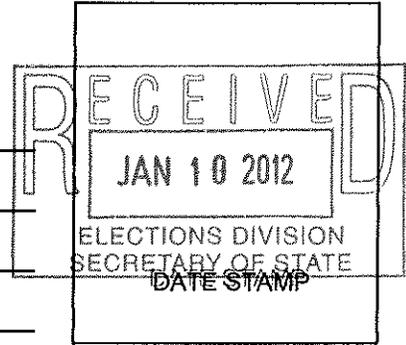


**Candidate
REPORT OF RECEIPTS AND
DISBURSEMENTS**



Name of Candidate Tate Reeves
 Address PO Box 24355 Jackson, MS 39225-4355
 Telephone _____ Home _____ Fax _____
 Contact Name Mr. Terry Reeves Email _____
 Office Sought _____ Political Party _____

Check here if above is different from previous report

TYPE OF 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)..... **Mandator**
- ____ July 8, 2011 Periodic Report (June 1, 2011, through June 30, 2011)..... **Mandatory**
- ____ July 26, 2011 Pre-Election Report (July 24, 2011, through August 13, 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 23, 2011)..... **Mandatory**
- ____ November 22, 2011 Pre-Election Report (October 30, 2011, through November 19, 2011)..... **Mandatory**
- * ____ 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 cases, 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

REPORTED CONTRIBUTIONS AND DISBURSEMENT

	Itemized + Non-Itemized =		This Period	Calendar Year-To-Date
Total amount of contributions	\$248,220.00 +	\$3,925.00	\$252,145.00	\$2,196,862.99
Total amount of disbursements	\$322,363.87 +	\$300.00	\$322,663.87	\$3,419,653.11
Total amount of cash on hand			\$379,702.06	

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

1/10/2012

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

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 Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED RECEIPTS

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>Mr. J.F. Jr Thompson</u>	<u>10/06/2011</u>	<u>\$250.00</u>
Mailing Address <u>4817 15th Place</u>		
City, State, Zip Code <u>Meridian, MS 39305-1736</u>		
Name of Employer (Required) <u>The Thompson Group</u>		
Occupation (Required) <u>Ins. Sales</u>	Aggregate Year-to-date	\$250.00
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>Mr. James McRae</u>	<u>10/05/2011</u>	<u>\$500.00</u>
Mailing Address <u>PO Box 5352</u>		
City, State, Zip Code <u>Meridian, MS 39302-5352</u>		
Name of Employer (Required) <u>MS Industrial Heritage Museum</u>		
Occupation (Required) <u>Soule</u>	Aggregate Year-to-date	\$1,500.00
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>Mr. Craig Dungan</u>	<u>10/07/2011</u>	<u>\$250.00</u>
Mailing Address <u>5401 Westminster Drive</u>		
City, State, Zip Code <u>Meridian, MS 39305-9559</u>		
Name of Employer (Required) <u>Self</u>		
Occupation (Required) <u>Physician</u>	Aggregate Year-to-date	\$250.00
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>Xerox Corporation Political Action Committee</u>	<u>10/11/2011</u>	<u>\$2,500.00</u>
Mailing Address <u>1800 M Street NW Suite 700</u>		
City, State, Zip Code <u>Washington, DC 20036-5802</u>		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,500.00

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED RECEIPTS

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>Mr. Mobashir Solangi</u>	<u>10/10/2011</u>	<u>\$1,000.00</u>
Mailing Address <u>8288 Jennifer Lane</u>		
City, State, Zip Code <u>Long Beach, MS 39560-8200</u>		
Name of Employer (Required) <u>Institute for Marine Mammal Studies</u>		
Occupation (Required) <u>President</u>	Aggregate Year-to-date	\$1,000.00
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>Mr. Robert A. Mandal Jr.</u>	<u>10/10/2011</u>	<u>\$1,000.00</u>
Mailing Address <u>2102 Ward Lane</u>		
City, State, Zip Code <u>Biloxi, MS 39531-2318</u>		
Name of Employer (Required) <u>Mandal Auto Group</u>		
Occupation (Required) <u>President</u>	Aggregate Year-to-date	\$1,000.00
Source: <input checked="" 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 <u>Maxwell-Walker Consulting Group LLC</u>	<u>10/10/2011</u>	<u>\$1,000.00</u>
Mailing Address <u>PO Box 1665</u>		
City, State, Zip Code <u>Pascagoula, MS 39568-1665</u>		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,100.00
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>Mr. Michael Janus</u>	<u>10/10/2011</u>	<u>\$600.00</u>
Mailing Address <u>PO Box 4147</u>		
City, State, Zip Code <u>Biloxi, MS 39535-4147</u>		
Name of Employer (Required) <u>City of Deiberville</u>		
Occupation (Required) <u>City Manager</u>	Aggregate Year-to-date	\$600.00

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED RECEIPTS

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>Mr. Mark Jr Seymour</u>	10/10/2011	\$500.00
Mailing Address <u>2642 Bay Pointe Drive</u>		
City, State, Zip Code <u>Biloxi, MS 39531-2757</u>		
Name of Employer (Required) <u>Seymour Engineering</u>		
Occupation (Required) <u>Engineer</u>	Aggregate Year-to-date	\$500.00
Source: <input checked="" 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 <u>Eley Guild Hardy Architects PA</u>	10/10/2011	\$300.00
Mailing Address <u>1091 Tommy Munro Drive</u>		
City, State, Zip Code <u>Biloxi, MS 39532-2100</u>		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$300.00
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>Mr. Albert Sage</u>	10/11/2011	\$1,000.00
Mailing Address <u>4785 I 55 N Suite 103</u>		
City, State, Zip Code <u>Jackson, MS 39206-5603</u>		
Name of Employer (Required) <u>Sage Advice, Inc.</u>		
Occupation (Required) <u>Owner</u>	Aggregate Year-to-date	\$2,000.00
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>Mr. Troy S. Griffin</u>	10/12/2011	\$5,000.00
Mailing Address <u>PO Box 188</u>		
City, State, Zip Code <u>Braxton, MS 39044-0188</u>		
Name of Employer (Required) <u>Self</u>		
Occupation (Required) <u>CPA</u>	Aggregate Year-to-date	\$5,000.00

Name of Candidate or Committee Friends Of Tate Reeves

Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED RECEIPTS

Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Brian Cain's Beefmasters</u>	10/12/2011	\$5,000.00
Mailing Address <u>PO Box 241</u>		
City, State, Zip Code <u>Wiggins, MS 39577-0241</u>		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$5,000.00
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>Mrs. Avonna Cain</u>	10/12/2011	\$5,000.00
Mailing Address <u>2352 N Country Club Lane</u>		
City, State, Zip Code <u>Biloxi, MS 39532-3200</u>		
Name of Employer (Required) <u>Conner Cain Enterprise</u>		
Occupation (Required) <u>Owner</u>	Aggregate Year-to-date	\$5,000.00
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>Mr. Richard B Tice</u>	10/12/2011	\$5,000.00
Mailing Address <u>PO Box 904</u>		
City, State, Zip Code <u>Gulfport, MS 39502-0904</u>		
Name of Employer (Required) <u>Tice and Association PA</u>		
Occupation (Required) <u>CPA</u>	Aggregate Year-to-date	\$5,000.00
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>Mr. Bennett Hubbard Jr.</u>	10/12/2011	\$5,000.00
Mailing Address <u>PO Box 414</u>		
City, State, Zip Code <u>Magee, MS 39111-0414</u>		
Name of Employer (Required) <u>Advanced Health Care</u>		
Occupation (Required) <u>President</u>	Aggregate Year-to-date	\$5,000.00

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED RECEIPTS

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 Mr. William Jr Yates	10/01/2011	\$10,000.00
Mailing Address 304 Dogwood Street		
City, State, Zip Code Philadelphia, MS 39350-3312		
Name of Employer (Required) The Yates Companies, Inc.		
Occupation (Required) President	Aggregate Year-to-date	\$10,000.00
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 Mr. William Yates	10/01/2011	\$10,000.00
Mailing Address 2104 Ward Lane		
City, State, Zip Code Biloxi, MS 39531-2318		
Name of Employer (Required) The Yates Companies, Inc.		
Occupation (Required) Vice President	Aggregate Year-to-date	\$10,000.00
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 Mr. Jason Voyles	10/01/2011	\$10,000.00
Mailing Address 177 Saint Andrews Drive		
City, State, Zip Code Jackson, MS 39211-2532		
Name of Employer (Required) Spectrum Capital		
Occupation (Required) President	Aggregate Year-to-date	\$10,000.00
Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name Greg Snowden Campaign	10/11/2011	\$250.00
Mailing Address PO Box 3807		
City, State, Zip Code Meridian, MS 39303-3807		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$250.00

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED RECEIPTS

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>Mr. Bruce Martin</u>	10/11/2011	\$1,000.00
Mailing Address <u>PO Box 1729</u>		
City, State, Zip Code <u>Meridian, MS 39302-1729</u>		
Name of Employer (Required) <u>Rosenbaum Insurance</u>		
Occupation (Required) <u>Insurance</u>	Aggregate Year-to-date	\$6,500.00
Source: <input checked="" 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 <u>D & H Construction & Cabinetry, Inc.</u>	10/11/2011	\$250.00
Mailing Address <u>8589 A C Brown Road</u>		
City, State, Zip Code <u>Meridian, MS 39305-9273</u>		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$250.00
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>International Paper Political Action Committee</u>	10/01/2011	\$2,500.00
Mailing Address <u>1101 Pennsylvania Avenue NW Suite 200</u>		
City, State, Zip Code <u>Washington, DC 20004-2514</u>		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,500.00
Source: <input checked="" 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 <u>Verizon</u>	10/07/2011	\$1,000.00
Mailing Address <u>PO Box 2200</u>		
City, State, Zip Code <u>Folsom, CA 95763-2200</u>		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED RECEIPTS

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 Mr. Warren Hood Jr.	10/07/2011	\$1,000.00
Mailing Address PO Box 682		
City, State, Zip Code Hattiesburg, MS 39403-0682		
Name of Employer (Required) Hood Companies		
Occupation (Required) Owner	Aggregate Year-to-date	\$6,500.00
Source: <input checked="" 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 Magee Enterprises Inc	10/13/2011	\$400.00
Mailing Address 105 Millcreek Corners		
City, State, Zip Code Brandon, MS 39047-9011		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$900.00
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 Kathy C Luke	10/13/2011	\$2,500.00
Mailing Address 1862 Hunters Run		
City, State, Zip Code Meridian, MS 39305-9335		
Name of Employer (Required) LPK Architects		
Occupation (Required) Office Manager	Aggregate Year-to-date	\$2,500.00
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 Mr. Jimmy Alexander	10/13/2011	\$2,500.00
Mailing Address PO Box 1265		
City, State, Zip Code Meridian, MS 39302-1265		
Name of Employer (Required) A & B Electric		
Occupation (Required) Owner	Aggregate Year-to-date	\$4,000.00

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED RECEIPTS

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 Mr. Rick Barry	10/11/2011	\$500.00
Mailing Address 5022 5th Place		
City, State, Zip Code Meridian, MS 39305-1919		
Name of Employer (Required) Bordeaux and Jones		
Occupation (Required) Attorney	Aggregate Year-to-date	\$1,000.00
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 Mrs. Mary F. Billups	10/13/2011	\$250.00
Mailing Address 6259 Pinedale Road		
City, State, Zip Code Meridian, MS 39305-3430		
Name of Employer (Required) Homemaker		
Occupation (Required) Homemaker	Aggregate Year-to-date	\$250.00
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 Mrs. Jennifer Jones	10/13/2011	\$250.00
Mailing Address 805 45th Street		
City, State, Zip Code Meridian, MS 39305-2841		
Name of Employer (Required) Homemaker		
Occupation (Required) Homemaker	Aggregate Year-to-date	\$250.00
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 Mr. Hardy Graham	10/14/2011	\$250.00
Mailing Address 900 46th Street		
City, State, Zip Code Meridian, MS 39305-2848		
Name of Employer (Required) Meridian Coke		
Occupation (Required) CEO	Aggregate Year-to-date	\$500.00

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED RECEIPTS

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>Angela Majure</u>	10/11/2011	\$250.00
Mailing Address <u>425 Windover Circle</u>		
City, State, Zip Code <u>Meridian, MS 39305-2039</u>		
Name of Employer (Required) <u>Univ. Alabama Meridian/ E. Mississippi Alumni Ass</u>		
Occupation (Required) <u>Vice President</u>	Aggregate Year-to-date	\$250.00
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>Mr. James R. Peavy</u>	10/13/2011	\$500.00
Mailing Address <u>2000 Front Street Suite 407</u>		
City, State, Zip Code <u>Meridian, MS 39301-5157</u>		
Name of Employer (Required) <u>information requested</u>		
Occupation (Required) <u>information requested</u>	Aggregate Year-to-date	\$500.00
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>Mrs. Jamie Cater</u>	10/13/2011	\$500.00
Mailing Address <u>906 Beechwood Drive</u>		
City, State, Zip Code <u>Meridian, MS 39305-2857</u>		
Name of Employer (Required) <u>Cater Market</u>		
Occupation (Required) <u>Physician</u>	Aggregate Year-to-date	\$500.00
Source: <input checked="" 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 <u>Vital Care Of Meridian</u>	10/13/2011	\$1,000.00
Mailing Address <u>1501 23rd Avenue</u>		
City, State, Zip Code <u>Meridian, MS 39301-4027</u>		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED RECEIPTS

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 Lynn Crawford	10/13/2011	\$500.00
Mailing Address 1124 Windmill Drive		
City, State, Zip Code Meridian, MS 39305-1101		
Name of Employer (Required) Acme Realty		
Occupation (Required) Notary	Aggregate Year-to-date	\$500.00
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 Mrs. Betty Lou Jones	10/10/2011	\$500.00
Mailing Address 3637 Parkway Boulevard		
City, State, Zip Code Meridian, MS 39305-3869		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$500.00
Source: <input checked="" 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 Entertainment Software Association	10/01/2011	\$1,000.00
Mailing Address 575 7th Street NW Suite 300		
City, State, Zip Code Washington, DC 20004-1611		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input checked="" 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 Swisher International Inc.	10/01/2011	\$1,000.00
Mailing Address PO Box 2230		
City, State, Zip Code Jacksonville, FL 32203-2230		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED RECEIPTS

Source: <input checked="" 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 Magnolia Corp	10/07/2011	\$1,000.00
Mailing Address 289 S Robertson Boulevard Suite 469		
City, State, Zip Code Beverly Hills, CA 90211-2834		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
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 Ralph Morgan	10/13/2011	\$1,500.00
Mailing Address 3714 Lauderdale Road		
City, State, Zip Code Lauderdale, MS 39335-9632		
Name of Employer (Required) Ralph Morgan Logging		
Occupation (Required) Owner	Aggregate Year-to-date	\$1,500.00
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 Leland Lou	10/13/2011	\$500.00
Mailing Address 4315 Highway 39 N Apt. 2J		
City, State, Zip Code Meridian, MS 39301-1025		
Name of Employer (Required) Rush Pain Treatment		
Occupation (Required) Anesthesiologist	Aggregate Year-to-date	\$500.00
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 Dr. Scott Anderson	10/13/2011	\$1,000.00
Mailing Address 4905 15th Place		
City, State, Zip Code Meridian, MS 39305-1738		
Name of Employer (Required) Self-Employed		
Occupation (Required) Radiation Oncologist	Aggregate Year-to-date	\$1,000.00

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED RECEIPTS

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 Mr. Wallace Strickland	10/10/2011	\$1,000.00
Mailing Address 8219 Sycamore Creek Drive		
City, State, Zip Code Meridian, MS 39305-9406		
Name of Employer (Required) Rush Hospital Systems		
Occupation (Required) CEO	Aggregate Year-to-date	\$2,000.00
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 Mr. Ronald T. Hampton	10/13/2011	\$500.00
Mailing Address 2405 8th Street		
City, State, Zip Code Meridian, MS 39301-5000		
Name of Employer (Required) Meyer & Rosenbaum		
Occupation (Required) Insurance	Aggregate Year-to-date	\$1,000.00
Source: <input checked="" 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 Georgia Pacific Financial Management	10/12/2011	\$750.00
Mailing Address PO Box 61270		
City, State, Zip Code Phoenix, AZ 85082-1270		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$750.00
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 Mr. Roderick L Hill	10/17/2011	\$2,500.00
Mailing Address 1211 Riverside Drive		
City, State, Zip Code Jackson, MS 39202-1234		
Name of Employer (Required) IMS Engineers		
Occupation (Required) President and CEO	Aggregate Year-to-date	\$2,500.00

Name of Candidate or Committee Friends Of Tate Reeves
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ITEMIZED RECEIPTS

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>Mr. John D Calhoun</u>	10/16/2011	\$2,500.00
Mailing Address <u>3 Southern Oaks Drive</u>		
City, State, Zip Code <u>Clinton, MS 39056-9406</u>		
Name of Employer (Required) <u>IMS Engineers</u>		
Occupation (Required) <u>CEO</u>	Aggregate Year-to-date	\$2,500.00
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>Theo Costas</u>	10/21/2011	\$2,000.00
Mailing Address <u>PO Box 1349</u>		
City, State, Zip Code <u>Jackson, MS 39215-1349</u>		
Name of Employer (Required) <u>Southern Beverage</u>		
Occupation (Required) <u>CEO</u>	Aggregate Year-to-date	\$4,500.00
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>Comcast Corporation Political Action Committee</u>	10/06/2011	\$5,000.00
Mailing Address <u>600 Galleria Parkway SE Suite 1100</u>		
City, State, Zip Code <u>Atlanta, GA 30339-8102</u>		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$10,000.00
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>Mr. J. Kevin Watson</u>	10/06/2011	\$1,000.00
Mailing Address <u>PO Box 23546</u>		
City, State, Zip Code <u>Jackson, MS 39225-3546</u>		
Name of Employer (Required) <u>Watson and Jones, P.A.</u>		
Occupation (Required) <u>Attorney</u>	Aggregate Year-to-date	\$1,000.00

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED RECEIPTS

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>Mr. Richard Mills</u>	<u>10/06/2011</u>	<u>\$2,500.00</u>
Mailing Address <u>602 Crescent Place Suite 100</u>		
City, State, Zip Code <u>Ridgeland, MS 39157-8676</u>		
Name of Employer (Required) <u>Tellus Operating Group, LLC</u>		
Occupation (Required) <u>Owner</u>	Aggregate Year-to-date	\$7,500.00
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>Ergon State PAC</u>	<u>10/04/2011</u>	<u>\$1,000.00</u>
Mailing Address <u>PO Box 1639</u>		
City, State, Zip Code <u>Jackson, MS 39215-1639</u>		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$6,000.00
Source: <input checked="" 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 <u>Thompson Engineering Inc.</u>	<u>10/05/2011</u>	<u>\$1,000.00</u>
Mailing Address <u>2970 Cottage Hill Road Suite 190</u>		
City, State, Zip Code <u>Mobile, AL 36606-4749</u>		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) <u>MOA PAC</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Optometry For Progress</u>	<u>10/06/2011</u>	<u>\$5,000.00</u>
Mailing Address <u>141 Executive Drive Suite 5</u>		
City, State, Zip Code <u>Madison, MS 39110-8457</u>		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$15,000.00

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED RECEIPTS

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 KCS Rail PAC	10/01/2011	\$1,000.00
Mailing Address PO Box 219335		
City, State, Zip Code Kansas City, MO 64121-9335		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input checked="" 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 Missco Corporation	10/01/2011	\$1,000.00
Mailing Address 2510 Lakeland Terrace Suite 100		
City, State, Zip Code Jackson, MS 39216-4717		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input checked="" 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 Sheldon Laboratory Systems, Inc	10/01/2011	\$1,000.00
Mailing Address PO Box 836		
City, State, Zip Code Crystal Springs, MS 39059-0836		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input checked="" 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 School Book Supply Company of Mississippi, LLC	10/01/2011	\$1,000.00
Mailing Address PO Box 1059		
City, State, Zip Code Jackson, MS 39215-1059		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED RECEIPTS

Source: <input checked="" 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 School Book Supply Company of Louisiana, LLC	10/01/2011	\$1,000.00
Mailing Address 9380 Ashland Road Suite 190		
City, State, Zip Code Gonzales, LA 70737-8056		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input checked="" 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 Missco Contract Sales LLC	10/01/2011	\$1,000.00
Mailing Address 2510 Lakeland Terrace Suite 100		
City, State, Zip Code Jackson, MS 39216-4717		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
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 MS Hospitality & Restaurant Association PAC	10/01/2011	\$1,500.00
Mailing Address 130 Riverview Drive Suite A		
City, State, Zip Code Flowood, MS 39232-8921		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,500.00
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 Mr. Lee M. Rone	10/06/2011	\$500.00
Mailing Address 803 Harbor Isle Circle E		
City, State, Zip Code Memphis, TN 38103-0837		
Name of Employer (Required) Youth Villages		
Occupation (Required) COO	Aggregate Year-to-date	\$500.00

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED RECEIPTS

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>Ms. Jennifere M. Simmons</u>	10/06/2011	\$2,000.00
Mailing Address <u>P.O. Pox 206</u>		
City, State, Zip Code <u>Lake, MS 39092</u>		
Name of Employer (Required) <u>Simmons Erosion Control, Inc.</u>		
Occupation (Required) <u>Owner</u>	Aggregate Year-to-date	\$2,000.00
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>Centene Corporation PAC</u>	10/12/2011	\$5,000.00
Mailing Address <u>7711 Carondelet Avenue</u>		
City, State, Zip Code <u>Saint Louis, MO 63105-3313</u>		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$20,000.00
Source: <input checked="" 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 <u>CCA Of Tennessee, LLC</u>	10/07/2011	\$1,000.00
Mailing Address <u>10 Burton Hills Boulevard</u>		
City, State, Zip Code <u>Nashville, TN 37215-6105</u>		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
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>Mr. Alan Wilson</u>	10/13/2011	\$250.00
Mailing Address <u>4000 Lakeland Drive</u>		
City, State, Zip Code <u>Jackson, MS 39232-8891</u>		
Name of Employer (Required) <u>Howard Wilson Chrysler Jeep Dodge</u>		
Occupation (Required) <u>Care Dealer</u>	Aggregate Year-to-date	\$500.00

Name of Candidate or Committee Friends Of Tate Reeves
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ITEMIZED RECEIPTS

Source: <input checked="" 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 Mississippi Bail Agents Assn.	10/10/2011	\$1,000.00
Mailing Address 413 S President Street Suite 111		
City, State, Zip Code Jackson, MS 39201-5006		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
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 Ray Long	10/01/2011	\$250.00
Mailing Address 4512 8th Avenue		
City, State, Zip Code Meridian, MS 39305-2836		
Name of Employer (Required) Long Wholesale		
Occupation (Required) Owner	Aggregate Year-to-date	\$250.00
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 Thomas Wallace	10/20/2011	\$2,500.00
Mailing Address PO Box 523		
City, State, Zip Code Columbia, MS 39429-0523		
Name of Employer (Required) TL Wallace Construction, Inc.		
Occupation (Required) President	Aggregate Year-to-date	\$3,500.00
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 Mark Fairchild	10/20/2011	\$1,000.00
Mailing Address PO Box 15909		
City, State, Zip Code Hattiesburg, MS 39404-5909		
Name of Employer (Required) WR Fairchild Const. Co.		
Occupation (Required) Manager	Aggregate Year-to-date	\$1,000.00

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED RECEIPTS

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>Mr. C.T. Finnegan</u>	<u>10/20/2011</u>	<u>\$1,000.00</u>
Mailing Address <u>1200 Velma Street</u>		
City, State, Zip Code <u>Hattiesburg, MS 39402-2749</u>		
Name of Employer (Required) <u>Finlo Construction Company, Inc.</u>		
Occupation (Required) <u>Owner</u>	Aggregate Year-to-date	<u>\$4,000.00</u>
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>Mr. David Burckel</u>	<u>10/20/2011</u>	<u>\$1,000.00</u>
Mailing Address <u>67 Dover Trace</u>		
City, State, Zip Code <u>Hattiesburg, MS 39401-2902</u>		
Name of Employer (Required) <u>Southern Bone and Joint</u>		
Occupation (Required) <u>CEO</u>	Aggregate Year-to-date	<u>\$2,000.00</u>
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>Caterpillar Employees PAC</u>	<u>10/10/2011</u>	<u>\$5,000.00</u>
Mailing Address <u>100 NE Adams Street</u>		
City, State, Zip Code <u>Peoria, IL 61629-0001</u>		
Name of Employer (Required) _____		
Occupation (Required) _____	Aggregate Year-to-date	<u>\$5,000.00</u>
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>Mr. Joseph Tatum Jr.</u>	<u>10/24/2011</u>	<u>\$100.00</u>
Mailing Address <u>46 Priest Point</u>		
City, State, Zip Code <u>Hattiesburg, MS 39401-8201</u>		
Name of Employer (Required) <u>Tatum Development Services</u>		
Occupation (Required) <u>Owner</u>	Aggregate Year-to-date	<u>\$350.00</u>

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED RECEIPTS

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>Mr. David L Anderson</u>	10/25/2011	\$250.00
Mailing Address <u>610 Highway 44</u>		
City, State, Zip Code <u>Sumrall, MS 39482-4302</u>		
Name of Employer (Required) <u>Self-Employed</u>		
Occupation (Required) <u>Farmer</u>	Aggregate Year-to-date	\$250.00
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>Sherwood Bailey Jr.</u>	10/26/2011	\$1,000.00
Mailing Address <u>813 E Pass Road</u>		
City, State, Zip Code <u>Gulfport, MS 39507-3307</u>		
Name of Employer (Required) <u>Bailey Lumber and Home Center</u>		
Occupation (Required) <u>Owner</u>	Aggregate Year-to-date	\$1,200.00
Source: <input checked="" 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 <u>MMC Materials, Inc.</u>	10/01/2011	\$500.00
Mailing Address <u>PO Box 2569</u>		
City, State, Zip Code <u>Madison, MS 39130-2569</u>		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
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>Elaine Enis</u>	10/26/2011	\$750.00
Mailing Address <u>8081 Hunters Creek Drive</u>		
City, State, Zip Code <u>Olive Branch, MS 38654-7600</u>		
Name of Employer (Required) <u>Cash In A Flash Check Advance</u>		
Occupation (Required) <u>Audit and Supervision</u>	Aggregate Year-to-date	\$750.00

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED RECEIPTS

Source: <input checked="" 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 NRA- Political Victory Fund	10/19/2011	\$1,000.00
Mailing Address 11250 Waples Mill Road		
City, State, Zip Code Fairfax, VA 22030-7400		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input checked="" 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 Canon Farms	10/26/2011	\$500.00
Mailing Address PO Box 729		
City, State, Zip Code Tunica, MS 38676-0729		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$500.00
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 C.P. Owen Jr.	10/26/2011	\$1,000.00
Mailing Address PO Box 98		
City, State, Zip Code Robinsonville, MS 38664-0098		
Name of Employer (Required) Self-Employed		
Occupation (Required) Farmer	Aggregate Year-to-date	\$1,000.00
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 Mr. and Mrs. Jerry Stogner	10/18/2011	\$1,000.00
Mailing Address PO Box 1683		
City, State, Zip Code Mccomb, MS 39649-1683		
Name of Employer (Required) East McComb Check Cash		
Occupation (Required) Owner	Aggregate Year-to-date	\$5,500.00

Name of Candidate or Committee Friends Of Tate Reeves
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ITEMIZED RECEIPTS

Source: <input checked="" 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 <u>Sanofi-Aventis</u>	10/06/2011	\$1,000.00
Mailing Address <u>5417 Chevaux Court</u>		
City, State, Zip Code <u>Little Rock, AR 72223-4296</u>		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
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>Mr. Jerry L. Levens</u>	10/27/2011	\$1,000.00
Mailing Address <u>20059 Pineville Road</u>		
City, State, Zip Code <u>Long Beach, MS 39560-3351</u>		
Name of Employer (Required) <u>J. Levens Builders</u>		
Occupation (Required) <u>Builder</u>	Aggregate Year-to-date	\$1,000.00
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>Mr. Derek Arrington</u>	10/27/2011	\$100.00
Mailing Address <u>14 Amen Corner</u>		
City, State, Zip Code <u>Hattiesburg, MS 39401-6622</u>		
Name of Employer (Required) <u>Jackson, Bowman, Blumentritt & Arrington, PLLC</u>		
Occupation (Required) <u>Attorney</u>	Aggregate Year-to-date	\$350.00
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>Mr. Carl Nicholson</u>	10/27/2011	\$2,500.00
Mailing Address <u>PO Box 15099</u>		
City, State, Zip Code <u>Hattiesburg, MS 39404-5099</u>		
Name of Employer (Required) <u>Nicholson & Company, PLLC</u>		
Occupation (Required) <u>Owner</u>	Aggregate Year-to-date	\$3,500.00

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED RECEIPTS

Source: <input checked="" 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 Hensley R. Lee Contracting, Inc.	10/28/2011	\$1,000.00
Mailing Address 311 Acorn Lane		
City, State, Zip Code Picayune, MS 39466-2047		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input checked="" 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 Willow Bend Ventures	10/27/2011	\$1,000.00
Mailing Address 311 Acorn Lane		
City, State, Zip Code Picayune, MS 39466-2047		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
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 Mr. Lowell Heinmiller	10/24/2011	\$200.00
Mailing Address 2506 Arcadia Street		
City, State, Zip Code Hattiesburg, MS 39402-2509		
Name of Employer (Required) Retired		
Occupation (Required) Retired	Aggregate Year-to-date	\$400.00
Source: <input checked="" 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 Walgreens	10/20/2011	\$1,000.00
Mailing Address 104 Wilmot Road # 1444		
City, State, Zip Code Deerfield, IL 60015-5121		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED RECEIPTS

Source: <input checked="" 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 <u>GMRI, Inc.</u>	10/01/2011	\$1,000.00
Mailing Address <u>PO Box 695012</u>		
City, State, Zip Code <u>Orlando, FL 32869-5012</u>		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input checked="" 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 <u>General Motors Company</u>	10/27/2011	\$1,000.00
Mailing Address <u>25 Massachusetts Avenue NW Suite 400</u>		
City, State, Zip Code <u>Washington, DC 20001-1427</u>		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
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>Leonard Bentz II</u>	10/27/2011	\$250.00
Mailing Address <u>13408 Damon Court</u>		
City, State, Zip Code <u>Biloxi, MS 39532-9519</u>		
Name of Employer (Required) <u>Public Service Commission</u>		
Occupation (Required) <u>Commissioner</u>	Aggregate Year-to-date	\$250.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) <u>Philip and Sheila Moran</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Philip Moran Campaign Fund</u>	10/28/2011	\$250.00
Mailing Address <u>PO Box 6201</u>		
City, State, Zip Code <u>Diamondhead, MS 39525-6003</u>		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$250.00

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED RECEIPTS

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 Hugh Keating	10/31/2011	\$1,000.00
Mailing Address 26 Greenbriar Drive		
City, State, Zip Code Gulfport, MS 39507-4215		
Name of Employer (Required) Self		
Occupation (Required) Attorney	Aggregate Year-to-date	\$1,000.00
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 Mr. Warren Hood Jr.	10/31/2011	\$5,000.00
Mailing Address PO Box 682		
City, State, Zip Code Hattiesburg, MS 39403-0682		
Name of Employer (Required) Hood Companies		
Occupation (Required) Owner	Aggregate Year-to-date	\$6,500.00
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 Mississippi Power Company State PAC	10/24/2011	\$5,000.00
Mailing Address PO Box 4079		
City, State, Zip Code Gulfport, MS 39502-4079		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$12,500.00
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 Mr. Roy Anderson III	11/01/2011	\$2,500.00
Mailing Address PO Box 2		
City, State, Zip Code Gulfport, MS 39502-0002		
Name of Employer (Required) Roy Anderson Corp		
Occupation (Required) CEO	Aggregate Year-to-date	\$2,500.00

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED RECEIPTS

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 Mrs. Marcia R. Swetman	10/23/2011	\$1,000.00
Mailing Address 1210 Beach Boulevard		
City, State, Zip Code Biloxi, MS 39530-3633		
Name of Employer (Required) N/A		
Occupation (Required) Homemaker	Aggregate Year-to-date	\$1,000.00
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 Mr. Cyril T Faneca	11/01/2011	\$500.00
Mailing Address 1526 Bert Avenue		
City, State, Zip Code Gulfport, MS 39501-2257		
Name of Employer (Required) Dukes, Dukes, Keating & Faneca, P.A.		
Occupation (Required) Attorney	Aggregate Year-to-date	\$500.00
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 Mr. Nick Mavar Jr.	11/01/2011	\$1,000.00
Mailing Address 9102 Victoria Circle		
City, State, Zip Code Gulfport, MS 39503-6140		
Name of Employer (Required) Self		
Occupation (Required) Attorney	Aggregate Year-to-date	\$1,000.00
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 Mr. Don E Mason	11/01/2011	\$1,000.00
Mailing Address 5 Colonel Wink Drive		
City, State, Zip Code Gulfport, MS 39507-4252		
Name of Employer (Required) Hancock Bank		
Occupation (Required) Director	Aggregate Year-to-date	\$1,000.00

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED RECEIPTS

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>Mr. Clay Wagner</u>	11/01/2011	\$1,000.00
Mailing Address <u>PO Box 4019</u>		
City, State, Zip Code <u>Gulfport, MS 39502-4019</u>		
Name of Employer (Required) <u>Hancock Bank</u>		
Occupation (Required) <u>Manager</u>	Aggregate Year-to-date	\$1,000.00
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>Mr. Frank Genzer Jr.</u>	11/01/2011	\$1,000.00
Mailing Address <u>145 Saint Jude Street</u>		
City, State, Zip Code <u>Biloxi, MS 39530-3602</u>		
Name of Employer (Required) <u>Self</u>		
Occupation (Required) <u>Architect</u>	Aggregate Year-to-date	\$1,000.00
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>Mrs. Leslie Henderson</u>	11/01/2011	\$1,000.00
Mailing Address <u>PO Box 1476</u>		
City, State, Zip Code <u>Kiln, MS 39556-1476</u>		
Name of Employer (Required) <u>Lazy Magnolia Brewing Company</u>		
Occupation (Required) <u>Owner</u>	Aggregate Year-to-date	\$1,000.00
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>Mr. Duncan McKenzie</u>	11/01/2011	\$1,000.00
Mailing Address <u>3 Bayou Place</u>		
City, State, Zip Code <u>Gulfport, MS 39503-6202</u>		
Name of Employer (Required) <u>Hard Rock Cafe</u>		
Occupation (Required) <u>General Manager</u>	Aggregate Year-to-date	\$1,000.00

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED RECEIPTS

Source: <input checked="" 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 Treutel Insurance Agency	11/01/2011	\$1,000.00
Mailing Address PO Box 2940		
City, State, Zip Code Bay St Louis, MS 39521-2940		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input checked="" 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 Dukes, Dukes, Keating & Faneca, P.A.	10/13/2011	\$500.00
Mailing Address PO Box W		
City, State, Zip Code Gulfport, MS 39502-0680		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$500.00
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 Mr. Ron Peresich	11/01/2011	\$1,000.00
Mailing Address PO Box 289		
City, State, Zip Code Biloxi, MS 39533-0289		
Name of Employer (Required) Page, Mannino, Peresich, and McDermott		
Occupation (Required) Attorney	Aggregate Year-to-date	\$1,000.00
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 Mr. and Mrs. Victor V Mavar	10/27/2011	\$1,000.00
Mailing Address 630 Beach Boulevard		
City, State, Zip Code Biloxi, MS 39530-4301		
Name of Employer (Required) G & R Radio		
Occupation (Required) Vice President	Aggregate Year-to-date	\$1,000.00

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED RECEIPTS

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 Mr. Roy Williams	10/31/2011	\$500.00
Mailing Address 816 Harbor Drive		
City, State, Zip Code Pascagoula, MS 39567-7225		
Name of Employer (Required) Dogan, Wilkinson, William		
Occupation (Required) Attorney	Aggregate Year-to-date	\$500.00
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 Mr. James F. Hardin Jr.	10/31/2011	\$250.00
Mailing Address 2330 Beau Chene		
City, State, Zip Code Biloxi, MS 39532-3134		
Name of Employer (Required) Aladdin Construction Co. Inc.		
Occupation (Required) Construction	Aggregate Year-to-date	\$250.00
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 Mr. James H. Heidelberg	10/31/2011	\$1,000.00
Mailing Address 1300 Driftwood Street		
City, State, Zip Code Pascagoula, MS 39567-7592		
Name of Employer (Required) Heidelberg, Steinberger, Colmer, & Burrow		
Occupation (Required) Attorney	Aggregate Year-to-date	\$1,250.00
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 Mrs. Dora B Harvey	10/31/2011	\$250.00
Mailing Address 2354 Beau Chene		
City, State, Zip Code Biloxi, MS 39532-3134		
Name of Employer (Required) Homemaker		
Occupation (Required) Homemaker	Aggregate Year-to-date	\$250.00

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED RECEIPTS

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>Dr. Gordon Stanfield</u>	11/01/2011	\$250.00
Mailing Address <u>149 Bayou Circle</u>		
City, State, Zip Code <u>Gulfport, MS 39507-4623</u>		
Name of Employer (Required) <u>Gulf Coast Audiology</u>		
Occupation (Required) <u>Audiologist</u>	Aggregate Year-to-date	\$250.00
Source: <input checked="" 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 <u>Pyramid Industries Inc.</u>	10/20/2011	\$500.00
Mailing Address <u>1720 23rd Avenue</u>		
City, State, Zip Code <u>Gulfport, MS 39501-2961</u>		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$500.00
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>Mr. Mark Cumbest</u>	11/01/2011	\$250.00
Mailing Address <u>17732 Highway 63</u>		
City, State, Zip Code <u>Moss Point, MS 39562-8508</u>		
Name of Employer (Required) <u>Self</u>		
Occupation (Required) <u>Realtor</u>	Aggregate Year-to-date	\$350.00
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>Brice Wiggins</u>	11/01/2011	\$250.00
Mailing Address <u>PO Box 922</u>		
City, State, Zip Code <u>Pascagoula, MS 39568-0922</u>		
Name of Employer (Required) <u>Wiggins Law, PLLC</u>		
Occupation (Required) <u>Attorney</u>	Aggregate Year-to-date	\$250.00

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED RECEIPTS

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>Mr. William Westbrook III</u>	11/01/2011	\$250.00
Mailing Address <u>20 Kimball Drive</u>		
City, State, Zip Code <u>Gulfport, MS 39507-4254</u>		
Name of Employer (Required) <u>Watkins Ludlum Winer and Stennis</u>		
Occupation (Required) <u>Attorney</u>	Aggregate Year-to-date	\$250.00
Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) <u>Wholesale Distribution Full Line</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>Corso, Inc.</u>	10/31/2011	\$250.00
Mailing Address <u>PO Box 488</u>		
City, State, Zip Code <u>Biloxi, MS 39533-0488</u>		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$500.00
Source: <input checked="" 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 <u>The Peoples Bank</u>	10/27/2011	\$5,000.00
Mailing Address <u>PO Box 1416</u>		
City, State, Zip Code <u>Biloxi, MS 39533-1416</u>		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$5,000.00
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>Mr. Jerry St. Pe'</u>	11/01/2011	\$5,000.00
Mailing Address <u>806 Powells Point Drive</u>		
City, State, Zip Code <u>Gautier, MS 39553-2334</u>		
Name of Employer (Required) <u>Ingalls Shipbuilders</u>		
Occupation (Required) <u>Chairman</u>	Aggregate Year-to-date	\$5,000.00

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED RECEIPTS

Source: <input checked="" 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 The Excellence Group, LLC	11/02/2011	\$1,000.00
Mailing Address PO Box 2066		
City, State, Zip Code Jackson, MS 39225-2066		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input checked="" 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 Young Law Group PLLC	11/02/2011	\$1,500.00
Mailing Address 300 W Capitol Street Suite 200		
City, State, Zip Code Jackson, MS 39203-2704		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$3,500.00
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 WAL PAC	11/07/2011	\$2,500.00
Mailing Address 702 SW 8th Street		
City, State, Zip Code Bentonville, AR 72716-6299		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,500.00
Source: <input checked="" 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 K12 Management Inc.	11/07/2011	\$2,500.00
Mailing Address 2300 Corporate Park Drive		
City, State, Zip Code Herndon, VA 20171-4838		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,500.00

Name of Candidate or Committee Friends Of Tate Reeves
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ITEMIZED RECEIPTS

Source: <input checked="" 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 PDL Support.Com,LLC	11/07/2011	\$1,000.00
Mailing Address 4551 W 107th Street Suite 250		
City, State, Zip Code Overland Park, KS 66207-4012		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input checked="" 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 Government Employees Credit Center, Inc.	11/07/2011	\$1,000.00
Mailing Address 750 Shipyard Drive Suite 200		
City, State, Zip Code Wilmington, DE 19801-5160		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input checked="" 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 PhRMA	11/07/2011	\$1,000.00
Mailing Address 950 F Street NW Suite 300		
City, State, Zip Code Washington, DC 20004-1440		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input checked="" 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 Wishbone Investments, LLC	11/07/2011	\$1,000.00
Mailing Address Unknown		
City, State, Zip Code		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00

Name of Candidate or Committee Friends Of Tate Reeves
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ITEMIZED RECEIPTS

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>Dr. Dwight S. Keady</u>	11/07/2011	\$1,000.00
Mailing Address <u>PO Box 186</u>		
City, State, Zip Code <u>Union, MS 39365-0186</u>		
Name of Employer (Required) <u>Meridian Oncology Associates</u>		
Occupation (Required) <u>Physician</u>	Aggregate Year-to-date	\$1,000.00
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>Mr. Marty Davidson</u>	11/07/2011	\$1,000.00
Mailing Address <u>PO Box 3804</u>		
City, State, Zip Code <u>Meridian, MS 39303-3804</u>		
Name of Employer (Required) <u>Southern Pipe</u>		
Occupation (Required) <u>Owner</u>	Aggregate Year-to-date	\$2,000.00
Source: <input checked="" 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 <u>MCPA PAC</u>	11/07/2011	\$1,000.00
Mailing Address <u>PO Box 16630</u>		
City, State, Zip Code <u>Jackson, MS 39236-6630</u>		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
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>Dr. Michael Seicshnaydre</u>	11/07/2011	\$1,000.00
Mailing Address <u>4300 15th Street Suite B</u>		
City, State, Zip Code <u>Gulfport, MS 39501-2524</u>		
Name of Employer (Required) <u>Self</u>		
Occupation (Required) <u>Physician</u>	Aggregate Year-to-date	\$1,000.00

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED RECEIPTS

Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) <u>Mark D. Mavar</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name <u>M & M Processing, LLC</u>	11/07/2011	\$1,000.00
Mailing Address <u>542 Bayview Avenue</u>		
City, State, Zip Code <u>Biloxi, MS 39530-2417</u>		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
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>Frances Turnage</u>	11/07/2011	\$1,000.00
Mailing Address <u>1316 Father Ryan Avenue</u>		
City, State, Zip Code <u>Biloxi, MS 39530-3517</u>		
Name of Employer (Required) <u>Mississippi Power Company</u>		
Occupation (Required) <u>CFO</u>	Aggregate Year-to-date	\$1,000.00
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>Mr. John Sneed</u>	11/07/2011	\$1,000.00
Mailing Address <u>141 Bayou Circle</u>		
City, State, Zip Code <u>Gulfport, MS 39507-4623</u>		
Name of Employer (Required) <u>Stewart, Sneed, Hewes Insurance</u>		
Occupation (Required) <u>President</u>	Aggregate Year-to-date	\$1,000.00
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>Terese Wylly</u>	11/07/2011	\$1,000.00
Mailing Address <u>216 N Beach Boulevard</u>		
City, State, Zip Code <u>Bay St Louis, MS 39520-4549</u>		
Name of Employer (Required) <u>Balch & Bingham</u>		
Occupation (Required) <u>Partner/Attorney</u>	Aggregate Year-to-date	\$1,000.00

Name of Candidate or Committee Friends Of Tate Reeves
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ITEMIZED RECEIPTS

Source: <input checked="" 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
Mr. Frank Nicoladis	11/07/2011	\$1,000.00
Full Name Ny Associates, Inc.		
Mailing Address 178 Main Street		
City, State, Zip Code Biloxi, MS 39530-3843		
Name of Employer (Required)		
Occupation (Required)		Aggregate Year-to-date \$1,000.00
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
Ben Stone	11/07/2011	\$2,500.00
Full Name Ben Stone		
Mailing Address PO Box 130		
City, State, Zip Code Gulfport, MS 39502-0130		
Name of Employer (Required) Balch & Bingham LLP		
Occupation (Required) Attorney		Aggregate Year-to-date \$2,500.00
Source: <input checked="" 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
Mississippi Architects PAC	11/07/2011	\$1,000.00
Full Name Mississippi Architects PAC		
Mailing Address 509 E Capitol Street		
City, State, Zip Code Jackson, MS 39201-2704		
Name of Employer (Required)		
Occupation (Required)		Aggregate Year-to-date \$1,000.00
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
Mr. Dave Van Jr.	11/08/2011	\$1,000.00
Full Name Mr. Dave Van Jr.		
Mailing Address 115 Miles Lane		
City, State, Zip Code Brandon, MS 39042-7303		
Name of Employer (Required) Region 8		
Occupation (Required) Executive Director		Aggregate Year-to-date \$3,000.00

Name of Candidate or Committee Friends Of Tate Reeves
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ITEMIZED RECEIPTS

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 Karyn I. Thronhill	11/08/2011	\$1,000.00
Mailing Address 463 Ridge Circle		
City, State, Zip Code Brandon, MS 39047-8669		
Name of Employer (Required) Information Requested		
Occupation (Required) Information Requested	Aggregate Year-to-date	\$1,000.00
Source: <input checked="" 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 Monsanto Company	11/08/2011	\$500.00
Mailing Address 800 N Lindbergh Boulevard		
City, State, Zip Code Saint Louis, MO 63167-0001		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input checked="" 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 Monsanto Company	11/08/2011	\$500.00
Mailing Address 800 N Lindbergh Boulevard		
City, State, Zip Code Saint Louis, MO 63167-0001		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input checked="" 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 Sentry Care, Inc.	11/08/2011	\$1,000.00
Mailing Address 106 Office Park Drive # A		
City, State, Zip Code Brandon, MS 39042-2404		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00

Name of Candidate or Committee Friends Of Tate Reeves
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ITEMIZED RECEIPTS

Source: <input checked="" 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 Check Cashiers & More, Inc.	11/08/2011	\$1,000.00
Mailing Address 147 W Gallatin Street		
City, State, Zip Code Hazlehurst, MS 39083-3024		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input checked="" 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 All American Check Cashing, Inc.	11/08/2011	\$300.00
Mailing Address 123 E Jackson Street		
City, State, Zip Code Belzoni, MS 39038-3641		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$300.00
Source: <input checked="" 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 Advance America	11/08/2011	\$1,000.00
Mailing Address 135 N Church Street		
City, State, Zip Code Spartanburg, SC 29306-5138		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input checked="" 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 Check Into Cash of Mississippi, Inc.	11/08/2011	\$1,000.00
Mailing Address PO Box 550		
City, State, Zip Code Cleveland, TN 37364-0550		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED RECEIPTS

Source: <input checked="" 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 All American Check Cashing	11/08/2011	\$700.00
Mailing Address PO Box 1350		
City, State, Zip Code Ridgeland, MS 39158-1350		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,700.00
Source: <input checked="" 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 All American Check Cashing	11/08/2011	\$200.00
Mailing Address PO Box 1350		
City, State, Zip Code Ridgeland, MS 39158-1350		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,700.00
Source: <input checked="" 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 American Title and Check Cashing	11/08/2011	\$250.00
Mailing Address 587 Highway 51		
City, State, Zip Code Ridgeland, MS 39157-2506		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$250.00
Source: <input checked="" 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 Cash Inc. Of Mississippi	11/08/2011	\$500.00
Mailing Address 578 Lakeland East Drive Suite C		
City, State, Zip Code Flowood, MS 39232-9022		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$500.00

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED RECEIPTS

Source: <input checked="" 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 Money Now Hattiesburg	11/08/2011	\$300.00
Mailing Address 1100 Hardy Street Suite 20		
City, State, Zip Code Hattiesburg, MS 39401-4166		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$300.00
Source: <input checked="" 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 All American Check Cashing	11/08/2011	\$200.00
Mailing Address PO Box 1350		
City, State, Zip Code Ridgeland, MS 39158-1350		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,700.00
Source: <input checked="" 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 All American Check Cashing	11/08/2011	\$100.00
Mailing Address PO Box 1350		
City, State, Zip Code Ridgeland, MS 39158-1350		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,700.00
Source: <input checked="" 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 All American Check Cashing Inc	11/08/2011	\$200.00
Mailing Address PO Box 1350		
City, State, Zip Code Ridgeland, MS 39158-1350		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$600.00

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED RECEIPTS

Source: <input checked="" 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 All American Check Cashing	11/08/2011	\$200.00
Mailing Address PO Box 1350		
City, State, Zip Code Ridgeland, MS 39158-1350		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,700.00
Source: <input checked="" 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 All American Check Cashing	11/10/2011	\$100.00
Mailing Address PO Box 1350		
City, State, Zip Code Ridgeland, MS 39158-1350		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,700.00
Source: <input checked="" 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 All American Check Cashing Inc	11/10/2011	\$200.00
Mailing Address PO Box 1350		
City, State, Zip Code Ridgeland, MS 39158-1350		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$600.00
Source: <input checked="" 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 All American Check Cashing Inc	11/10/2011	\$200.00
Mailing Address PO Box 1350		
City, State, Zip Code Ridgeland, MS 39158-1350		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$600.00

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED RECEIPTS

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 All American Check Cashing	11/10/2011	\$200.00
Mailing Address PO Box 1350		
City, State, Zip Code Ridgeland, MS 39158-1350		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,700.00
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 Senator John Polk	10/27/2011	\$1,720.00
Mailing Address 53 Tidewater Road		
City, State, Zip Code Hattiesburg, MS 39402-9778		
Name of Employer (Required) Polk's Meat		
Occupation (Required) Owner	Aggregate Year-to-date	\$2,720.00
Source: <input checked="" 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 United Healthcare Services, Inc.	12/19/2011	\$1,000.00
Mailing Address PO Box 1459		
City, State, Zip Code Minneapolis, MN 55440-1459		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
Source: <input checked="" 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 Pfizer, Inc.	12/19/2011	\$1,000.00
Mailing Address 235 E 42nd Street		
City, State, Zip Code New York, NY 10017-5703		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED RECEIPTS

Source: <input checked="" 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 Mid-South Carpenters Regional Council	12/19/2011	\$1,000.00
Mailing Address 2544 Elm Hill Pike		
City, State, Zip Code Nashville, TN 37214-3106		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00
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 Mr. Stephen Oseman Jr.	12/19/2011	\$250.00
Mailing Address 6595 Poplar Woods Circle S		
City, State, Zip Code Germantown, TN 38138-0647		
Name of Employer (Required) Oseman Insurance Agency		
Occupation (Required) Insurance	Aggregate Year-to-date	\$250.00
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 Mr. Douglas Jordan	12/19/2011	\$1,000.00
Mailing Address 113 Cherrybark Lane		
City, State, Zip Code Natchez, MS 39120-9377		
Name of Employer (Required) Information Requested		
Occupation (Required) Information Requested	Aggregate Year-to-date	\$1,000.00
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 Mr. Stephen Oseman	12/19/2011	\$1,000.00
Mailing Address 8613 Beaverwood Drive		
City, State, Zip Code Germantown, TN 38138-7740		
Name of Employer (Required) Oseman Insurance Agency		
Occupation (Required) President	Aggregate Year-to-date	\$1,000.00

Name of Candidate or Committee Friends Of Tate Reeves
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ITEMIZED RECEIPTS

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 C & G Wholesale Auto LLC	12/19/2011	\$400.00
Mailing Address 221 Hoy Farms Drive		
City, State, Zip Code Madison, MS 39110-6201		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$400.00
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 Mr. Kern Schumacher	12/19/2011	\$5,000.00
Mailing Address 1047 Lakeshore Boulevard		
City, State, Zip Code Incline Village, NV 89451-9352		
Name of Employer (Required) Grenada Railways		
Occupation (Required) Principal	Aggregate Year-to-date	\$5,000.00
Source: <input checked="" 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 Surescripts, LLC	12/19/2011	\$500.00
Mailing Address 2800 Crystal Drive		
City, State, Zip Code Arlington, VA 22202-3589		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$500.00
Source: <input checked="" 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 Eli Lilly And Company Pac	12/19/2011	\$2,500.00
Mailing Address 639 S Delaware Street		
City, State, Zip Code Indianapolis, IN 46225-1392		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$2,500.00

Name of Candidate or Committee Friends Of Tate Reeves
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ITEMIZED RECEIPTS

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>Mr. Alwyn Luckey</u>	12/19/2011	\$2,500.00
Mailing Address <u>101 Watersedge Drive</u>		
City, State, Zip Code <u>Ocean Springs, MS 39564-5118</u>		
Name of Employer (Required) <u>Self</u>		
Occupation (Required) <u>Attorney</u>	Aggregate Year-to-date	\$2,500.00
Source: <input checked="" 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 <u>Indywood, LLC</u>	12/19/2011	\$500.00
Mailing Address <u>541 Dorsett Drive</u>		
City, State, Zip Code <u>Indianola, MS 38751-2386</u>		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$500.00
Source: <input checked="" 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 <u>Indywood Glen, LLC</u>	12/19/2011	\$500.00
Mailing Address <u>1416 Erie Street</u>		
City, State, Zip Code <u>Greenwood, MS 38930-2103</u>		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$500.00
Source: <input checked="" 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 <u>Indwood Estate, LLC</u>	12/19/2011	\$500.00
Mailing Address <u>218 Ronaldman Road</u>		
City, State, Zip Code <u>Cleveland, MS 38732-8755</u>		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$500.00

Name of Candidate or Committee Friends Of Tate Reeves
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ITEMIZED RECEIPTS

Source: <input checked="" 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 Senior Care Centers of Mississippi, LLC	12/19/2011	\$1,000.00
Mailing Address 7 Neshaminy Interplex Drive		
City, State, Zip Code Trevoese, PA 19053-6927		
Name of Employer (Required)		
Occupation (Required)	Aggregate Year-to-date	\$1,000.00

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED DISBURSEMENTS

Full Name People Lease	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 689 Towne Center Boulevard Suite B	10/03/2011	\$18,181.45
City, State, Zip Code Ridgeland, MS 39157-4900		
Purpose of Disbursement (Optional) Payroll	Aggregate Year-to-date	\$203,520.20
Full Name Aristotle International, Inc.	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 200 Pennsylvania Ave. SE	10/03/2011	\$2,175.00
City, State, Zip Code Washington, DC 20003		
Purpose of Disbursement (Optional) Software	Aggregate Year-to-date	\$20,332.84
Full Name Amerimail Direct	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 125 E South Street	10/03/2011	\$693.46
City, State, Zip Code Jackson, MS 39201-5106		
Purpose of Disbursement (Optional) Printing	Aggregate Year-to-date	\$47,910.03
Full Name Southern Telecommunications	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 12865	10/03/2011	\$442.07
City, State, Zip Code Jackson, MS 39236-2865		
Purpose of Disbursement (Optional) Office Phones	Aggregate Year-to-date	\$7,256.92
Full Name Atmos Energy	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 790311	10/03/2011	\$17.34
City, State, Zip Code Saint Louis, MO 63179-0311		
Purpose of Disbursement (Optional) Utilities	Aggregate Year-to-date	\$886.14
Full Name Lakeland Income Properties/Stone Creek Assests	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 320219	10/03/2011	\$1,400.00
City, State, Zip Code Flowood, MS 39232-0219		
Purpose of Disbursement (Optional) Office Rent	Aggregate Year-to-date	\$15,625.00

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED DISBURSEMENTS

Full Name	Philip Moran Campaign	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	PO Box 6201	10/04/2011	\$5,000.00
City, State, Zip Code	Diamondhead, MS 39525-6003		
Purpose of Disbursement (Optional) Contribution		Aggregate Year-to-date	\$5,000.00
Full Name	Friends Of Lydia Chassaniol	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	PO Box 211	10/04/2011	\$2,500.00
City, State, Zip Code	Winona, MS 38967-0211		
Purpose of Disbursement (Optional) Contribution		Aggregate Year-to-date	\$2,500.00
Full Name	Sally Doty For Senate	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	PO Box 4662	10/04/2011	\$5,000.00
City, State, Zip Code	Brookhaven, MS 39603-6662		
Purpose of Disbursement (Optional) Contribution		Aggregate Year-to-date	\$5,000.00
Full Name	Friends Of Will Longwitz	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	PO Box 1273	10/04/2011	\$1,000.00
City, State, Zip Code	Madison, MS 39130-1273		
Purpose of Disbursement (Optional) Contribution		Aggregate Year-to-date	\$1,000.00
Full Name	Collins Senate Campaign	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	1604 Briar Ridge Road	10/04/2011	\$1,000.00
City, State, Zip Code	Tupelo, MS 38804-5108		
Purpose of Disbursement (Optional) Contribution		Aggregate Year-to-date	\$1,000.00
Full Name	Friends Of Tony Smith	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	51 Lancair Drive	10/04/2011	\$1,000.00
City, State, Zip Code	Picayune, MS 39466-7739		
Purpose of Disbursement (Optional) Contribution		Aggregate Year-to-date	\$1,000.00

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED DISBURSEMENTS

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Giles K Ward For Senate	10/04/2011	\$2,500.00
Mailing Address 114 Jordan Circle		
City, State, Zip Code Louisville, MS 39339-7706		
Purpose of Disbursement (Optional) Contribution	Aggregate Year-to-date	\$2,500.00
Amerimail Direct	10/06/2011	\$1,070.00
Mailing Address 125 E South Street		
City, State, Zip Code Jackson, MS 39201-5106		
Purpose of Disbursement (Optional) Texting Platform	Aggregate Year-to-date	\$47,910.03
Atmos Energy	10/06/2011	\$29.60
Mailing Address PO Box 790311		
City, State, Zip Code Saint Louis, MO 63179-0311		
Purpose of Disbursement (Optional) Utilities	Aggregate Year-to-date	\$886.14
Amerimail Direct	10/06/2011	\$162.35
Mailing Address 125 E South Street		
City, State, Zip Code Jackson, MS 39201-5106		
Purpose of Disbursement (Optional) Printing/Postcards	Aggregate Year-to-date	\$47,910.03
Entergy	10/06/2011	\$451.81
Mailing Address PO Box 8105		
City, State, Zip Code Baton Rouge, LA 70891-8105		
Purpose of Disbursement (Optional) Utilities	Aggregate Year-to-date	\$5,779.43
Lakeland Income Properties/Stone Creek Assests	10/06/2011	\$25.00
Mailing Address PO Box 320219		
City, State, Zip Code Flowood, MS 39232-0219		
Purpose of Disbursement (Optional) Utilities Reimbursement	Aggregate Year-to-date	\$15,625.00

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED DISBURSEMENTS

Full Name	Trustmark National Bank	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	248 E Capitol Street	10/07/2011	\$880.00
City, State, Zip Code	Jackson, MS 39201-2503		
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$32,546.36
Full Name	Justin Brasell	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	1306 Robert Drive	10/01/2011	\$10,099.00
City, State, Zip Code	Jackson, MS 39211-6336		
Purpose of Disbursement (Optional)	Campaign Management Consulting	Aggregate Year-to-date	\$20,099.00
Full Name	Mr. Kenny Ellis	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	126 Mockingbird Lane	10/11/2011	\$100.00
City, State, Zip Code	Ridgeland, MS 39157-9408		
Purpose of Disbursement (Optional)	Expense Reimbursement	Aggregate Year-to-date	\$1,591.16
Full Name	Anna Rogers, Inc.	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	4333 Lakeland Drive	10/11/2011	\$12,500.00
City, State, Zip Code	Flowood, MS 39232-8947		
Purpose of Disbursement (Optional)	Fundraising Consulting	Aggregate Year-to-date	\$43,196.12
Full Name	Trustmark National Bank Credit Card Center	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	PO Box 114	10/11/2011	\$8,364.95
City, State, Zip Code	Jackson, MS 39205-0114		
Purpose of Disbursement (Optional)	Credit Card Payment	Aggregate Year-to-date	\$129,932.30
Full Name	MSGOP	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	PO Box 60	10/13/2011	\$100,000.00
City, State, Zip Code	Jackson, MS 39205-0060		
Purpose of Disbursement (Optional)	Contribution	Aggregate Year-to-date	\$103,000.00

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED DISBURSEMENTS

Full Name	People Lease	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	689 Towne Center Boulevard Suite B	10/14/2011	\$2,185.95
City, State, Zip Code	Ridgeland, MS 39157-4900		
Purpose of Disbursement (Optional) Payroll		Aggregate Year-to-date	\$203,520.20
Full Name	Majority Strategies	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	135 Professional Drive Suite 104	10/10/2011	\$6,395.28
City, State, Zip Code	Ponte Vedra Beach, FL 32082-6277		
Purpose of Disbursement (Optional) Direct mail design, printing, postage		Aggregate Year-to-date	\$312,774.04
Full Name	Majority Strategies	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	135 Professional Drive Suite 104	10/17/2011	\$4,263.52
City, State, Zip Code	Ponte Vedra Beach, FL 32082-6277		
Purpose of Disbursement (Optional) Printing, Postage		Aggregate Year-to-date	\$312,774.04
Full Name	Amerimail Direct	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	125 E South Street	10/18/2011	\$919.30
City, State, Zip Code	Jackson, MS 39201-5106		
Purpose of Disbursement (Optional) Postage		Aggregate Year-to-date	\$47,910.03
Full Name	Steve Simpson For Attorney General	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	1755 Lelia Drive Suite 105	10/18/2011	\$2,500.00
City, State, Zip Code	Jackson, MS 39216-4828		
Purpose of Disbursement (Optional) Contribution		Aggregate Year-to-date	\$2,500.00
Full Name	Cindy Hyde-Smith For Ag Commissioner	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	400 Cattle Trail NW	10/18/2011	\$2,500.00
City, State, Zip Code	Brookhaven, MS 39601-9045		
Purpose of Disbursement (Optional) Contribution		Aggregate Year-to-date	\$2,500.00

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED DISBURSEMENTS

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Lynn Fitch For Treasurer	10/18/2011	\$5,000.00
Mailing Address PO Box 698		
City, State, Zip Code Madison, MS 39130-0698		
Purpose of Disbursement (Optional) Contribution	Aggregate Year-to-date	\$5,000.00
Lovin'Spoonful Catering, LLC	10/18/2011	\$1,298.98
Mailing Address 2315 40th Street		
City, State, Zip Code Meridian, MS 39305-3802		
Purpose of Disbursement (Optional) Catering	Aggregate Year-to-date	\$1,298.98
Entergy	10/18/2011	\$36.34
Mailing Address PO Box 8105		
City, State, Zip Code Baton Rouge, LA 70891-8105		
Purpose of Disbursement (Optional) Utilities	Aggregate Year-to-date	\$5,779.43
Amerimail Direct	10/18/2011	\$310.40
Mailing Address 125 E South Street		
City, State, Zip Code Jackson, MS 39201-5106		
Purpose of Disbursement (Optional) Printing	Aggregate Year-to-date	\$47,910.03
D2 Tech Solutions, LLC	10/18/2011	\$257.87
Mailing Address 328 Kingsbridge Road		
City, State, Zip Code Madison, MS 39110-8487		
Purpose of Disbursement (Optional) IT Expense	Aggregate Year-to-date	\$3,312.83
Mr. Justin Brasell	11/01/2011	\$10,014.90
Mailing Address 5362 Carolwood Drive		
City, State, Zip Code Jackson, MS 39211-4267		
Purpose of Disbursement (Optional) Campaign Management Consulting	Aggregate Year-to-date	\$84,343.57

Name of Candidate or Committee Friends Of Tate Reeves
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ITEMIZED DISBURSEMENTS

Full Name	Anna Rogers, Inc.	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	4333 Lakeland Drive	11/01/2011	\$12,500.00
City, State, Zip Code	Flowood, MS 39232-8947		
Purpose of Disbursement (Optional) Fundraising Consulting		Aggregate Year-to-date	\$43,196.12
Full Name	People Lease	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	689 Towne Center Boulevard Suite B	11/01/2011	\$18,181.45
City, State, Zip Code	Ridgeland, MS 39157-4900		
Purpose of Disbursement (Optional) Payroll		Aggregate Year-to-date	\$203,520.20
Full Name	Amerimail Direct	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	125 E South Street	11/01/2011	\$572.00
City, State, Zip Code	Jackson, MS 39201-5106		
Purpose of Disbursement (Optional) Postage		Aggregate Year-to-date	\$47,910.03
Full Name	Aristotle International, Inc.	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	200 Pennsylvania Ave. SE	11/04/2011	\$2,175.00
City, State, Zip Code	Washington, DC 20003		
Purpose of Disbursement (Optional) Backoffice		Aggregate Year-to-date	\$20,332.84
Full Name	Advantage Business Systems	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	5442 Executive Place	11/04/2011	\$518.86
City, State, Zip Code	Jackson, MS 39206-4103		
Purpose of Disbursement (Optional) Office Supply Rental		Aggregate Year-to-date	\$5,375.96
Full Name	Amerimail Direct	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	125 E South Street	11/04/2011	\$610.95
City, State, Zip Code	Jackson, MS 39201-5106		
Purpose of Disbursement (Optional) Printing		Aggregate Year-to-date	\$47,910.03

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED DISBURSEMENTS

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Amerimail Direct	11/04/2011	\$310.40
Mailing Address 125 E South Street		
City, State, Zip Code Jackson, MS 39201-5106		
Purpose of Disbursement (Optional) Printing	Aggregate Year-to-date	\$47,910.03
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Amerimail Direct	11/04/2011	\$1,293.84
Mailing Address 125 E South Street		
City, State, Zip Code Jackson, MS 39201-5106		
Purpose of Disbursement (Optional) Printing	Aggregate Year-to-date	\$47,910.03
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Amerimail Direct	11/04/2011	\$2,423.70
Mailing Address 125 E South Street		
City, State, Zip Code Jackson, MS 39201-5106		
Purpose of Disbursement (Optional) Printing	Aggregate Year-to-date	\$47,910.03
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Amerimail Direct	11/04/2011	\$1,070.00
Mailing Address 125 E South Street		
City, State, Zip Code Jackson, MS 39201-5106		
Purpose of Disbursement (Optional) Texting Platform	Aggregate Year-to-date	\$47,910.03
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Amerimail Direct	11/04/2011	\$1,070.00
Mailing Address 125 E South Street		
City, State, Zip Code Jackson, MS 39201-5106		
Purpose of Disbursement (Optional) Texting Platform	Aggregate Year-to-date	\$47,910.03
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Southern Telecommunications	11/04/2011	\$443.19
Mailing Address PO Box 12865		
City, State, Zip Code Jackson, MS 39236-2865		
Purpose of Disbursement (Optional) Office Phones	Aggregate Year-to-date	\$7,256.92

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED DISBURSEMENTS

Full Name	Atmos Energy	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	PO Box 790311	11/04/2011	\$17.34
City, State, Zip Code	Saint Louis, MO 63179-0311		
Purpose of Disbursement (Optional) Utilities		Aggregate Year-to-date	\$886.14
Full Name	Atmos Energy	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	PO Box 790311	11/04/2011	\$36.35
City, State, Zip Code	Saint Louis, MO 63179-0311		
Purpose of Disbursement (Optional) Utilities		Aggregate Year-to-date	\$886.14
Full Name	Majority Strategies	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	135 Professional Drive Suite 104	11/04/2011	\$150.00
City, State, Zip Code	Ponte Vedra Beach, FL 32082-6277		
Purpose of Disbursement (Optional) Graphic Design		Aggregate Year-to-date	\$312,774.04
Full Name	K12 Management Inc.	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	2300 Corporate Park Drive	11/07/2011	\$1,500.00
City, State, Zip Code	Herndon, VA 20171-4838		
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$1,500.00
Full Name	Lakeland Income Properties/Stone Creek Assests	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	PO Box 320219	11/07/2011	\$1,400.00
City, State, Zip Code	Flowood, MS 39232-0219		
Purpose of Disbursement (Optional) Office Rent		Aggregate Year-to-date	\$15,625.00
Full Name	Entergy	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	PO Box 8105	11/07/2011	\$1,066.59
City, State, Zip Code	Baton Rouge, LA 70891-8105		
Purpose of Disbursement (Optional) Utilities		Aggregate Year-to-date	\$5,779.43

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED DISBURSEMENTS

Full Name	Table 100 Conference Center	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	100 Ridge Way	11/09/2011	\$12,561.28
City, State, Zip Code	Flowood, MS 39232-3302		
Purpose of Disbursement (Optional) Event Expenses		Aggregate Year-to-date	\$12,561.28
Full Name	Anna Rogers, Inc.	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	4333 Lakeland Drive	11/09/2011	\$11,615.71
City, State, Zip Code	Flowood, MS 39232-8947		
Purpose of Disbursement (Optional) Fundraising Consulting		Aggregate Year-to-date	\$43,196.12
Full Name	Trustmark National Bank Credit Card Center	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	PO Box 114	11/11/2011	\$12,700.76
City, State, Zip Code	Jackson, MS 39205-0114		
Purpose of Disbursement (Optional) Credit Card Payment		Aggregate Year-to-date	\$129,932.30
Full Name	People Lease	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	689 Towne Center Boulevard Suite B	11/16/2011	\$2,190.95
City, State, Zip Code	Ridgeland, MS 39157-4900		
Purpose of Disbursement (Optional) Payroll		Aggregate Year-to-date	\$203,520.20
Full Name	People Lease	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	689 Towne Center Boulevard Suite B	12/01/2011	\$14,140.45
City, State, Zip Code	Ridgeland, MS 39157-4900		
Purpose of Disbursement (Optional) Payroll		Aggregate Year-to-date	\$203,520.20
Full Name	Atmos Energy	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	PO Box 790311	12/06/2011	\$17.34
City, State, Zip Code	Saint Louis, MO 63179-0311		
Purpose of Disbursement (Optional) Utilities		Aggregate Year-to-date	\$886.14

Name of Candidate or Committee Friends Of Tate Reeves
 Reporting Period 10/01/2011 through 12/31/2011

ITEMIZED DISBURSEMENTS

Full Name	Atmos Energy	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	PO Box 790311	12/06/2011	\$35.52
City, State, Zip Code	Saint Louis, MO 63179-0311		
Purpose of Disbursement (Optional) Utilities		Aggregate Year-to-date	\$886.14
Full Name	Majority Strategies	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	135 Professional Drive Suite 104	12/06/2011	\$6,084.53
City, State, Zip Code	Ponte Vedra Beach, FL 32082-6277		
Purpose of Disbursement (Optional) Printing		Aggregate Year-to-date	\$312,774.04
Full Name	Trustmark National Bank Credit Card Center	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	PO Box 114	12/14/2011	\$4,348.10
City, State, Zip Code	Jackson, MS 39205-0114		
Purpose of Disbursement (Optional) Credit Card Payment		Aggregate Year-to-date	\$129,932.30
Full Name	People Lease	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	689 Towne Center Boulevard Suite B	12/15/2011	\$1,570.45
City, State, Zip Code	Ridgeland, MS 39157-4900		
Purpose of Disbursement (Optional) Payroll		Aggregate Year-to-date	\$203,520.20
Full Name	Entergy	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	PO Box 8105	12/15/2011	\$156.90
City, State, Zip Code	Baton Rouge, LA 70891-8105		
Purpose of Disbursement (Optional) Utilities		Aggregate Year-to-date	\$5,779.43
Full Name	Advantage Business Systems	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	5442 Executive Place	12/14/2011	\$326.35
City, State, Zip Code	Jackson, MS 39206-4103		
Purpose of Disbursement (Optional) Equipment Rental		Aggregate Year-to-date	\$5,375.96

Name of Candidate or Committee

Friends Of Tate Reeves

Reporting Period

10/01/2011

through

12/31/2011

ITEMIZED DISBURSEMENTS

Full Name	Advantage Business Systems	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	5442 Executive Place	12/14/2011	\$34.15
City, State, Zip Code	Jackson, MS 39206-4103		
Purpose of Disbursement (Optional)	Equipment Rental	Aggregate Year-to-date	\$5,375.96
Full Name	D2 Tech Solutions, LLC	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	328 Kingsbridge Road	12/14/2011	\$257.87
City, State, Zip Code	Madison, MS 39110-8487		
Purpose of Disbursement (Optional)	IT Expense	Aggregate Year-to-date	\$3,312.83
Full Name	Southern Telecommunications	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	PO Box 12865	12/15/2011	\$426.40
City, State, Zip Code	Jackson, MS 39236-2865		
Purpose of Disbursement (Optional)	Office Phones	Aggregate Year-to-date	\$7,256.92
Full Name	Lakeland Income Properties/Stone Creek Assessts	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	PO Box 320219	12/15/2011	\$25.00
City, State, Zip Code	Flowood, MS 39232-0219		
Purpose of Disbursement (Optional)	Office Rent, Expenses	Aggregate Year-to-date	\$15,625.00
Full Name	D2 Tech Solutions, LLC	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	328 Kingsbridge Road	12/22/2011	\$257.87
City, State, Zip Code	Madison, MS 39110-8487		
Purpose of Disbursement (Optional)	IT Expense	Aggregate Year-to-date	\$3,312.83