2010 ELECTION CYCLE

Delbert Hosemann
SECRETARY OF STATE

Political Committee
REPORT OF RECEIPTS AND DISBURSEMENTS
2011 Judicial Election

RECEIVED
JAN 10 2011
Campaign Finance
Secretary of State
DATE STAMP

Name of Committee: Committee to Elect Jimmy Maxwell

Address: 1739 University Ave PMB #314

Telephone: 662-587-1965 Fax: 662-815-5040

Treasurer: Wes Davis Email: wes@bigmtransport.com

☐ 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 8, 2010 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	$ 0	+$ 0	$ 0	$ 30,045.00
Total amount of disbursements	$3,009.24	+$ 422.44	$ 3,431.68	$ 11,259.00
Total amount of cash on hand			$ 18,785.80	

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

Wes Davis
Signature of Director or Treasurer

1/7/11
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.

SOS 01-10

Name of Candidate or Committee Committee to Elect Jimmy Maxwell

Reporting period Oct. 24, 2010 through Dec. 31, 2010

ITEMIZED DISBURSEMENTS

A. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Diane Bond - Bella Vie Photography	11/8/10	$ 1,669.20
Mailing Address: 402 Lark Run		
City, State, Zip Code: Oxford, MS 38655	/ /	$
Purpose of Disbursement (Optional): Christmas Cards	Aggregate Year-to-date	$ 1,669.20
B. Full name	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
UPS Store	12/7/10	$ 331.76
Mailing Address: 1739 University Ave.		
City, State, Zip Code: Oxford, MS 38655	12/8/10	$ 29.40
Purpose of Disbursement (Optional): Postage	Aggregate Year-to-date	$ Continued Below
C. Full name	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
UPS Store	12/14/10	$ 27.84
Mailing Address: 1739 University Ave.		
City, State, Zip Code: Oxford, MS 38655	12/31/10	$ 122.90
Purpose of Disbursement (Optional): Postage	Aggregate Year-to-date	$ 654.90
D. Full name	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
National Men's Wear	12/8/10	$ 150.00
Mailing Address: 2313 Jackson Ave. West		
City, State, Zip Code: Oxford, MS 38655	12/15/10	$ 150.00
Purpose of Disbursement (Optional): Promotional Items	Aggregate Year-to-date	$ Continued Below
E. Full name	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
National Men's Wear	12/21/10	$ 75.00
Mailing Address: 2313 Jackson Ave. West		
City, State, Zip Code: Oxford, MS 38655	/ /	$
Purpose of Disbursement (Optional): Promotional Items	Aggregate Year-to-date	$ 375.00
F. Full name	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
WYNCOR	12/1/10	$ 300.00
Mailing Address: 2084 Old Taylor Road Suite #106		
City, State, Zip Code: Oxford, MS 38655	/ /	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 3,262.00

Name of Candidate or Committee Committee to Elect Jimmy Maxwell

Reporting period Oct 24, 2010 through Dec 31, 2010

ITEMIZED DISBURSEMENTS

A. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Office Depot		
Mailing Address: 2535 Jackson Ave West	11/5/10	$ 75.60
City, State, Zip Code: Oxford, MS 38655	11/30/10	$ 19.25
Purpose of Disbursement (Optional): office supplies	Aggregate Year-to-date	$ Continued Below
B. Full name	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
Office Depot		
Mailing Address: 2535 Jackson Ave West	12/6/10	$ 58.19
City, State, Zip Code: Oxford, MS 38655	__/__/__	$
Purpose of Disbursement (Optional): office supplies	Aggregate Year-to-date	$ 285.96
C. 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	$
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	$