2014 ELECTION CYCLE

Delbert Hosemann
SECRETARY OF STATE

RECEIVED
OCT 27 2014
Campaign Finance
Secretary of State

Political Committee
REPORT OF RECEIPTS AND DISBURSEMENTS
2014 Judicial Election

Name of Committee Lee S Coleman Campaign Acct

Address P.O. Box 1001 Columbus MS 39703 County Lowndes

Telephone 662-418-7176 (Fax) 662-494-6302

Treasurer BRUFF SANDERS Email bsanders@bankfirstfs.com

☐ Check here if above is different from previous report

TYPE OF REPORT

_____ **May 9, 2014 Periodic Report** (January 1, 2014, through April 30, 2014) ..... **Mandatory**

_____ **June 10, 2014 Periodic Report** (May 1, 2014, through May 31, 2014) ..... **Mandatory**

_____ **July 10, 2014 Periodic Report** (June 1, 2014, through June 30, 2014) ..... **Mandatory**

_____ **October 10, 2014 Periodic Report** (July 1, 2014, through September 30, 2014) ..... **Mandatory**

✓ **October 28, 2014 Pre-Election Report** (October 1, 2014, through October 25, 2014) ..... **Mandatory**

_____ **November 18, 2014 Pre-Runoff Report** (October 26, 2014, through November 15, 2014) ..... **Runoff Candidates**

_____ **January 9, 2015 Periodic Report** (October 1, 2014, through December 31, 2014) ..... **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	$ 2050 + 1300	$ 3350.00	$ 55082.00
Total amount of disbursements	$ 6307 + 0	$ 6307.00	$ 46061.53
Total amount of cash on hand		$ <2957>	

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 Director or Treasurer: [signature] Treas

Date: 10/27/14

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. Candidates for Municipal office should return forms to the Municipal Clerk.

SOS 05-13

Name of Candidate or Committee: Lee S Coleman

Reporting period: 10/1/14 through 10/25/14

ITEMIZED RECEIPTS

A. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Jones Walker LLP Attorneys At Law	/ /	$ 500.00
Mailing Address: 190 E Capital St Suite 800	/ /	$
City, State, Zip Code: Jackson MS 39201	/ /	$
Name of Employer (Required): Jones Walker LLP	/ /	$
Occupation (Required): Attorneys	Aggregate year-to-date	$ 500.00

B. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Charles Easley	/ /	$ 1000.00
Mailing Address: P.O. Box 1472	/ /	$
City, State, Zip Code: Columbus MS 39703	/ /	$
Name of Employer (Required):	/ /	$
Occupation (Required):	Aggregate year-to-date	$ 1000.00

C. Source ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Roy E Carpenter Jr Attorney At Law	/ /	$ 250.00
Mailing Address: P.O. Box 56	/ /	$
City, State, Zip Code: Starkville MS 39760	/ /	$
Name of Employer (Required): Self Employed	/ /	$
Occupation (Required): Attorney	Aggregate year-to-date	$ 250.00

D. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Ray or Helen Childress	10 / 8 / 14	$ 300.00
Mailing Address: 2831 Curtis Orman Rd	/ /	$
City, State, Zip Code: West Point MS 39773	/ /	$
Name of Employer (Required): Retired	/ /	$
Occupation (Required): Retired	Aggregate year-to-date	$ 300.00

Name of Candidate or Committee Lee S Coleman

Reporting period 10/1/14 through 10/25/14

ITEMIZED DISBURSEMENTS

A. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
John Morgan Hughes	10/9/14	$ 1600.00
Mailing Address 1737 Winchester	10/9/14	$ 1000.00
City, State, Zip Code Jackson MS 39211		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 25,713.08

B. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
The Republic Coroup	10/9/14	$ 1000.00
Mailing Address 210 E Capital St Suite 1900	__/__/__	$
City, State, Zip Code Jackson MS 39201		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 5000.00

C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Peggy Coleman	10/16/14	$ 550.00
Mailing Address P.O. Box 1033	__/__/__	$
City, State, Zip Code West Point MS 39773		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 550.00

D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
John Morgan Hughes	10/21/14	$ 432.00
Mailing Address 1737 Winchester	__/__/__	$
City, State, Zip Code Jackson MS 39211		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 26,145.08

E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Griffin Strategies	10/20/14	$ 725.00
Mailing Address P.O. Box 1124	__/__/__	$
City, State, Zip Code Starkville MS 39760		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 725.00

F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
The Packet	9/23/14	$ 1000.00
Mailing Address	__/__/__	$
City, State, Zip Code		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 1000.00