2010 ELECTION CYCLE

Delbert Hosemann
SECRETARY OF STATE

Political Committee
REPORT OF RECEIPTS AND DISBURSEMENTS
2010 Judicial Election

RECEIVED
OCT 05 2010
Campaign Finance
Secretary of State
DATE STAMP

Name of Committee Committee To Elect Gerald W. Chatham, Sr.

Address 291 Losner Street, Hernando, MS 38632

Telephone 662-429-0267 Fax 662-298-0091

Treasurer Sam Lauderdale Email

☐ Check here if above is different from previous report

TYPE OF REPORT

____ **May 10, 2010 Periodic Report** (January 1, 2010, through April 30, 2010).....**Mandatory**

____ **June 10, 2010 Periodic Report** (May 1, 2010, through May 31, 2010).....**Mandatory**

____ **July 9, 2010 Periodic Report** (June 1, 2010, through June 30, 2010).....**Mandatory**

✓ **October 10, 2009 Periodic Report** (July 1, 2010, through September 30, 2010).....**Mandatory**

____ **October 26, 2010 Pre-Election Report** (October 1, 2010, through October 23, 2010).....**Mandatory**

____ **November 16, 2010 Pre-Runoff Report** (October 24, 2010, through November 13, 2010).....**Runoff Candidates**

____ **January 10, 2011 Periodic Report** (October 1, 2010, through December 31, 2010).....**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	$10,408.30 + $4500.00	$ 14,908.30	$ 18,758.30
Total amount of disbursements	$9521.55 + $ 0	$ 9521.55	$ 10,350.25
Total amount of cash on hand		$ 5386.75	

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 10/5/10

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.

ENTERED

SOS 01-10

Name of Candidate or Committee Gerald Chatham, Sr.

Reporting period July 1st, 2010 through Sept. 30, 2010

ITEMIZED DISBURSEMENTS

A. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
The Southern Reporter	7/7/10	$ 100.00
Mailing Address: P.O. Box 157		
City, State, Zip Code: Sardis, MS 38666	__/__/__	$
Purpose of Disbursement (Optional): political ad	Aggregate Year-to-date	$ 100.00
B. Full name	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
The Sun Sentinel	7/9/10	$ 275.00
Mailing Address: P.O. Box 250		
City, State, Zip Code: Charleston, MS 38921	__/__/__	$
Purpose of Disbursement (Optional): political ad	Aggregate Year-to-date	$ 275.00
C. Full name	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
The Coffeeville Courier	7/16/10	$ 114.66
Mailing Address: P.O. Box 607		
City, State, Zip Code: Coffeeville, MS 38922	__/__/__	$
Purpose of Disbursement (Optional): political ad	Aggregate Year-to-date	$ 114.66
D. Full name	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
North Mississippi Herald	8/3/10	$ 150.00
Mailing Address: P.O. Box 648		
City, State, Zip Code: Water Valley, MS 38965	__/__/__	$
Purpose of Disbursement (Optional): political ad	Aggregate Year-to-date	$ 150.00
E. Full name	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
FPS Company	9/7/10	$ 5336.30
Mailing Address: 3945 E. Raines Road		
City, State, Zip Code: Memphis, TN 38118	9/21/10	$ 761.79
Purpose of Disbursement (Optional): Campaign signs, etc.	Aggregate Year-to-date	$ 6,098.09
F. Full name	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
FPS Company	9/23/10	$ 1230.50
Mailing Address: 3945 E. Raines Road		
City, State, Zip Code: Memphis, TN 38118	__/__/__	$
Purpose of Disbursement (Optional): Campaign signs, etc.	Aggregate Year-to-date	$ 7328.59

Name of Candidate or Committee Gerald Chatham, Sr.

Reporting period July 1, 2010 through Sept. 30, 2010

ITEMIZED DISBURSEMENTS

A. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Gerald W. Chatham, Sr.	9/21/10	$ 742.68
Mailing Address: 291 Losher Street		
City, State, Zip Code: Hernando, MS 38632	/ /	$
Purpose of Disbursement (Optional): reimbursement (ann. party)	Aggregate Year-to-date	$ 742.68
B. Full name	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
Steven W. Pittman	9/21/10	$ 615.62
Mailing Address: 291 Losher Street		
City, State, Zip Code: Hernando, MS 38632	/ /	$
Purpose of Disbursement (Optional): reimbursement (ann. party)	Aggregate Year-to-date	$ 615.62
C. Full name	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
DeSoto Times	9/27/10	$ 195.00
Mailing Address: 2445 Hwy. 51		
City, State, Zip Code: Hernando, MS 38632	/ /	$
Purpose of Disbursement (Optional): Click Magazine Ad	Aggregate Year-to-date	$ 453.75
D. 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	$
E. 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	$
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	$

Name of Candidate or Committee Gerald W. Chatham, Sr.

Reporting period July 1, 2010 through Sept. 30, 2010

ITEMIZED RECEIPTS

A. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Stroud & Harper, P.C.	7/15/10	$ 750.00
Mailing Address: P.O. Box 210	/ /	$
City, State, Zip Code: Southaven, MS 38671	/ /	$
Name of Employer (Required): Stroud & Harper	/ /	$
Occupation (Required): Attorneys at Law	Aggregate year-to-date	$ 750.00

B. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Al Williams Bail Bond Company	8/3/10	$ 1,000.00
Mailing Address: 2620 Hwy. 51, South	/ /	$
City, State, Zip Code: Hernando, MS 38632	/ /	$
Name of Employer (Required):	/ /	$
Occupation (Required): Bail Bond	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: Goeldner, McDowell, Abbott & Gill, P.C.	8/16/10	$ 500.00
Mailing Address: 8705 B Northwest Dr., Ste 9	/ /	$
City, State, Zip Code: Southaven, MS 38671	/ /	$
Name of Employer (Required):	/ /	$
Occupation (Required):	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: Rosemary M. Goeldner	8/16/10	$ 500.00
Mailing Address: P.O. Box 1468	/ /	$
City, State, Zip Code: Southaven, MS 38671	/ /	$
Name of Employer (Required): Information requested	/ /	$
Occupation (Required): Information requested	Aggregate year-to-date	$ 500.00

Name of Candidate or Committee Gerald W. Chatham, Sr.

Reporting period July 1, 2010 through Sept. 30, 2010

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☐ Individual ☑ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Gerald W. Chatham, Sr.	8 / 31 / 10	$ 1,000.00
Mailing Address: 291 Losher Street	9 / 11 / 10	$ 742.68
City, State, Zip Code: Hernando, MS 38632	/ /	$
Name of Employer (Required): Chatham Damaré Pittman, PLLC	/ /	$
Occupation (Required): attorney / candidate	Aggregate year-to-date	$ 1,742.68

B. Source: ☐ Corporation ☑ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Haley's PAC	9 / 2 / 10	$ 500.00
Mailing Address: P.O. Box 1186	/ /	$
City, State, Zip Code: Jackson, MS 39215	/ /	$
Name of Employer (Required)	/ /	$
Occupation (Required)	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: Charles E. Hodum	9 / 10 / 10	$ 250.00
Mailing Address: 2109 S. Center Street	/ /	$
City, State, Zip Code: Collierville, TN 38017	/ /	$
Name of Employer (Required): Charles E. Hodum, Attorney at Law	/ /	$
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: Jim C. Hollingsworth, Sr.	9 / 13 / 10	$ 500.00
Mailing Address: 213 Green T. Road, West	/ /	$
City, State, Zip Code: Hernando, MS 38632	/ /	$
Name of Employer (Required): retired	/ /	$
Occupation (Required)	Aggregate year-to-date	$ 500.00

Name of Candidate or Committee Gerald W. Chatham, Sr.

Reporting period July 1, 2010 through Sept. 30, 2010

ITEMIZED RECEIPTS

A. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Graves & Palmertree, PLLC	9/13/10	$ 500.00
Mailing Address: 2446 Caffey Street, Ste 1A	/ /	$
City, State, Zip Code: Hernando, MS 38632	/ /	$
Name of Employer (Required): Graves & Palmertree, PLLC	/ /	$
Occupation (Required): attorney at law	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: Jane W. Henderson	9/11/10	$ 300.00
Mailing Address: 2311 Memphis Street	/ /	$
City, State, Zip Code: Hernando, MS 38632	/ /	$
Name of Employer (Required): retired	/ /	$
Occupation (Required)	Aggregate year-to-date	$ 300.00

C. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Mr. or Mrs. Jim Ainsworth	9/10/10	$ 250.00
Mailing Address: 1295 Hwy 304	/ /	$
City, State, Zip Code: Hernando, MS 38632	/ /	$
Name of Employer (Required): retired	/ /	$
Occupation (Required)	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: Anthony Farese	9/15/10	$ 500.00
Mailing Address: P.O. Box 98	/ /	$
City, State, Zip Code: Ashland, MS 38603	/ /	$
Name of Employer (Required): Farese Law Firm	/ /	$
Occupation (Required): attorney	Aggregate year-to-date	$ 500.00

Name of Candidate or Committee Gerald W. Chatham, Sr.

Reporting period July 1, 2010 through Sept. 30, 2010

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: H. Kirk Moore, Jr.	9/14/10	$ 500.00
Mailing Address: 216 South Ward	__/__/__	$
City, State, Zip Code: Senatobia, MS 38668	__/__/__	$
Name of Employer (Required): Moore & Darby	__/__/__	$
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: Nick Smith	9/24/10	$ 500.00
Mailing Address: 204 Joseph Drive	__/__/__	$
City, State, Zip Code: Senatobia, MS 38668	__/__/__	$
Name of Employer (Required): Chatham Damaré Pittman, PLLC	__/__/__	$
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: Jamie Heard	9/24/10	$ 500.00
Mailing Address: Boardwalk Blvd.	__/__/__	$
City, State, Zip Code: Jackson, MS	__/__/__	$
Name of Employer (Required):	__/__/__	$
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: Jimmy Webster	9/23/10	$ 500.00
Mailing Address: 10 N. Main Street, Apt. 1001	__/__/__	$
City, State, Zip Code: Memphis, TN 38103	__/__/__	$
Name of Employer (Required): information requested	__/__/__	$
Occupation (Required): information requested	Aggregate year-to-date	$ 500.00

Name of Candidate or Committee Gerald W. Chatham, Sr.

Reporting period July 1, 2010 through Sept. 30, 2010

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Robert Maddux	9/24/10	$ 250.00
Mailing Address: 2264 McIngvale Road	__/__/__	$
City, State, Zip Code: Hernando, MS 38632	__/__/__	$
Name of Employer (Required): Hernando Dental Care	__/__/__	$
Occupation (Required): dentist	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: Ethan Maddux	9/24/10	$ 250.00
Mailing Address: 2264 McIngvale Road	__/__/__	$
City, State, Zip Code: Hernando, MS 38632	__/__/__	$
Name of Employer (Required): information requested	__/__/__	$
Occupation (Required): information requested	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: Steven W. Pittman	9/11/10	$ 615.62
Mailing Address: 291 Losher Street	__/__/__	$
City, State, Zip Code: Hernando, MS 38632	__/__/__	$
Name of Employer (Required): Chatham Damaré Pittman	__/__/__	$
Occupation (Required): attorney	Aggregate year-to-date	$ 615.62

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	$