



Candidate
REPORT OF RECEIPTS AND DISBURSEMENTS
2011 Elections



Name of Candidate Randall Patterson
 Address 1352 Kensington Dr. Biloxi, Harrison
 Telephone 228-348-2170 Fax 228-435-4404
 Office Sought House of Rep Political Party Democrat
 Email Address rpatterson115@gmail.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
- 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	\$ 500.00	+		=	\$ 500.00	\$ 81,684.00
Total amount of disbursements	\$ 2,438.01	+		=	\$ 2,438.01	\$ 81,325.63
Total amount of cash on hand				=	\$ 10,597.58	

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

Randall H. Patterson
 Signature of Candidate

10 JAN. 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 Rep Randall Patterson
 Reporting period Nov 1 through Dec 31

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>MS Sierra Club PAC</u>	<u>11/12/11</u>	\$ <u>500.00</u>
Mailing Address <u>P.O. 4335</u>	□ / □ / □	\$ _____
City, State, Zip Code <u>Jackson, MS 39216</u>	□ / □ / □	\$ _____
Name of Employer (Required) _____	□ / □ / □	\$ _____
Occupation (Required) _____	Aggregate year-to-date	\$ _____
B. 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	\$ _____
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 Randall Patterson
 Reporting period Nov 1 through Dec 31

ITEMIZED DISBURSEMENTS

A. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Zata / 3 Consulting</u>	<u>11 / 21 / 11</u>	<u>\$ 1,500.00</u>
Mailing Address <u>P.O. Box 4992</u>		\$
City, State, Zip Code <u>Jackson, MS</u>	<u>__ / __ / __</u>	\$
Purpose of Disbursement (Optional) <u>personal mailouts</u>	Aggregate Year-to-date	\$
B. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>French Club Fleur Delis Society</u>	<u>11 / 8 / 11</u>	<u>\$ 465.00</u>
Mailing Address <u>182 Howard Ave</u>		\$
City, State, Zip Code <u>Biloxi, MS 39536</u>	<u>__ / __ / __</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>U.S. Food</u>	<u>11 / 17 / 11</u>	<u>\$ 311.45</u>
Mailing Address <u>1125 Weems St</u>		\$
City, State, Zip Code <u>Pearl, MS 39208</u>	<u>__ / __ / __</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Burger Burger</u>	<u>11 / 17 / 11</u>	<u>\$ 161.56</u>
Mailing Address <u>1039 Howard Ave</u>		\$
City, State, Zip Code <u>Biloxi, MS 39530</u>	<u>__ / __ / __</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
	<u>__ / __ / __</u>	\$
Mailing Address		\$
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
	<u>__ / __ / __</u>	\$
Mailing Address		\$
City, State, Zip Code	<u>__ / __ / __</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$