

## 2010 ELECTION CYCLE

Political Committee  
**REPORT OF RECEIPTS AND DISBURSEMENTS**  
 2010 Judicial Election

Delbert Hosemann  
 SECRETARY OF STATE

Name of Committee Committee to Elect Shirley Byers Circuit Judge

Address P. O. Box 5512, Holly Springs, MS 38634

Telephone 662-252-9067 Fax 662-252-9086

Treasurer Willie Terry Email wjlterry@bellsouth.net

☐ 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  
X 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. § 23-15-007 (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	\$ 6,986.35 \$ 1,061.25	\$ 8,047.60	\$ 9,943.60
Total amount of disbursements	\$ 7,498.00 \$ 1,025.75	\$ 8,523.75	\$ 8,549.75
Total amount of cash on hand		\$ 1,393.85	

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

Willie Terry  
 Signature of Director or Treasurer

October 8, 2010  
 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 601-259-1499 or 601-579-2819.  
 2. Candidates for countywide and county district offices should return forms to their county Circuit Clerk.

Page 1 of 2Name of Candidate or Committee Committee to Elect Shirley Byers Circuit JudgeReporting period July 1, 2010 through September 30, 2010

## ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Robert L. Johnson, III</u>		<u>8</u> / <u>27</u> / <u>10</u>	\$ 300.00
Mailing Address <u>P. O. Box 1678</u>		<u>  </u> / <u>  </u> / <u>  </u>	\$
City, State, Zip Code <u>Natchez, MS 39124</u>		<u>  </u> / <u>  </u> / <u>  </u>	\$
Name of Employer (Required) _____		<u>  </u> / <u>  </u> / <u>  </u>	\$
Occupation (Required) <u>Attorney</u>		Aggregate year-to-date	\$ 300.00
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Autumn Woods Memorial Park</u>		<u>8</u> / <u>28</u> / <u>10</u>	\$ 200.00
Mailing Address <u>2317 M. L. King Drive</u>		<u>  </u> / <u>  </u> / <u>  </u>	\$
City, State, Zip Code <u>Jackson, MS 39213</u>		<u>  </u> / <u>  </u> / <u>  </u>	\$
Name of Employer (Required) _____		<u>  </u> / <u>  </u> / <u>  </u>	\$
Occupation (Required) _____		Aggregate year-to-date	\$ 200.00
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Shirley Byers</u>		<u>9</u> / <u>8</u> / <u>10</u>	\$ 2,400.00
Mailing Address <u>125 E. Van Dorn</u>		<u>9</u> / <u>17</u> / <u>10</u>	\$ 1,000.00
City, State, Zip Code <u>Holly Springs, MS 38635</u>		<u>8</u> / <u>  </u> / <u>10</u>	\$ 282.74
Name of Employer (Required) <u>Self-Employed</u>		<u>9</u> / <u>17</u> / <u>10</u>	\$ 2,353.61
Occupation (Required) <u>Lawyer</u>		Aggregate year-to-date	\$ 6,036.35
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Gwendolyn Baptist-Hewlett</u>		<u>9</u> / <u>17</u> / <u>10</u>	\$ 250.00
Mailing Address <u>P. O. Box 312</u>		<u>  </u> / <u>  </u> / <u>  </u>	\$
City, State, Zip Code <u>Southaven, MS 38671</u>		<u>  </u> / <u>  </u> / <u>  </u>	\$
Name of Employer (Required) <u>Baptist Law Firm, PLLC</u>		<u>  </u> / <u>  </u> / <u>  </u>	\$
Occupation (Required) <u>Lawyer</u>		Aggregate year-to-date	\$ 250.00

Page 2 of 2Name of Candidate or Committee Committee to Elect Shirley Byers Circuit JudgeReporting period July 1, 2010 through September 30, 2010

## ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Anthony McKinnon</u>		<u>9 / 28 / 10</u>	\$ 200.00
Mailing Address <u>P. O. Box 664</u>		<u>  /  /  </u>	\$
City, State, Zip Code <u>Holly Springs, MS 38635</u>		<u>  /  /  </u>	\$
Name of Employer (Required) _____		<u>  /  /  </u>	\$
Occupation (Required) <u>Retired</u>		Aggregate year-to-date	\$ 200.00
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name _____		<u>  /  /  </u>	\$
Mailing Address _____		<u>  /  /  </u>	\$
City, State, Zip Code _____		<u>  /  /  </u>	\$
Name of Employer (Required) _____		<u>  /  /  </u>	\$
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"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name _____		<u>  /  /  </u>	\$
Mailing Address _____		<u>  /  /  </u>	\$
City, State, Zip Code _____		<u>  /  /  </u>	\$
Name of Employer (Required) _____		<u>  /  /  </u>	\$
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"/> Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name _____		<u>  /  /  </u>	\$
Mailing Address _____		<u>  /  /  </u>	\$
City, State, Zip Code _____		<u>  /  /  </u>	\$
Name of Employer (Required) _____		<u>  /  /  </u>	\$
Occupation (Required) _____		Aggregate year-to-date	\$

Page 1 of 1Name of Candidate or Committee Committee to Elect Shirley Byers Circuit JudgeReporting period July 1, 2010 through September 30, 2010

## ITEMIZED DISBURSEMENTS

A. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Shirley Byers</u>	<u>8 / 11 / 10</u>	\$ 700.00
Mailing Address		
<u>125 E. Van Dorn</u>	<u>8 / 20 / 10</u>	\$ 350.00
City, State, Zip Code		
<u>Holly Springs, MS 38635</u>		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
<u>Reimbursement - T-Shirts and Post Cards</u>		
B. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>KE Printing &amp; Graphics</u>	<u>9 / 15 / 10</u>	\$ 3,909.00
Mailing Address		
<u>P. O. Box 750504</u>	<u>   /   /   </u>	\$
City, State, Zip Code		
<u>Memphis, TN 38175</u>		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
<u>Campaign Signs</u>		3,909.00
C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Shirley Byers</u>	<u>9 / 19 / 10</u>	\$ 278.40
Mailing Address		
<u>125 E. Van Dorn</u>	<u>   /   /   </u>	\$
City, State, Zip Code		
<u>Holly Springs, MS 38635</u>		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
<u>Reimbursement - South Reporter Article</u>		1,328.40
D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Delia Reed</u>	<u>9 / 8 / 10</u>	\$ 400.00
Mailing Address		
<u>   /   /   </u>	<u>   /   /   </u>	\$
City, State, Zip Code		
<u>   /   /   </u>		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
<u>Campaign Worker</u>		400.00
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Dale DeBerry</u>	<u>9 / 22 / 10</u>	\$ 892.00
Mailing Address		
<u>355 West Valley</u>	<u>   /   /   </u>	\$
City, State, Zip Code		
<u>Holly Springs, MS 38635</u>		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
<u>Building frames for signs</u>		892.00
F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Teddy's Discount</u>	<u>9 / 20 / 10</u>	\$ 295.89
Mailing Address		
<u>170 Clarice Drive</u>	<u>9 / 22 / 10</u>	\$ 672.71
City, State, Zip Code		
<u>Holly Springs, MS 38635</u>		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
<u>Lumber for signs</u>		968.60