2010 ELECTION CYCLE

Delbert Hosemann
SECRETARY OF STATE

Political Committee
REPORT OF RECEIPTS AND DISBURSEMENTS
2010 Judicial Election

RECEIVED
OCT 27 2010
Campaign Finance
Secretary of State
DATE STAMP

Name of Committee: To Elect Larry Buffington

Address: P.O. Box 924, Collins, MS 39428

Telephone: 601-765-4564 Fax:

Treasurer: Harold Buffington 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 8, 2010 Periodic Report** (July 1, 2010, through September 30, 2010) ..... **Mandatory**

X **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	$ 9500.00 + $ 2200.00	$ 11,700.00	$ 18,100.00
Total amount of disbursements	$ 9224.26 + $ 475.00	$ 9,699.26	$ 13,887.01
Total amount of cash on hand		$ 4,217.99	

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] Date: 10/26/2010

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.

Name of Candidate or Committee Larry Buffington

Reporting period 10/1/2010 through 10/26/2010

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Harry Rosenthall	10/5/10	$ 2000.00
Mailing Address: 834 Capitol Street	/ /	$
City, State, Zip Code: Jackson, MS 39203	/ /	$
Name of Employer (Required): Self	/ /	$
Occupation (Required): Attorney	Aggregate year-to-date	$ 2000.00

B. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: David Garner	10/5/10	$ 1000.00
Mailing Address: P.O.Box 789	/ /	$
City, State, Zip Code: Raleigh, MS 39153	/ /	$
Name of Employer (Required): Self	/ /	$
Occupation (Required): Attorney	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: Oby T. Rogers	10/5/10	$ 250.00
Mailing Address: P.O. Box 700	/ /	$
City, State, Zip Code: Collins, MS 39428	/ /	$
Name of Employer (Required): Self	/ /	$
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: Walter Dukes	10/6/10	$ 250.00
Mailing Address: 9022 Victoria Circle	/ /	$
City, State, Zip Code: Gulfport MS 39503	/ /	$
Name of Employer (Required):	/ /	$
Occupation (Required):	Aggregate year-to-date	$ 250.00

Name of Candidate or Committee Larry Buffington

Reporting period 10/1/10 through 10/26/10

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Lin Carter	10/6/10	$ 500.00
Mailing Address: 404 Hemphill Street	/ /	$
City, State, Zip Code: Hattiesburg, MS 39402	/ /	$
Name of Employer (Required): Self	/ /	$
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: James Dukes	10/6/10	$ 250.00
Mailing Address: P.O. Box 2055	/ /	$
City, State, Zip Code: Hattiesburg, MS 39403	/ /	$
Name of Employer (Required): Self	/ /	$
Occupation (Required): Attorney	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: James K. Dukes, Jr.	10/5/10	$ 250.00
Mailing Address: P.O.Box 1005	/ /	$
City, State, Zip Code: Hattiesburg, MS 39403	/ /	$
Name of Employer (Required): Self	/ /	$
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: Michael Marks	10/8/10	$250.00
Mailing Address: P.O. Box 9999	/ /	$
City, State, Zip Code: Jackson, MS 39286	/ /	$
Name of Employer (Required): Self	/ /	$
Occupation (Required): Attorney	Aggregate year-to-date	$ 250.00

Name of Candidate or Committee Larry Buffington

Reporting period 10/1/10 through ~~10/26/10~~

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Gene Tullos	10/11/10	$ 250.00
Mailing Address: P.O. Box 74	__/__/__	$
City, State, Zip Code: Raleigh, MS 39153	__/__/__	$
Name of Employer (Required): Self	__/__/__	$
Occupation (Required): Attorney	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: Douglas Rogers	~~10/14/10~~	$ 250.00
Mailing Address: P.O. Box 1805	__/__/__	$
City, State, Zip Code: Collins, MS 39428	__/__/__	$
Name of Employer (Required): Peoples Bank	__/__/__	$
Occupation (Required): Officer	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: Josh and Keely McNulty	10/14/10	$ 1000.00
Mailing Address: 325 Hwy 28 East	__/__/__	$
City, State, Zip Code: Magee, MS 39111	__/__/__	$
Name of Employer (Required): Self	__/__/__	$
Occupation (Required): Attorney	Aggregate year-to-date	$ 1000.00

D. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Dr. Harlan Rogers	~~10/14/10~~	$ 250.00
Mailing Address: P.O.Box 1718	__/__/__	$
City, State, Zip Code: Collins, MS 39428	__/__/__	$
Name of Employer (Required): Self	__/__/__	$
Occupation (Required): Cattle Farmer	Aggregate year-to-date	$ 250.00

Name of Candidate or Committee Larry Buffington

Reporting period 10/1/10 through 10/26/10

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Bernie Rogers	10/1/10	$ 500.00
Mailing Address: P.O. Box 2333	__/__/__	$
City, State, Zip Code: Collins, MS 39428	__/__/__	$
Name of Employer (Required): Self	__/__/__	$
Occupation (Required): Cattle Farmer	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: James Ashley Odgen	10/13/10	$ 1000.00
Mailing Address: 500 East Capitol Street, Suite 3	__/__/__	$
City, State, Zip Code: Jackson, MS 39201	__/__/__	$
Name of Employer (Required): Self	__/__/__	$
Occupation (Required): Attorney	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: Don Evans, PLLC	10/14/10	$ 500.00
Mailing Address: 500 E. Capitol Street Suite 2	__/__/__	$
City, State, Zip Code: Jackson, MS 39201	__/__/__	$
Name of Employer (Required): Self	__/__/__	$
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: Eddie Abdeen	10/14/10	$250.00
Mailing Address: P.O. Box 2134	__/__/__	$
City, State, Zip Code: Madison, MS 39130	__/__/__	$
Name of Employer (Required): Self	__/__/__	$
Occupation (Required): Attorney	Aggregate year-to-date	$ 250.00

Name of Candidate or Committee ~~Larry Buffington~~

Reporting period 10/1/10 through 10/26/10

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: 311 Main Construction	10/13/10	$ 250.00
Mailing Address: P.O. Box 700	__/__/__	$
City, State, Zip Code: Collins, MS 39428	__/__/__	$
Name of Employer (Required): Self	__/__/__	$
Occupation (Required): Attorney	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: John Sutton	10/25/10	$ 250.00
Mailing Address: P.O.Box 1157	__/__/__	$
City, State, Zip Code: Monticello, MS 39654	__/__/__	$
Name of Employer (Required): Self	__/__/__	$
Occupation (Required): Attorney	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: Jamie Edwards	10/25/10	$ 250.00
Mailing Address: P.O.Box 1157	__/__/__	$
City, State, Zip Code: Monticello, MS 39654	__/__/__	$
Name of Employer (Required)	__/__/__	$
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	__/__/__	$
Mailing Address	__/__/__	$
City, State, Zip Code	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 250.00

Name of Candidate or Committee Larry Buffington

Reporting period 10-1-10 through 10-26-10

ITEMIZED DISBURSEMENTS

	Date (Mo., Day, Year)	Amount of each disbursement this period
A. Full name: The Post Mailing Address: P.O. Box 100 City, State, Zip Code: Daylorsville, MS 39168 Purpose of Disbursement (Optional):	10/22/2010 Aggregate Year-to-date	$ 600.00 $ 1325.00
B. Full name: Lawrence Cnty Press Mailing Address: 534 East Broad St City, State, Zip Code: Monticello, MS 39654 Purpose of Disbursement (Optional):	10/15/2010 10/5/2010 Aggregate Year-to-date	$ 125 $ 495 $
C. Full name: Sun Mailing Address: City, State, Zip Code: Purpose of Disbursement (Optional): Ads	Aggregate Year-to-date	$ 495 $ 1105
D. Full name: Magee Courier Mailing Address: 206 N Main St City, State, Zip Code: Magee, MS 39111 Purpose of Disbursement (Optional): ADS	10/15/2010 Aggregate Year-to-date	$ 1,000 $ 2,650
E. Full name: Bob's Athletic Mailing Address: 105 Main Street City, State, Zip Code: Magee, MS Purpose of Disbursement (Optional): Shirts	10/5/2010 Aggregate Year-to-date	$ 470.80 $ 470.80
F. Full name: Bickett Signs Mailing Address: City, State, Zip Code: Purpose of Disbursement (Optional):	10/20/2010 Aggregate Year-to-date	$ 1417.75 $ 2835.50

SS04-06

Name of Candidate or Committee Larry Buffington

Reporting period 10-1-10 through 10-26-10

ITEMIZED DISBURSEMENTS

	Date (Mo., Day, Year)	Amount of each disbursement this period
A. Full name: Prentiss Headlight Mailing Address	9/15/2010	$ 100.00
City, State, Zip Code	10/5/2010	$ 1,100.00
Purpose of Disbursement (Optional): Ads	Aggregate Year-to-date	$ 1,200.00
B. Full name: News Commercial Mailing Address: P.O. Box 1299	9/16/2010	$ 140.00
City, State, Zip Code: Collins, MS	10/5/2010	$ 450.00
Purpose of Disbursement (Optional): ADS	Aggregate Year-to-date	$ 590.00
C. Full name: Smith County Reformer Mailing Address: P.O. Box 187	9/16/2010	$ 375.00
City, State, Zip Code: Raleigh MS 39428	10/12/2010	$ 897.75
Purpose of Disbursement (Optional): ADS	Aggregate Year-to-date	$ ~~1272.75~~
D. Full name: Sun Mailing Address	10/20/2010	$ 625.00
City, State, Zip Code	__/__/__	$
Purpose of Disbursement (Optional): Ads	Aggregate Year-to-date	$ 1897.75
E. Full name: Country Printer Mailing Address: P.O. Box 765	10/22/2010	$ 1,068.53
City, State, Zip Code: Magee, MS 39111	__/__/__	$
Purpose of Disbursement (Optional): Push Cards	Aggregate Year-to-date	$ 1,068.53
F. Full name: The Post Mailing Address: P.O. Box 100	9/15/2010	$ 125.00
City, State, Zip Code: Laurelville MS 39168	10/4/2010	$ 400.00
Purpose of Disbursement (Optional): Ads	Aggregate Year-to-date	$ —

SS04-06