2016 ELECTION CYCLE

Delbert Hosemann
SECRETARY OF STATE

Candidate
REPORT OF RECEIPTS AND DISBURSEMENTS
2016 Senate District 25 Special Election

DATE STAMP

Name of Candidate_____

Address _____**County**_____

Telephone (Work)_____**(Home)**_____**(Fax)**_____

Contact Name_____ **Email Address**_____

Office Sought_____ **Political Party**_____

☐ **Check here if above is different from previous report**

TYPE OF REPORT

_____ **March 1, 2016 Periodic Report** (January 1, 2016, through February 27, 2016) .....**Mandatory**

_____ **March 22, 2016 Pre-Runoff Report** (February 28, 2016, through March 19, 2016).....**Runoff Candidates Only**

All Candidates and Political Committees in a Runoff Election

_____ **January 31, 2017 Annual Report** (January 1, 2016, through December 31, 2016).....**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 $		+ $	$	$
Total amount of disbursements $		+ $	$	$
Total amount of cash on hand			$	

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**

Authority: Refer to Miss. Code Ann. §23-15-801 (1972) et. seq. for statutory requirements.
Penalties: Failure to submit required reports, or failure to submit reports in accordance with statutory deadlines, or failure to submit valid reports shall result in fines of $50 per day and/or prosecution in accordance with Miss. Code Ann. §§ 23-15-811 and 813 (1972).

SEND TO: 1. Candidates for Statewide, State district, multi-county and all legislative offices should return form to Secretary of State, Elections Division, P. O. Box 136, Jackson, MS 39205 or fax to 601-576-2545. 2. Candidates for countywide and county district offices should return forms to their county Circuit Clerk. 3. Municipal candidates return forms to the Municipal Clerk.