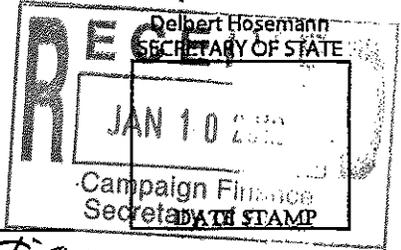


2011 ELECTION CYCLE



REPORT OF RECEIPTS AND DISBURSEMENTS



Name of Candidate TOMMY DEXTER CADLE  
 Address 1303 South 2nd St. Booneville County PRENTISS  
 Telephone 662-728-2131 Fax 728-1906  
 Office Sought House Rep. Dist 3 Political Party DEMOCRAT  
 Email Address tcadle@AVSIA.com

Check here if above is different from previous report

- May 10, 2011 Periodic Report (January 1, 2011, through April 30, 2011) \_\_\_\_\_ Mandatory
  - June 10, 2011 Periodic Report (May 1, 2011, through May 31, 2011) \_\_\_\_\_ Mandatory
  - July 8, 2011 Periodic Report (June 1, 2011, through June 30, 2011) \_\_\_\_\_ Mandatory
  - July 26, 2011 Pre-Election Report (July 1, 2011, through July 23, 2011) \_\_\_\_\_ Primary Candidates
  - August 16, 2011 Pre-Election Report (July 24, 2011, through August 13, 2011) \_\_\_\_\_ Runoff Candidates Only
  - October 10, 2011 Periodic Report (July 24, 2011, through September 30, 2011) \_\_\_\_\_ Mandatory
  - November 1, 2011 Pre-Election Report (October 1, 2011, through October 29, 2011) \_\_\_\_\_ Mandatory
  - November 22, 2011 Pre-Election Report (October 30, 2011, through November 19, 2011) \_\_\_\_\_ Runoff Candidates Only
  - January 10, 2012 Periodic Report (October 30, 2011, through December 31, 2011) \_\_\_\_\_ Mandatory
- Termination Report (Candidate will no longer accept contributions or make Campaign expenditures and has no outstanding campaign debt obligation)

**IMPORTANT**

- (1) Pre-Election reports are mandatory, even if no contributions or expenditures have occurred. In such case, the candidate shall submit a report indicating "0" (Zero) for total amount of reported contributions and expenditures during this period.
- (2) Until a Candidate files a Termination Report, annual and periodic reports must still be filed in accordance with Miss. Code Ann. § 23-15-807 (b) (ii) and (iii).
- (3) The receiving authority must be in actual receipt of the required reports by 5:00 p.m. on the reporting day. If the deadline falls on a weekend or a holiday, the office must be in actual receipt of the required reports by 5:00 p.m. on the first working day before the deadline. Faxed reports are acceptable.

**REPORTED CONTRIBUTIONS AND**

	Itemized + Non-Itemized =	This Period	Calendar Year-To-Date
Total amount of contributions	\$ 7062. <sup>95</sup> + \$ 895. <sup>00</sup>	\$ 7,957. <sup>95</sup>	\$ 33,444. <sup>95</sup>
Total amount of disbursements	\$ 10,616. <sup>35</sup>	\$ 10,616. <sup>35</sup>	\$ 24,585. <sup>20</sup>
Total amount of cash on hand		\$ 1,233. <sup>00</sup>	

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

X 1/10/12  
 Date

Authority: Refer to Miss. Code Ann. §23-15-801 (1972) et. seq. for statutory requirement.

Penalties: Failure to submit required reports, or failure to submit reports in accordance with statutory deadlines, or failure to submit valid reports shall result in fines of \$50 per day and / or prosecution in accordance with Miss. Code Ann. §§ 23-15-8-11 (1972).

SEND TO : 1. Candidates for Statewide, State district, multi-county and all legislative offices should return form to Secretary of State, Elections Division, P.O. Box 136, Jackson, MS 39205 or fax to 601-359-1499.  
 2. Candidates for county wide and county district offices should return forms to their county Circuit Clerk.

Name of Candidate or Committee Tommy D. Cadle  
 Reporting period Oct. 30, 2011 through Dec. 31, 2011

## ITEMIZED DISBURSEMENTS

A. Full name <u>WTVA</u>	Date (Mo., Day, Year) <u>11/1/11</u>	Amount of each disbursement this period \$ <u>7,550.<sup>00</sup></u>
Mailing Address <u>P.O. Box 350</u>	<u>11/1/11</u>	\$ <u>7,550.<sup>00</sup></u>
City, State, Zip Code <u>Tupelo MS 38802</u>	<u>11/1/11</u>	\$
Purpose of Disbursement (Optional) <u>Advertising</u>	Aggregate Year-to-date	\$ <u>7,550.<sup>00</sup></u>
B. Full name <u>Metrocast Communications</u>	Date (Mo., Day, Year) <u>11/2/11</u>	Amount of each disbursement this period \$ <u>1453.<sup>00</sup></u>
Mailing Address <u>P.O. Box 190</u>	<u>11/2/11</u>	\$ <u>1453.<sup>00</sup></u>
City, State, Zip Code <u>Booneville, MS 38829</u>	<u>11/2/11</u>	\$
Purpose of Disbursement (Optional) <u>Advertising</u>	Aggregate Year-to-date	\$ <u>1453.<sup>00</sup></u>
C. Full name <u>Banner Independent</u>	Date (Mo., Day, Year) <u>11/2/11</u>	Amount of each disbursement this period \$ <u>20.<sup>00</sup></u>
Mailing Address <u>208 N. Main St.</u>	<u>11/2/11</u>	\$ <u>20.<sup>00</sup></u>
City, State, Zip Code <u>Booneville, MS 38829</u>	<u>11/10/11</u>	\$ <u>105.<sup>00</sup></u>
Purpose of Disbursement (Optional) <u>Advertising</u>	Aggregate Year-to-date	\$ <u>125.<sup>00</sup></u>
D. Full name <u>Prentiss Co. Progress</u>	Date (Mo., Day, Year) <u>11/10/11</u>	Amount of each disbursement this period \$ <u>100.<sup>00</sup></u>
Mailing Address <u>1619 W. Chambers Dr.</u>	<u>11/10/11</u>	\$ <u>100.<sup>00</sup></u>
City, State, Zip Code <u>Booneville, MS 38829</u>	<u>11/10/11</u>	\$
Purpose of Disbursement (Optional) <u>Advertising</u>	Aggregate Year-to-date	\$ <u>100.<sup>00</sup></u>
E. Full name <u>Unity Broadcasting</u>	Date (Mo., Day, Year) <u>11/4/11</u>	Amount of each disbursement this period \$ <u>250.<sup>00</sup></u>
Mailing Address <u>504 N. Third Street</u>	<u>11/4/11</u>	\$ <u>250.<sup>00</sup></u>
City, State, Zip Code <u>Booneville, MS 38829</u>	<u>11/4/11</u>	\$
Purpose of Disbursement (Optional) <u>Advertising</u>	Aggregate Year-to-date	\$ <u>250.<sup>00</sup></u>
F. Full name <u>Wal-Mart</u>	Date (Mo., Day, Year) <u>11/7/11</u>	Amount of each disbursement this period \$ <u>108.<sup>41</sup></u>
Mailing Address	<u>11/7/11</u>	\$ <u>108.<sup>41</sup></u>
City, State, Zip Code <u>Booneville, MS 38829</u>	<u>11/7/11</u>	\$
Purpose of Disbursement (Optional) <u>Campaign Supplies</u>	Aggregate Year-to-date	\$ <u>108.<sup>41</sup></u>

Name of Candidate or Committee Tommy Dexter Cadle  
 Reporting period Oct. 30, 2011 through 11, 2011

## ITEMIZED DISBURSEMENTS

A. Full name	<u>Karl Brown</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u>508 Chemy St.</u>	<u>11/10/11</u>	\$ <u>85.<sup>00</sup></u>
City, State, Zip Code	<u>Boomerille, MS 38829</u>	<u>—/—/—</u>	\$
Purpose of Disbursement (Optional)	<u>Labor for campaign</u>	Aggregate Year-to-date	\$ <u>85.<sup>00</sup></u>
B. Full name	<u>Bush Signs</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u>300 May St.</u>	<u>11/4/11</u>	\$ <u>425.<sup>00</sup></u>
City, State, Zip Code	<u>Montgomery, AL 36104</u>	<u>—/—/—</u>	\$
Purpose of Disbursement (Optional)	<u>Signs</u>	Aggregate Year-to-date	\$ <u>425.<sup>00</sup></u>
C. Full name	<u>Kennys Barbque</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u>567-45 45</u>	<u>11/8/11</u>	\$ <u>119.<sup>94</sup></u>
City, State, Zip Code	<u>Corinth, MS 38834</u>	<u>—/—/—</u>	\$
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$ <u>119.<sup>94</sup></u>
D. Full name	<u>John Hanley</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u>P.O. Box 322</u>	<u>11/8/11</u>	\$ <u>100.<sup>00</sup></u>
City, State, Zip Code	<u>Boomerille, MS 38829</u>	<u>—/—/—</u>	\$
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$ <u>100.<sup>00</sup></u>
E. Full name	<u>Blake Hanley</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u>P.O. Box 322</u>	<u>11/8/11</u>	\$ <u>100.<sup>00</sup></u>
City, State, Zip Code	<u>Boomerille, MS 38829</u>	<u>—/—/—</u>	\$
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$ <u>100.<sup>00</sup></u>
F. Full name	<u>Wanda Cox</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u>P.O. Box 661</u>	<u>11/9/11</u>	\$ <u>200.<sup>00</sup></u>
City, State, Zip Code	<u>Boomerille, MS 38829</u>	<u>—/—/—</u>	\$
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$ <u>200.<sup>00</sup></u>

Name of Candidate or Committee Tommy Daffer Cagle  
 Reporting period Oct. 31, 2011 through Dec. 31, 2011

# ITEMIZED RECEIPTS

A. 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>Walden Enterprises</u>	<u>10/31/11</u>	\$ <u>1000<sup>00</sup></u>
Mailing Address <u>P.O. Box 250</u>	<u>__/__/__</u>	\$
City, State, Zip Code <u>Booneville, MS 38829</u>	<u>__/__/__</u>	\$
Name of Employer (Required) <u>Self</u>	<u>__/__/__</u>	\$
Occupation (Required) <u>Landlord</u>	Aggregate year-to-date	\$ <u>1000<sup>00</sup></u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Talmadge Finch</u>	<u>10/31/11</u>	\$ <u>500<sup>00</sup></u>
Mailing Address <u>P.O. Box 492</u>	<u>__/__/__</u>	\$
City, State, Zip Code <u>Booneville, MS 38829</u>	<u>__/__/__</u>	\$
Name of Employer (Required) <u>Retired - Dept. of Agriculture</u>	<u>__/__/__</u>	\$
Occupation (Required) _____	Aggregate year-to-date	\$ <u>500<sup>00</sup></u>
C. 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>Steve Holland</u>	<u>11/2/11</u>	\$ <u>1000<sup>00</sup></u>
Mailing Address <u>247 Old Planters Rd.</u>	<u>__/__/__</u>	\$
City, State, Zip Code <u>Plantersville, MS</u>	<u>__/__/__</u>	\$
Name of Employer (Required) <u>Holland Harris Funeral Home</u>	<u>__/__/__</u>	\$
Occupation (Required) <u>Director, Owner</u>	Aggregate year-to-date	\$ <u>1000<sup>00</sup></u>
D. 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>J+J Realty, LLC</u>	<u>11/2/11</u>	\$ <u>500<sup>00</sup></u>
Mailing Address <u>P.O. Box 890</u>	<u>__/__/__</u>	\$
City, State, Zip Code <u>Booneville, MS 38829</u>	<u>__/__/__</u>	\$
Name of Employer (Required) _____	<u>__/__/__</u>	\$
Occupation (Required) <u>Real Estate Co.</u>	Aggregate year-to-date	\$ <u>500<sup>00</sup></u>

Page 2 of 3Name of Candidate or Committee Tommy Cadle  
Reporting period Oct. 30 2011 through Dec. 31, 2011

## ITEMIZED RECEIPTS

A. 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>Jimmy Murphy</u>	<u>11/3/11</u>	\$ <u>1000<sup>00</sup></u>
Mailing Address <u>P.O. Box 33</u>	<u>__/__/__</u>	\$
City, State, Zip Code <u>Boonerville, MS 38829</u>	<u>__/__/__</u>	\$
Name of Employer (Required) <u>Retired, Pest Control Co.</u>	<u>__/__/__</u>	\$
Occupation (Required)	Aggregate year-to-date	\$ <u>1000<sup>00</sup></u>
B. 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>Gregory Keenum</u>	<u>11/4/11</u>	\$ <u>500<sup>00</sup></u>
Mailing Address <u>219 W. College</u>	<u>__/__/__</u>	\$
City, State, Zip Code <u>Boonerville MS 38829</u>	<u>__/__/__</u>	\$
Name of Employer (Required) <u>Attorney / Self</u>	<u>__/__/__</u>	\$
Occupation (Required)	Aggregate year-to-date	\$ <u>500<sup>00</sup></u>
C. Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>MS. Sierra Club</u>	<u>11/2/11</u>	\$ <u>250<sup>00</sup></u>
Mailing Address <u>P.O. Box 4335</u>	<u>__/__/__</u>	\$
City, State, Zip Code <u>Jackson, MS</u>	<u>__/__/__</u>	\$
Name of Employer (Required)	<u>__/__/__</u>	\$
Occupation (Required)	Aggregate year-to-date	\$
D. 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>Marietta Wood Supply</u>	<u>11/3/11</u>	\$ <u>500<sup>00</sup></u>
Mailing Address <u>349 Hwy 371, P.O. Box 225</u>	<u>__/__/__</u>	\$
City, State, Zip Code <u>Boonerville, MS 38829</u>	<u>__/__/__</u>	\$
Name of Employer (Required)	<u>__/__/__</u>	\$
Occupation (Required) <u>Sawmill</u>	Aggregate year-to-date	\$ <u>500<sup>00</sup></u>

Name of Candidate or Committee Tommy Cade  
 Reporting period Oct. 30, 2011 through Dec. 31, 2011

# ITEMIZED RECEIPTS

A. 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>Advantix LLC (in-kind)</u>		<u>11/2/11</u>	\$ <u>312.95</u>
Mailing Address <u>609 E. Church St.</u>		<u>__/__/__</u>	\$
City, State, Zip Code <u>Booneville, MS 38829</u>		<u>__/__/__</u>	\$
Name of Employer (Required) _____		<u>__/__/__</u>	\$
Occupation (Required) _____		Aggregate year-to-date	\$ <u>312.95</u>

B. 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>Larry Michael Transport Trailer (in-kind)</u>		<u>11/8/11</u>	\$ <u>1500.<sup>00</sup></u>
Mailing Address <u>502 Crossover Rd.</u>		<u>__/__/__</u>	\$
City, State, Zip Code <u>Tupelo, MS 38802</u>		<u>__/__/__</u>	\$
Name of Employer (Required) <u>Owner Transport Trailer</u>		<u>__/__/__</u>	\$
Occupation (Required) _____		Aggregate year-to-date	\$

C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name _____		<u>__/__/__</u>	\$
Mailing Address _____		<u>__/__/__</u>	\$
City, State, Zip Code _____		<u>__/__/__</u>	\$
Name of Employer (Required) _____		<u>__/__/__</u>	\$
Occupation (Required) _____		Aggregate year-to-date	\$

D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name _____		<u>__/__/__</u>	\$
Mailing Address _____		<u>__/__/__</u>	\$
City, State, Zip Code _____		<u>__/__/__</u>	\$
Name of Employer (Required) _____		<u>__/__/__</u>	\$
Occupation (Required) _____		Aggregate year-to-date	\$