupation (Required) <u>OWNER</u>	Aggregate year-to-date	\$ <u>500.00</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name _____	__/__/__	\$
Mailing Address _____	__/__/__	\$
City, State, Zip Code _____	__/__/__	\$
Name of Employer (Required) _____	__/__/__	\$
Occupation (Required) _____	Aggregate year-to-date	\$
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name _____	__/__/__	\$
Mailing Address _____	__/__/__	\$
City, State, Zip Code _____	__/__/__	\$
Name of Employer (Required) _____	__/__/__	\$
Occupation (Required) _____	Aggregate year-to-date	\$

Name of Candidate or Committee MANLY BARTON
 Reporting period 10/30/2011 through 12/31/11

ITEMIZED DISBURSEMENTS

A. Full name <u>MANLY BARTON</u>	Date (Mo., Day, Year) <u>11/14/11</u>	Amount of each disbursement this period \$ <u>600.00</u>
Mailing Address		\$
City, State, Zip Code	<u> / / </u>	\$
Purpose of Disbursement (Optional) <u>REIMBURSEMENT</u>	Aggregate Year-to-date	\$ <u>600.00</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	\$