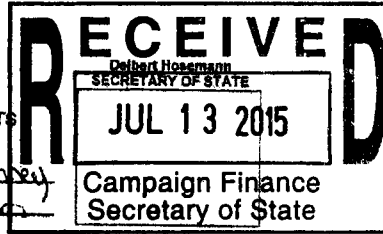


7/10/2015

JUNE REPORT 001.jpg

2016 ELECTION CYCLE



Political Committee
REPORT OF RECEIPTS AND DISBURSEMENTS
 2015 Election

Name of Committee Taxpayers for Alisha Nelson McElhenney
 Address 2012 Poplarwood River Rd. County Jackson
 Telephone (601) 881-3745 Fax N/A

Treasurer Glenn Linda Pennington Email Address Lpennington@gmail.com
 Check here if above is different from previous report
Alisha McElhenney alishadne@gmail.com

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 Minutes report October 1, 2015, through October 24, 2015)
 (Independent Candidates report January 1, 2015 through October 24, 2015)
 All Candidates and Political Committees
- November 17, 2015 Pre-Runoff Report (October 25, 2015, through November 14, 2015) Runoff Candidates Only
All Candidates and Political Committees in a Runoff Election
- January 5, 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. § 23-16-607 (b) (8) and (9).

(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 DISBURSEMENTS			
Itemized +	Non-Itemized	This Period	Calendar Year-To-Date
Total amount of contributions	\$ 200 ⁰⁰ + \$ 150 ⁰⁰	\$ 350 ⁰⁰	\$ 8,740 ⁰⁰
Total amount of disbursements	\$ 2,358 ⁰⁰ - 0-	\$ 2,358 ⁰⁰	\$ 4,155 ⁰⁰
Total amount of cash on hand		\$ 4,252 ⁰⁰	

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 _____ Date 7/10/15

Authority: Refer to Miss. Code Ann. §23-16-401 (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. §§ 23-16-411 and 415 (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 39208 or fax to (601) 878-3245
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 99-14

7/10/2015

REPORT 2 001.jpg

Name of Candidate or Committee Alisha Nelson McElhenney
Reporting period June 1, 2015 through June 30, 2015

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Loan <input type="checkbox"/>		Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify): _____			
Full name	<u>Thomas Milnyard</u>	<u>10/15/15</u>	<u>\$ 2000.00</u>
Mailing Address	<u>1651 Green Drive South</u>		
City, State, Zip Code	<u>Hernando MS 38632</u>		
Name of Employer (Required)	<u>Game Whopper, Summer & Cannon, Inc</u>		
Occupation (Required)	<u>Engineer</u>	Aggregate year-to-date	<u>\$ 2000.00</u>
B. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/>		Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify): _____			
Full name			
Mailing Address			
City, State, Zip Code			
Name of Employer (Required)			
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"/>		Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify): _____			
Full name			
Mailing Address			
City, State, Zip Code			
Name of Employer (Required)			
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"/>		Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify): _____			
Full name			
Mailing Address			
City, State, Zip Code			
Name of Employer (Required)			
Occupation (Required)		Aggregate year-to-date	

9804-05

Name of Candidate or Committee Alisha Nelson McElhenney
Reporting period 6/1/15 through 6/30/15

ITEMIZED DISBURSEMENTS

A. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Campaign Sidekick LLC</u>	<u>6/10/15</u>	<u>\$ 599.00</u>
Mailing Address <u>1550 Old Annette Rd.</u>		
City, State, Zip Code <u>Aledo, TX 76005</u>	<u>___/___/___</u>	\$
Purpose of Disbursement (Optional) <u>Services Payment</u>	Aggregate Year-to-date	\$ <u>1797.00</u>
B. Full name <u>Dirt Cheap Signs, Inc.</u>	Date (Mo., Day, Year) <u>6/26/15</u>	Amount of each disbursement this period <u>\$ 1759.09</u>
Mailing Address <u>7301 Bar K Ranch Rd.</u>		
City, State, Zip Code <u>Loop Vista, TX</u>	<u>___/___/___</u>	\$
Purpose of Disbursement (Optional) <u>Purchase of signs</u>	Aggregate Year-to-date	\$ <u>1759.09</u>
C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u>___/___/___</u>	\$
City, State, Zip Code	<u>___/___/___</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u>___/___/___</u>	\$
City, State, Zip Code	<u>___/___/___</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u>___/___/___</u>	\$
City, State, Zip Code	<u>___/___/___</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u>___/___/___</u>	\$
City, State, Zip Code	<u>___/___/___</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$

8804-06