Delbert Hosemann
SECRETARY OF STATE

Political Committee
REPORT OF RECEIPTS AND DISBURSEMENTS
Special Election

RECEIVED
JAN 04 2011
Campaign Finance
Secretary of State
DATE STAMP

Name of Committee Committee to Elect Dennis Grisham Transportation Comm. Northern District

Address P.O. Box 146 Ripley, MS 38663

Telephone 662-837-3295 Fax 662-837-6081

Treasurer Dean Carliness Email deanc@lindsey-davis.com

☐ Check here if above is different from previous report

TYPE OF REPORT

✓ **January 4, 2011 Pre-Election Report** (January 1, 2010, through January 1, 2011).....**Mandatory**

____ **January 25, 2011 Pre-Election Report** (January 2, 2011 through January 22, 2011).....**Runoff Candidates only**

____ **January 31, 2011 Annual Report** (January 1, 2011 through December 31, 2011).....**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 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	$96,285.39 + $ 2,074.00	$ 98,359.39	$ 98,359.39
Total amount of disbursements	$95,456.39 + $ 175.00	$ 95,631.39	$ 95,631.39
Total amount of cash on hand		$ 2,728.00	

I certify that I have examined this report and to the best of my knowledge and belief it is true, accurate, and complete.

Dean Carliness Treasurer — 1-4-11

Signature of Director or Treasurer — **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 601-359-1499 or 601-576-2819.
2. Candidates for countywide and county district offices should return forms to their county Circuit Clerk.

Committee to Elect Dennis Grisham Page 1 of 7

Name of Candidate or Committee Transportation Comm Northern District

Reporting period _____ through _____

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Dennis Grisham	11/18/10	$ 1300.39
Mailing Address: 5720 Hwy 370	12/7/10	$ 18,000.00
City, State, Zip Code: Dumas, MS 38625	12/28/10	$ 4,000.00
Name of Employer (Required): State of MS	__/__/__	$
Occupation (Required): Supervisor	Aggregate year-to-date	$ 23,300.39

B. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: William Fortier	11/22/10	$ 1,000.00
Mailing Address: 31 Sugarloaf Road	__/__/__	$
City, State, Zip Code: Whitehall, MT 59759	__/__/__	$
Name of Employer (Required): Retired	__/__/__	$
Occupation (Required): Retired	Aggregate year-to-date	$ 1,000.00

C. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Greg Ward	11/23/10	$ 500.00
Mailing Address: 670 Hwy 4 West	__/__/__	$
City, State, Zip Code: Ripley, MS 38663	__/__/__	$
Name of Employer (Required): State of MS	__/__/__	$
Occupation (Required): Representative	Aggregate year-to-date	$ 500.00

D. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: J.D. Hankins	11/16/10	$ 500.00
Mailing Address: P.O. Box 517	__/__/__	$
City, State, Zip Code: Ripley, MS 38663	__/__/__	$
Name of Employer (Required): Hankins, Inc	__/__/__	$
Occupation (Required): Lumber	Aggregate year-to-date	$ 500.00

Name of Candidate or Committee Committee to Elect Dennis Grisham Transportation Comm Northern District Page 2 of 7

Reporting period _____ through _____

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Harold Hankins	11/21/10	$ 500.00
Mailing Address: 106 Forest Gate Road	__/__/__	$
City, State, Zip Code: Ripley, MS 38663	__/__/__	$
Name of Employer (Required): Hankins Inc.	__/__/__	$
Occupation (Required): Lumber	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: Bobby P. Martin	12/7/10	$ 5,000.00
Mailing Address: 896 S Main Street	__/__/__	$
City, State, Zip Code: Ripley, MS 38663	__/__/__	$
Name of Employer (Required): The Peoples Banker	__/__/__	$
Occupation (Required): CEO	Aggregate year-to-date	$ 5,000.00

C. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Rod Colom	12/8/10	$ 5,000.00
Mailing Address: 25851 Hwy 15	__/__/__	$
City, State, Zip Code: Walnut, MS 38683	__/__/__	$
Name of Employer (Required): Colom Construction Co., Inc.	__/__/__	$
Occupation (Required): President	Aggregate year-to-date	$ 5,000.00

D. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Sammy Green	12/14/10	$ 500.00
Mailing Address: P.O. Box 415	__/__/__	$
City, State, Zip Code: Booneville, MS 38829	__/__/__	$
Name of Employer (Required): Self employed	__/__/__	$
Occupation (Required): Self employed	Aggregate year-to-date	$ 500.00

Committee to Elect Dennis Grisham Page 3 of 7

Name of Candidate or Committee Transportation Comm Northern District

Reporting period _____ through _____

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: George M Via	12/13/10	$ 250.00
Mailing Address: 104 South Main	/ /	$
City, State, Zip Code: Booneville, MS 38829	/ /	$
Name of Employer (Required): Self employed	/ /	$
Occupation (Required): Self employed	Aggregate year-to-date	$ 250.00

B. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Benny Devaughn	12/14/10	$ 250.00
Mailing Address: 814 Gaston Road	/ /	$
City, State, Zip Code: Booneville, MS 38829	/ /	$
Name of Employer (Required): Self Employed	/ /	$
Occupation (Required): Pallets	Aggregate year-to-date	$ 250.00

C. Source: ☒ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Buddy Ayers Construction, Inc.	12/14/10	$ 700.00
Mailing Address: 202 Ayers Rd	/ /	$
City, State, Zip Code: Corinth, MS 38834	/ /	$
Name of Employer (Required): N/A	/ /	$
Occupation (Required): N/A	Aggregate year-to-date	$ 700.00

D. Source: ☒ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Stimulus Construction Company, Inc.	12/14/10	$ 250.00
Mailing Address: P.O. Box 787	/ /	$
City, State, Zip Code: Booneville, MS 38829	/ /	$
Name of Employer (Required): N/A	/ /	$
Occupation (Required): N/A	Aggregate year-to-date	$ 250.00

Committee to Elect Dennis Grisham Page 4 of 7

Name of Candidate or Committee Transportation Comm Northern District

Reporting period _____ through _____

ITEMIZED RECEIPTS

A. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Freight To Go, Inc.	12/14/10	$ 1,000.00
Mailing Address: P.O. Box 1918	__/__/__	$
City, State, Zip Code: Corinth, MS 38835	__/__/__	$
Name of Employer (Required): N/A	__/__/__	$
Occupation (Required): N/A	Aggregate year-to-date	$ 1,000.00

B. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Richard L. Corkern	12/14/10	$ 500.00
Mailing Address: 307 Warwick Place	__/__/__	$
City, State, Zip Code: Ridgeland, MS 39157	__/__/__	$
Name of Employer (Required): CPA	__/__/__	$
Occupation (Required): CPA	Aggregate year-to-date	$ 500.00

C. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: LaRon Shannon	12/20/10	$ 1,000.00
Mailing Address: 350 CR 819	__/__/__	$
City, State, Zip Code: Ripley, MS 38663	__/__/__	$
Name of Employer (Required): Retired	__/__/__	$
Occupation (Required): Retired	Aggregate year-to-date	$ 1,000.00

D. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☑ Other (please specify) LP	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Bonds Enterprises LP	12/17/10	$ 1,000.00
Mailing Address: PO Box 297	__/__/__	$
City, State, Zip Code: Burnsville, MS 38833	__/__/__	$
Name of Employer (Required): N/A	__/__/__	$
Occupation (Required): N/A	Aggregate year-to-date	$ 1,000.00

Committee to Elect Dennis Gaither Page 5 of 7

Name of Candidate or Committee Transportation Comm Northern District

Reporting period _____ through _____

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Samuel W. Keyes, JR	12/15/10	$ 500.00
Mailing Address: 202 Valley Road	__/__/__	$
City, State, Zip Code: Ridgeland, MS 39157	__/__/__	$
Name of Employer (Required): Butler and Snow	__/__/__	$
Occupation (Required): Attorney	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: Leslie C. Scott	12/15/10	$ 500.00
Mailing Address: 13 Pear Orchard Park	__/__/__	$
City, State, Zip Code: Jackson, MS 39211	__/__/__	$
Name of Employer (Required): Butler and Snow	__/__/__	$
Occupation (Required): Attorney	Aggregate year-to-date	$ 500.00

C. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Michael D Caples	12/15/10	$ 500.00
Mailing Address: 303 Vinca Cove	__/__/__	$
City, State, Zip Code: Madison MS 39110	__/__/__	$
Name of Employer (Required): Butler and Snow	__/__/__	$
Occupation (Required): Attorney	Aggregate year-to-date	$ 500.00

D. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Riverside Traffic System, Inc.	12/17/10	$ 1,000.00
Mailing Address: 1283 State Hwy 178 West	__/__/__	$
City, State, Zip Code: New Albany, MS 38652	__/__/__	$
Name of Employer (Required): N/A	__/__/__	$
Occupation (Required): N/A	Aggregate year-to-date	$ 1,000.00

Name of Candidate or Committee Committee to Elect Dennis Guillon Transportation Comm Northern District

Reporting period _____ through _____

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☐ Individual ☑ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: The Peoples Bank	12/20/10	$ 10,035.00
Mailing Address: P.O. Drawer 419	12/23/10	$ 40,000.00
City, State, Zip Code: Kiolen, MS 38663	__/__/__	$
Name of Employer (Required): N/A	__/__/__	$
Occupation (Required): N/A	Aggregate year-to-date	$ 50,035.00

B. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Rogers Group, Inc	12/23/10	$ 1,000.00
Mailing Address: P.O. Box 25250	__/__/__	$
City, State, Zip Code: Nashville, TN 37202	__/__/__	$
Name of Employer (Required): N/A	__/__/__	$
Occupation (Required): N/A	Aggregate year-to-date	$ 1,000.00

C. Source: ☐ Corporation ☑ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Fullname: Rogers Group Inc Political Action Committe	12/22/10	$ 1,000.00
Mailing Address: 421 Great Circle Road	__/__/__	$
City, State, Zip Code: Nashville, TN 37228	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 1,000.00

D. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: William L Henson	12/7/10	$ 250.00
Mailing Address: 2346 Woods Chapel Cove	__/__/__	$
City, State, Zip Code: Germantown, TN 38139	__/__/__	$
Name of Employer (Required): Retired	__/__/__	$
Occupation (Required): Retired	Aggregate year-to-date	$ 250.00

Name of Candidate or Committee Committee to Elect Dennis Gustam Transportation Comm Northern District Page 7 of 7

Reporting period _____ through _____

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☑ Other (please specify) Business	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Mississippi Insulation + Weatherization Supply Co	12/14/10	$ 250.00
Mailing Address: P.O. Box 787	__/__/__	$
City, State, Zip Code: Booneville, MS 38829	__/__/__	$
Name of Employer (Required): N/A	__/__/__	$
Occupation (Required): N/A	Aggregate year-to-date	$ 250.00

B. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	__/__/__	$
Mailing Address	__/__/__	$
City, State, Zip Code	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$

C. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	__/__/__	$
Mailing Address	__/__/__	$
City, State, Zip Code	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$

D. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	__/__/__	$
Mailing Address	__/__/__	$
City, State, Zip Code	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$

Page 1 of 1

Name of Candidate or Committee Committee to Elect Dennis Guisham Transportation Comm Northern District

Reporting period 1-1-10 through 1-1-11

ITEMIZED DISBURSEMENTS

A. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Robinson and Associates Incorporated		
Mailing Address: 201 South Spring Street Suite 600	12/1/10	$ 21,803.56
City, State, Zip Code: Tupelo, MS 38804	12/7/10	$ 13,187.86
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 34,991.42

B. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Robinson and Associates Incorporated		
Mailing Address: 201 South Spring Street Suite 600	12/7/10	$ 427.40
City, State, Zip Code: Tupelo, MS 38804	12/14/10	$ 4,319.33
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 39,738.15

C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Creative Awnings		
Mailing Address: 107 North Main Street	12/8/10	$ 4,363.46
City, State, Zip Code: Ripley, MS 38663	12/17/10	$ 1,257.25
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 5,620.71

D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Robinson and Associates Incorporated		
Mailing Address: 201 South Spring Street Suite 600	12/17/10	$ 9,876.66
City, State, Zip Code: Tupelo, MS 38804	12/20/10	$ 39,084.00
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 88,698.81

E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Creative Awnings		
Mailing Address: 107 North Main Street	12/28/10	$ 1,136.87
City, State, Zip Code: Ripley, MS 38663	__/__/__	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 6,757.58

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