OFFICE OF THE MISSISSIPPI SECRETARY OF STATE

STATEMENT OF ORGANIZATION FOR A POLITICAL COMMITTEE

1. Name of committee John Grant Election

2. Address of committee 699 Spring Lake Dr.

City, State, Zip Pearl, MS 39208 Email jgrant4@aol.com

Phone 6,019,390,021 FAX

Contact Person Julia Grant Phone 6019390021 Email jgrant4@aol.com

Contact Full Address 699 Spring Lake Dr., Pearl, MS 39208

3. Is the committee registered with the Federal Election Commission (FEC)? _____ Yes
FEC Identification Number _____ X No

4. If the committee is authorized by a candidate:
Name of Candidate John Grant
Address 699 Spring Lake Dr., Pearl, MS 39208
Office sought 20th District, Chancery Judge, Place Two Party Non-Partisan

5. Describe, as concisely as possible, the purpose of this committee and, if applicable, the identification of affiliated or connected organizations:
To re-elect John Grant Chancery Judge. No affiliated or connected organizations known at this time.

6. Names and addresses of all officers: (attach separate sheet if necessary)

A. Name Julia Grant Office Chairperson/Director
Address 699 Spring Lake Drive, Pearl, MS 39208

B. Name Jamie Butler Office Treasurer
Address 1868 Monterey Road, Florence, MS 39073

C. Name _____ Office _____
Address _____

D. Name _____ Office _____
Address _____

7. Director Julia Grant (Type Name) Julia Grant (Signature) 5/7/14 (Date)

8. Treasurer Jamie Butler (Type Name) Jamie Butler (Signature) 5/7/2014 (Date)

Send To:
1. Political Committees associated with statewide or multi-county elections should return the form to: **Delbert Hosemann, Secretary of State, Elections Division, P.O. Box 136, Jackson MS 39205.**
2. Political Committees associated with single county elections should return this form to their County Circuit Clerk.
3. Political Committees associated with municipal elections should return this form to their Municipal Clerk.

RECEIVED
MAY 09 2014
ELECTIONS DIVISION