2015 ELECTION CYCLE

RECEIVED
Delbert Hosemann
SECRETARY OF STATE
JUL 29 2015
Campaign Finance
Secretary of State

Candidate
REPORT OF RECEIPTS AND DISBURSEMENTS
2015 Election

Name of Candidate Vicki Slater

Address P.O. Box 23384 Jackson, MS 39225 County Hinds

Telephone (Work) (769) 257-7222 (Home) _____ (Fax) _____

Contact Name Will Godfrey Email Address info@slater2015.com

Office Sought Governor Political Party Democratic

☐ Check here if above is different from previous report

TYPE OF REPORT

☐ May 8, 2015 Periodic Report (January 1, 2015, through April 30, 2015) ..... Mandatory

☐ June 10, 2015 Periodic Report (May 1, 2015, through May 31, 2015) ..... Mandatory

☐ July 10, 2015 Periodic Report (June 1, 2015, through June 30, 2015) ..... Mandatory

☑ July 28, 2015 Pre-Election Report (July 1, 2015, through July 25, 2015) ..... Mandatory
All Primary Candidates and Political Committees

☐ August 18, 2015 Pre-Election Report (July 26, 2015, through August 15, 2015) ..... Runoff Candidates Only
All Primary Candidates and Political Committees in a Runoff Election

☐ October 9, 2015 Periodic Report (July 1, 2015, through September 30, 2015) ..... Mandatory

☐ October 27, 2015 Pre-Election Report ..... Mandatory
(Primary Election Winners report October 1, 2015, through October 24, 2015) *All Primary Candidates and Political Committees*
(Independent Candidates report January 1, 2015 through October 24, 2015)

☐ November 17, 2015 Pre-Runoff Report (October 25, 2015, through November 14, 2015) ..... Runoff Candidates Only
All Primary Candidates and Political Committees in a Runoff Election

☐ January 8, 2016 Periodic Report (October 1, 2015, through December 31, 2015) ..... 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 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 Secretary of State must be in actual receipt of the required reports by 5:00 p.m. on the reporting day. If the deadline falls on a weekend or a holiday, the office must be in actual receipt of the required reports by 5:00 p.m. on the first working day before the deadline. Faxed reports are acceptable.

REPORTED CONTRIBUTIONS AND DISBURSEMENTS

	(Itemized + non-Itemized)			This Period	Calendar Year-To-Date
Total amount of contributions	$54,127.00	+	$8,416.50	$62,543.50	$235,068.33
Total amount of disbursements	$68,522.24	+	$305.72	$68,827.96	$197,142.12
Total amount of cash on hand				$29,123.18	

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 _____ Date 7/28/2015

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 in accordance with Miss. Code Ann. §§23-15-811 and 813 (1972)

SEND TO: 1. Candidates for Statewide, State district, multi-county and all legislative offices should return form to Secretary of State, Elections Division, P.O. Box 136, Jackson, MS 39205 or fax to 601-576-2546.
2. Candidates for countywide and county district offices should return forms to their county Circuit Clerk.
3. Candidates for Municipal office should return forms to their Municipal Clerk.

SOS 10-14

01/22/2014 00:22 FAX 6013541599 001

Name of Candidate or Committee Vicki Slater

Reporting Period 7/1/2015 through 7/25/2015

ITEMIZED RECEIPTS

Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: AJA Management Mailing Address: 912 N West St City, State, Zip Code: Jackson, MS 39202-2566 Name of Employer (Required): Occupation (Required):	07/14/2015	$500.00
	Aggregate year-to-date	$500.00

Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Gregory Antollino Mailing Address: 666 Greenwich St City, State, Zip Code: New York, NY 10014-6339 Name of Employer (Required): Self Occupation (Required): Attorney	07/19/2015	$21.00
	Aggregate year-to-date	$221.00

Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Micah Belden Mailing Address: 100 N Travis St City, State, Zip Code: Sherman, TX 75090-0016 Name of Employer (Required): Self Occupation (Required): Attorney	07/23/2015	$200.00
	Aggregate year-to-date	$500.00

Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Sean E. Brown Mailing Address: PO Box 1809 City, State, Zip Code: Bethel, AK 99559-1809 Name of Employer (Required): Power & Brown Occupation (Required): Attorney	07/19/2015	$250.00
	Aggregate year-to-date	$250.00

SS04-05

Name of Candidate or Committee Vicki Slater

Reporting Period 7/1/2015 through 7/25/2015

ITEMIZED RECEIPTS

Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Joseph F. Bufogle Mailing Address: 15 W 6th St City, State, Zip Code: Tulsa, OK 74119-5407 Name of Employer (Required): Bufogle and Associates, PC Occupation (Required): Attorney	07/19/2015	$250.00
	Aggregate year-to-date	$250.00
Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: John Christopher Mailing Address: PO Box 982 City, State, Zip Code: Ridgeland, MS 39158-0982 Name of Employer (Required): Self Occupation (Required): Attorney	07/13/2015	$1,000.00
	Aggregate year-to-date	$1,000.00
Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: John Clark Mailing Address: PO Box 1268 City, State, Zip Code: Pascagoula, MS 39568-1268 Name of Employer (Required): Self Occupation (Required): Attorney	07/24/2015	$500.00
	Aggregate year-to-date	$1,000.00
Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Wilbur O. Colom Mailing Address: 406 3rd Ave N City, State, Zip Code: Columbus, MS 39701-3917 Name of Employer (Required): The Colom Law Firm Occupation (Required): Attorney	07/15/2015	$2,000.00
	Aggregate year-to-date	$3,000.00

SS04-05

Name of Candidate or Committee Vicki Slater

Reporting Period 7/1/2015 through 7/25/2015

ITEMIZED RECEIPTS

Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Martha Dah Dah Mailing Address: 3572 Arlington Ave City, State, Zip Code: Riverside, CA 92506-3932 Name of Employer (Required): Self Occupation (Required): Attorney	07/19/2015	$250.00
	Aggregate year-to-date	$250.00
Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Roger K. Doolittle Mailing Address: 460 Briarwood Dr City, State, Zip Code: Jackson, MS 39206-3057 Name of Employer (Required): Self Occupation (Required): Attorney	07/14/2015	$500.00
	Aggregate year-to-date	$1,000.00
Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Roger K. Doolittle Mailing Address: 460 Briarwood Dr City, State, Zip Code: Jackson, MS 39206-3057 Name of Employer (Required): Self Occupation (Required): Attorney	07/20/2015	$500.00
	Aggregate year-to-date	$1,000.00
Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Matt Eichelberger Mailing Address: 111 Any Street City, State, Zip Code: Any Town, MS 11111 Name of Employer (Required): Self Occupation (Required): Attorney	07/13/2015	$1,000.00
	Aggregate year-to-date	$1,000.00

SS04-05

Name of Candidate or Committee Vicki Slater

Reporting Period 7/1/2015 through 7/25/2015

ITEMIZED RECEIPTS

Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Joseph Fried Mailing Address: 3560 Lenox Rd NE City, State, Zip Code: Atlanta, GA 30326-4275 Name of Employer (Required): Fried Rogers Goldberg LLC Occupation (Required): Attorney	07/25/2015	$500.00
	Aggregate year-to-date	$500.00

Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☑ Other (please specify) Committee - Not a PAC	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Friends of Derrick T. Simmons Mailing Address: PO Box 711 City, State, Zip Code: Greenville, MS 38702-0711 Name of Employer (Required): Occupation (Required):	07/25/2015	$1,000.00
	Aggregate year-to-date	$1,000.00

Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☑ Other (please specify) Vendor	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Friends of Tim Johnson Mailing Address: PO Box 5264 City, State, Zip Code: Brandon, MS 39047-5264 Name of Employer (Required): Occupation (Required):	07/14/2015	$1,000.00
	Aggregate year-to-date	$2,000.00

Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Funderburg, Sessums & Paterson, PLLC Mailing Address: PO Box 13960 City, State, Zip Code: Jackson, MS 39236-3960 Name of Employer (Required): Occupation (Required):	07/15/2015	$500.00
	Aggregate year-to-date	$500.00

Name of Candidate or Committee Vicki Slater

Reporting Period 7/1/2015 through 7/25/2015

ITEMIZED RECEIPTS

Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Cathy Garrett Mailing Address: 26 Lake Barnett Dr City, State, Zip Code: Brandon, MS 39047-6278 Name of Employer (Required): Not employed Occupation (Required): Not employed	07/19/2015	$50.00
	Aggregate year-to-date	$300.00
Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Vicki L Gilliam Mailing Address: PO Box 1303 City, State, Zip Code: Clinton, MS 39060-1303 Name of Employer (Required): Self Occupation (Required): Attorney	07/12/2015	$1,000.00
	Aggregate year-to-date	$2,000.00
Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: R. Kevin Hamilton Mailing Address: 911 26th Ave City, State, Zip Code: Meridian, MS 39301-4914 Name of Employer (Required): The Hamilton Law Firm Occupation (Required): Attorney	07/23/2015	$250.00
	Aggregate year-to-date	$250.00
Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Robert J Hommel Mailing Address: 9304 E Raintree Dr City, State, Zip Code: Scottsdale, AZ 85260-7768 Name of Employer (Required): Robert J. Hommel, PC Occupation (Required): Attorney	07/19/2015	$500.00
	Aggregate year-to-date	$500.00

SS04-05

Name of Candidate or Committee Vicki Slater

Reporting Period 7/1/2015 through 7/25/2015

ITEMIZED RECEIPTS

Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Casey Ann Hughes Mailing Address: 214 S Pearl St City, State, Zip Code: Natchez, MS 39120-3421 Name of Employer (Required): Self Occupation (Required): Management consultant	07/19/2015	$25.00
	Aggregate year-to-date	$225.00
Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Nancy Iler Mailing Address: 3305 Braemar Rd City, State, Zip Code: Shaker Hts, OH 44120-3331 Name of Employer (Required): Not employed Occupation (Required): Lawyer	07/19/2015	$200.00
	Aggregate year-to-date	$1,200.00
Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Janice Jackson Mailing Address: 113 Greens View Dr City, State, Zip Code: Madison, MS 39110-8050 Name of Employer (Required): Self Occupation (Required): Attorney	07/24/2015	$100.00
	Aggregate year-to-date	$850.00
Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: June 6, 1966, LLC Mailing Address: 410 S President St City, State, Zip Code: Jackson, MS 39201-5007 Name of Employer (Required): Occupation (Required):	07/15/2015	$1,000.00
	Aggregate year-to-date	$1,000.00

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Reporting Period 7/1/2015 through 7/25/2015

ITEMIZED RECEIPTS

Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☑ Other (please specify) Vendor	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Kitchens Law Firm Mailing Address: PO Box 799 City, State, Zip Code: Crystal Springs, MS 39059-0799 Name of Employer (Required): Occupation (Required):	07/24/2015	$1,000.00
	Aggregate year-to-date	$1,500.00

Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Diaz Lehr Mailing Address: 110 W C St City, State, Zip Code: San Diego, CA 92101-3906 Name of Employer (Required): Diaz & Lehr Occupation (Required): Personal Injury Attorneys	07/23/2015	$1,000.00
	Aggregate year-to-date	$1,000.00

Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Michael Lewis Mailing Address: PO Box 2430 City, State, Zip Code: Oxford, MS 38655-6200 Name of Employer (Required): Self Occupation (Required): Attorney	07/19/2015	$1,000.00
	Aggregate year-to-date	$1,000.00

Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Pauline Shuler Lewis Mailing Address: PO Box 2430 City, State, Zip Code: Oxford, MS 38655-6200 Name of Employer (Required): Lewis & Lewis Occupation (Required): Attorney At Law	07/19/2015	$1,000.00
	Aggregate year-to-date	$1,000.00

SS04-05

Name of Candidate or Committee Vicki Slater

Reporting Period 7/1/2015 through 7/25/2015

ITEMIZED RECEIPTS

Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Louise Lipman Mailing Address: City, State, Zip Code: New York, NY 10014 Name of Employer (Required): Self Occupation (Required): Psychotherapist	07/24/2015	$50.00
	Aggregate year-to-date	$550.00
Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: George Scott Luter Mailing Address: PO Box 3656 City, State, Zip Code: Jackson, MS 39207-3656 Name of Employer (Required): Occupation (Required): Attorney	07/10/2015	$250.00
	Aggregate year-to-date	$250.00
Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Don Malarcik Mailing Address: 54 E Mill St City, State, Zip Code: Akron, OH 44308-1400 Name of Employer (Required): Gorman, Malarcik& Pierce Occupation (Required): Attorney	07/19/2015	$250.00
	Aggregate year-to-date	$250.00
Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Cynthia Mitchell Mailing Address: 1620 Anne Dr City, State, Zip Code: Clarksdale, MS 38614-1802 Name of Employer (Required): Merkel & Cocke Occupation (Required): attorney	07/19/2015	$1,000.00
	Aggregate year-to-date	$1,000.00

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Name of Candidate or Committee Vicki Slater

Reporting Period 7/1/2015 through 7/25/2015

ITEMIZED RECEIPTS

Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Newman & Newman Mailing Address: Trustmark Bldg, Suite 539 City, State, Zip Code: Jackson, MS 39201 Name of Employer (Required): Occupation (Required):	07/14/2015	$500.00
	Aggregate year-to-date	$500.00

Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Susan Nugent Mailing Address: 234 Church St City, State, Zip Code: New Haven, CT 06510-1804 Name of Employer (Required): Self Occupation (Required): Attorney	07/24/2015	$500.00
	Aggregate year-to-date	$500.00

Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Jerry O'Keefe Mailing Address: 510 Beach Blvd City, State, Zip Code: Biloxi, MS 39530-4405 Name of Employer (Required): Occupation (Required): Retired Artist	07/02/2015	$500.00
	Aggregate year-to-date	$500.00

Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: David Owen Mailing Address: PO Box 27 City, State, Zip Code: Columbus, MS 39703-0027 Name of Employer (Required): Self Occupation (Required): Attorney	07/14/2015	$260.00 IN-KIND CONTRIBUTION DESCRIPTION:
	Aggregate year-to-date	$760.00

SS04-05

Name of Candidate or Committee Vicki Slater

Reporting Period 7/1/2015 through 7/25/2015

ITEMIZED RECEIPTS

Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: David Owen Mailing Address: PO Box 27 City, State, Zip Code: Columbus, MS 39703-0027 Name of Employer (Required): Self Occupation (Required): Attorney	07/23/2015	$500.00
	Aggregate year-to-date	$760.00
Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	**Date (Mo., Day, Year)**	**Amount of each receipt this period**
Full Name: Eleanor Faye Peterson Mailing Address: 310 Edgewood Terrace Dr City, State, Zip Code: Jackson, MS 39206-6223 Name of Employer (Required): The Peterson Group, LLC Occupation (Required): Attorney	07/24/2015	$50.00
	Aggregate year-to-date	$250.00
Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	**Date (Mo., Day, Year)**	**Amount of each receipt this period**
Full Name: Crymes G. Pittman Mailing Address: PO Box 22985 City, State, Zip Code: Jackson, MS 39225-2985 Name of Employer (Required): Self Occupation (Required): Attorney	07/02/2015	$2,500.00
	Aggregate year-to-date	$5,000.00
Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	**Date (Mo., Day, Year)**	**Amount of each receipt this period**
Full Name: Jason Pollan Mailing Address: PO Box 1023 City, State, Zip Code: Jackson, MS 39215-1023 Name of Employer (Required): self Occupation (Required): Attorney	07/24/2015	$250.00
	Aggregate year-to-date	$250.00

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Name of Candidate or Committee Vicki Slater

Reporting Period 7/1/2015 through 7/25/2015

ITEMIZED RECEIPTS

Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☑ Other (please specify) Vendor	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Porter & Malouf, P.A. Mailing Address: PO Box 12768 City, State, Zip Code: Jackson, MS 39236-2768 Name of Employer (Required): Occupation (Required):	07/14/2015	$6,000.00
	Aggregate year-to-date	$6,000.00
Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☑ Other (please specify) Vendor	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: R A Haxton Construction Co. Mailing Address: 37 Ayres Rd City, State, Zip Code: Natchez, MS 39120-9506 Name of Employer (Required): Occupation (Required):	07/23/2015	$500.00
	Aggregate year-to-date	$1,000.00
Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Joe Roberts Mailing Address: PO Box 22985 City, State, Zip Code: Jackson, MS 39225-2985 Name of Employer (Required): Self Occupation (Required): Attorney	07/07/2015	$500.00
	Aggregate year-to-date	$500.00
Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Jimmy Robertson Mailing Address: City, State, Zip Code: Jackson, MS Name of Employer (Required): Wise Carter Occupation (Required): Attorney	07/08/2015	$500.00
	Aggregate year-to-date	$500.00

SS04-05

Name of Candidate or Committee Vicki Slater

Reporting Period 7/1/2015 through 7/25/2015

ITEMIZED RECEIPTS

Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Suzanne Howell Robinson Mailing Address: 8840 County Road 436 City, State, Zip Code: Water Valley, MS 38965-3498 Name of Employer (Required): None Occupation (Required): None	07/19/2015	$21.00
	Aggregate year-to-date	$201.00
Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: George B. Schimmel Mailing Address: 3630 Kings Hwy City, State, Zip Code: Jackson, MS 39216-3321 Name of Employer (Required): N/A Occupation (Required): Retired	07/25/2015	$200.00
	Aggregate year-to-date	$1,600.00
Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Kim Schlagel Mailing Address: 533 Willow Valley Cir City, State, Zip Code: Brandon, MS 39047-7068 Name of Employer (Required): Bloom Health Services For Women Occupation (Required): Nurse Practitioner	07/25/2015	$50.00
	Aggregate year-to-date	$300.00
Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Savina O. Schoenhofer Mailing Address: 1841 Howard St City, State, Zip Code: Jackson, MS 39202-1326 Name of Employer (Required): not employed Occupation (Required): not employed	07/25/2015	$100.00
	Aggregate year-to-date	$320.15

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Name of Candidate or Committee Vicki Slater

Reporting Period 7/1/2015 through 7/25/2015

ITEMIZED RECEIPTS

Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Simmons and Simmons, PLLC Mailing Address: PO Box 1854 City, State, Zip Code: Greenville, MS 38702-1854 Name of Employer (Required): Occupation (Required):	07/25/2015	$500.00
	Aggregate year-to-date	$500.00

Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Stacey Sims Mailing Address: 48 Liberty Pl City, State, Zip Code: Hattiesburg, MS 39402-8613 Name of Employer (Required): Self Occupation (Required): Attorney	07/19/2015	$500.00
	Aggregate year-to-date	$500.00

Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Vicki Slater Mailing Address: 121 Fenwick Cir City, State, Zip Code: Madison, MS 39110-7783 Name of Employer (Required): Self Occupation (Required): Attorney	07/21/2015	$15,000.00
	Aggregate year-to-date	$27,681.00

Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Francis Springer Mailing Address: 205 Bradfield Rd City, State, Zip Code: Madison, MS 39110-7323 Name of Employer (Required): Springer Law Office, PLLC Occupation (Required): Attorney	07/19/2015	$250.00
	Aggregate year-to-date	$250.00

SS04-05

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ITEMIZED RECEIPTS

Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: The Hadley Law Firm Mailing Address: PO Box 1347 City, State, Zip Code: Bay Minette, AL 36507-1347 Name of Employer (Required): Occupation (Required):	07/06/2015	$500.00
	Aggregate year-to-date	$500.00

Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: The Hamilton Law Firm, PLLC Mailing Address: PO Box 1511 City, State, Zip Code: Meridian, MS 39302-1511 Name of Employer (Required): Occupation (Required):	07/24/2015	$500.00
	Aggregate year-to-date	$500.00

Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: F.M. Turner III Mailing Address: PO Box 15128 City, State, Zip Code: Hattiesburg, MS 39404-5128 Name of Employer (Required): Self Occupation (Required): Attorney	07/24/2015	$1,000.00
	Aggregate year-to-date	$1,000.00

Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Nelson Tyrone Mailing Address: 125 Palisades Rd NE City, State, Zip Code: Atlanta, GA 30309-1532 Name of Employer (Required): Self Occupation (Required): Lawyer	07/23/2015	$1,000.00
	Aggregate year-to-date	$1,000.00

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Name of Candidate or Committee Vicki Slater

Reporting Period 7/1/2015 through 7/25/2015

ITEMIZED RECEIPTS

Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Tyler Vail Mailing Address: 3101 Whitehall Rd City, State, Zip Code: Birmingham, AL 35209-4016 Name of Employer (Required): Hollis - Wright Occupation (Required): lawyer	07/19/2015	$1,000.00
	Aggregate year-to-date	$1,000.00
Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Paul Veal Mailing Address: 871 Ranson Rd City, State, Zip Code: Columbus, MS 39701-8638 Name of Employer (Required): Occupation (Required): Chiropractor	07/15/2015	$300.00
	Aggregate year-to-date	$300.00
Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Lori White Mailing Address: 1252 W Commerce St City, State, Zip Code: Aberdeen, MS 39730-2202 Name of Employer (Required): White Oil Co. Occupation (Required): Accountant	07/19/2015	$1,000.00
	Aggregate year-to-date	$1,000.00
Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Roberts Wilson III Mailing Address: PO Box 2428 City, State, Zip Code: Oxford, MS 38655-6200 Name of Employer (Required): Self Occupation (Required): Attorney	07/02/2015	$1,000.00
	Aggregate year-to-date	$1,000.00

SS04-05

Name of Candidate or Committee Vicki Slater

Reporting Period 7/1/2015 through 7/25/2015

ITEMIZED DISBURSEMENTS

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
A to Z Printing Mailing Address: 2125 Tv Rd City, State, Zip Code: Jackson, MS 39204-4025	07/03/2015	$356.40
Purpose of Disbursement (Optional)	Aggregate year-to-date	$356.40
Full Name: Bill Washington Enterprise Mailing Address: PO Box 931 City, State, Zip Code: Flora, MS 39071-0931	07/01/2015	$1,750.00
Purpose of Disbursement (Optional)	Aggregate year-to-date	$9,240.00
Full Name: Bill Washington Enterprise Mailing Address: PO Box 931 City, State, Zip Code: Flora, MS 39071-0931	07/15/2015	$1,750.00
Purpose of Disbursement (Optional)	Aggregate year-to-date	$9,240.00
Full Name: Bill Washington Enterprise Mailing Address: PO Box 931 City, State, Zip Code: Flora, MS 39071-0931	07/22/2015	$300.00
Purpose of Disbursement (Optional)	Aggregate year-to-date	$9,240.00
Full Name: Dallas Printing Mailing Address: PO Box 902 City, State, Zip Code: Jackson, MS 39205-0902	07/02/2015	$743.65
Purpose of Disbursement (Optional)	Aggregate year-to-date	$3,049.34
Full Name: Dallas Printing Mailing Address: PO Box 902 City, State, Zip Code: Jackson, MS 39205-0902	07/02/2015	$695.50
Purpose of Disbursement (Optional)	Aggregate year-to-date	$3,049.34

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Name of Candidate or Committee Vicki Slater

Reporting Period 7/1/2015 through 7/25/2015

ITEMIZED DISBURSEMENTS

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Roosevelt Daniels Mailing Address: 2002 Lake Trace Dr City, State, Zip Code: Jackson, MS 39211-3327 Purpose of Disbursement (Optional):	07/16/2015	$650.00
	Aggregate year-to-date	$650.00
Full Name: Dem Sign Mailing Address: 5530 Fox Run Dr City, State, Zip Code: Corpus Christi, TX 78413-4689 Purpose of Disbursement (Optional):	07/06/2015	$671.25
	Aggregate year-to-date	$4,808.75
Full Name: Dem Sign Mailing Address: 5530 Fox Run Dr City, State, Zip Code: Corpus Christi, TX 78413-4689 Purpose of Disbursement (Optional):	07/09/2015	$4,137.50
	Aggregate year-to-date	$4,808.75
Full Name: Entergy Mississippi, Inc. Mailing Address: PO Box 8105 City, State, Zip Code: Baton Rouge, LA 70891-8105 Purpose of Disbursement (Optional):	07/02/2015	$482.31
	Aggregate year-to-date	$1,470.48
Full Name: Focus Matters Mailing Address: 2207 N Broadway Ave City, State, Zip Code: Oklahoma City, OK 73103-4311 Purpose of Disbursement (Optional):	07/07/2015	$250.00
	Aggregate year-to-date	$250.00
Full Name: Joe Griffin Mailing Address: 1058 Ridgewood Pl City, State, Zip Code: Jackson, MS 39211-2002 Purpose of Disbursement (Optional):	07/03/2015	$350.00
	Aggregate year-to-date	$350.00

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Name of Candidate or Committee Vicki Slater

Reporting Period 7/1/2015 through 7/25/2015

ITEMIZED DISBURSEMENTS

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Jackson Advocate Mailing Address: 100 W Hamilton St City, State, Zip Code: Jackson, MS 39202-3237	07/09/2015	$3,124.70
Purpose of Disbursement (Optional)	Aggregate year-to-date	$3,124.70
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mississippi Department of Revenue Mailing Address: PO Box 1033 City, State, Zip Code: Jackson, MS 39215-1033	07/15/2015	$787.00
Purpose of Disbursement (Optional)	Aggregate year-to-date	$787.00
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
NGP VAN, Inc Mailing Address: 1101 15th St NW City, State, Zip Code: Washington, DC 20005-5006	07/02/2015	$75.00
Purpose of Disbursement (Optional)	Aggregate year-to-date	$225.00
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Paychex of New York, LLC Mailing Address: 401 Whitney Ave City, State, Zip Code: Gretna, LA 70056-2507	07/02/2015	$91.00
Purpose of Disbursement (Optional)	Aggregate year-to-date	$41,091.70
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Paychex of New York, LLC Mailing Address: 401 Whitney Ave City, State, Zip Code: Gretna, LA 70056-2507	07/02/2015	$6,264.58
Purpose of Disbursement (Optional)	Aggregate year-to-date	$41,091.70
Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Paychex of New York, LLC Mailing Address: 401 Whitney Ave City, State, Zip Code: Gretna, LA 70056-2507	07/02/2015	$14,194.17
Purpose of Disbursement (Optional)	Aggregate year-to-date	$41,091.70

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Name of Candidate or Committee Vicki Slater

Reporting Period 7/1/2015 through 7/25/2015

ITEMIZED DISBURSEMENTS

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Ridgway Management Inc.		
Mailing Address: PO Box 187	07/06/2015	$1,750.00
City, State, Zip Code: Jackson, MS 39205-0187		
Purpose of Disbursement (Optional)	Aggregate year-to-date	$7,158.38

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Sarah Rivin		
Mailing Address	07/02/2015	$749.18
City, State, Zip Code: Houston, TX		
Purpose of Disbursement (Optional)	Aggregate year-to-date	$3,092.18

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
Spot On Productions		
Mailing Address: 1502 Myrtle St	07/02/2015	$850.00
City, State, Zip Code: Jackson, MS 39202-1331		
Purpose of Disbursement (Optional)	Aggregate year-to-date	$850.00

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
The Beytin Agency, LLC		
Mailing Address: 2533 Wilson Blvd	07/22/2015	$25,000.00
City, State, Zip Code: Arlington, VA 22201-3815		
Purpose of Disbursement (Optional)	Aggregate year-to-date	$25,000.00

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
The Daniels Group		
Mailing Address: 1058 Ridgewood Pl	07/02/2015	$1,750.00
City, State, Zip Code: Jackson, MS 39211-2002		
Purpose of Disbursement (Optional)	Aggregate year-to-date	$8,200.00

Full Name	Date (Mo., Day, Year)	Amount of each disbursement this period
The Daniels Group		
Mailing Address: 1058 Ridgewood Pl	07/15/2015	$1,750.00
City, State, Zip Code: Jackson, MS 39211-2002		
Purpose of Disbursement (Optional)	Aggregate year-to-date	$8,200.00

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