Delbert Hosemann
SECRETARY OF STATE

0 ELECTION CYCLE

Political Committee
REPORT OF RECEIPTS AND DISBURSEMENTS
2010 Judicial Election

RECEIVED
OCT 08 2010
Campaign Finance
Secretary of State

Name of Committee: Committee to Elect William Starks

Address: P.O. Box 1346

Telephone: (662) 327-6744 Fax: (662) 327-6199

Treasurer: Deborah R. Moore Email: deborah@studdardlaw.com

☐ Check here if above is different from previous report

TYPE OF REPORT

____	May 10, 2010 Periodic Report (January 1, 2009, 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 or 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	$ 9700.00 +$ 3750.00	$ 3450.00	$ 23198.46
Total amount of disbursements	$ 10,369.15 +$ 257.55	$ 10,626.70	$ 22043.68
Total amount of cash on hand		$ 1154.78	

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

Deborah R. Moore
Signature of Director or Treasurer

10/8/10
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 forms 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 Jillian Stanks

Reporting period 7/1/10 through 9/30/10

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☑ Other (please specify) PLLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Studdard Law Firm	7/6/10	$ 800.00
Mailing Address 325 College St	__/__/__	$
City, State, Zip Code Columbus MS	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required) atty	Aggregate year-to-date	$

B. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Michael Burton	8/2/10	$ 250.00
Mailing Address	__/__/__	$
City/State, Zip Code Starkville, MS	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required) Dr.	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	$

800

SS04-05

1150

Name of Candidate or Committee Committee to Elect William Starks

Reporting period 7/1/10 through 9/30/10

ITEMIZED RECEIPTS

	Date (Mo., Day, Year)	Amount of each receipt this period
A. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	8/5/10	$ 250.00
Full name: Victor Fleitas	__/__/__	$
Mailing Address: P.O. Box 717	__/__/__	$
City, State, Zip Code: Tupelo, MS 38802	__/__/__	$
Name of Employer (Required): self	Aggregate year-to-date	$
Occupation (Required): Attorney		
B. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☑ Other (please specify) law firm - PA	8/5/10	$ 500.00
Full name: Wade & Ass PA	__/__/__	$
Mailing Address: 322 N. Spring Street	__/__/__	$
City, State, Zip Code: Tupelo, MS 38804	__/__/__	$
Name of Employer (Required): Wade Ass.	Aggregate year-to-date	$
Occupation (Required): law firm		
C. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	8/12/10	$ 300.00
Full name: Carrie Starks	__/__/__	$
Mailing Address	__/__/__	$
City, State, Zip Code	__/__/__	$
Name of Employer (Required)	Aggregate year-to-date	$
Occupation (Required)		
D. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	8/26/10	$ 1000.00
Full name: Joe Studdard	__/__/__	$
Mailing Address: 325 College Street	__/__/__	$
City, State, Zip Code: Columbus, MS 39701	__/__/__	$
Name of Employer (Required): self	Aggregate year-to-date	$
Occupation (Required): Studdard Law Firm		

2050

SS04-05

Name of Candidate or Committee Committee to Elect William Starks

Reporting period 7/1/10 through 9/20/10

ITEMIZED RECEIPTS

A. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: East Side Farms	9/15/10	$ 1000.00
Mailing Address: 40089 Wolfe Road	__/__/__	$
City, State, Zip Code: Caledonia, MS 39740	__/__/__	$
Name of Employer (Required): East Side Farms	__/__/__	$
Occupation (Required): farming	Aggregate year-to-date	$

B. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Dale & Carole Beasley	9/12/10	$ 500.00
Mailing Address: 417 2nd St. S.	__/__/__	$
City, State, Zip Code: Columbus, MS 39701	__/__/__	$
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: Dan West	9/4/10	$ 1250.00
Mailing Address: 40552 Wolfe Rd	__/__/__	$
City, State, Zip Code: Caledonia, MS 39740	__/__/__	$
Name of Employer (Required): self	__/__/__	$
Occupation (Required): farmer	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: R Gary Mitchell	9/16/10	$ 500.00
Mailing Address: 1305 Forest Hill Drive	4/14/10	$ 1000.00
City, State, Zip Code: Columbus, MS	__/__/__	$
Name of Employer (Required): Self	__/__/__	$
Occupation (Required): atty	Aggregate year-to-date	$ 7500.00

3050

SS04-05

Name of Candidate or Committee Committee to Elect William Starks

Reporting period 7/1/10 through 9/30/10

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Butch Bejan	9/9/10	$ 250.00
Mailing Address: 40133 Holloway Rd	/ /	$
City, State, Zip Code: Hamilton, MS 39746	/ /	$
Name of Employer (Required)	/ /	$
Occupation (Required)	Aggregate year-to-date	$

B. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Mrs. Z.B. White	9/23/10	$ 1000.00
Mailing Address: 400 Oak Wolfe Creek	/ /	$
City, State, Zip Code: Caledonia, MS 39740	/ /	$
Name of Employer (Required): retired	/ /	$
Occupation (Required): Retired	Aggregate year-to-date	$

C. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: A + H Electrical	9/23/10	$ 300.00
Mailing Address: P.O. Box 1097	/ /	$
City, State, Zip Code: West Point, MS 39773	/ /	$
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: Steve Joyner	9/27/10	$ 1000.00
Mailing Address: 325 College St	7/20/10	$ 1000.00
City, State, Zip Code: Columbus MS 39701	/ /	$
Name of Employer (Required): Studdard Law Firm	/ /	$
Occupation (Required): atty	Aggregate year-to-date	$ 2000.00

Name of Candidate or Committee: Committee to Elect William Stokes

Reporting period: 7/1/10 through 9/30/10

ITEMIZED DISBURSEMENTS

	Date (Mo., Day, Year)	Amount of each disbursement this period
A. Full name: Brent Thompson Mailing Address: City, State, Zip Code: Hamilton, MS Purpose of Disbursement (Optional): contract labor	7/2/10	$ 300.00
	7/8/10	$ 180.00
	Aggregate Year-to-date	$ —
B. Full name: Mailing Address: City, State, Zip Code: Purpose of Disbursement (Optional):	7/16/10	$ 300.00
	7/22/10	$ 300.00
	Aggregate Year-to-date	$ —
C. Full name: Mailing Address: City, State, Zip Code: Purpose of Disbursement (Optional):	7/29/10	$ 240.00
	__/__/__	$
	Aggregate Year-to-date	$ 2084.00 - prev + 3407 to date
D. Full name: Albright Printing Mailing Address: City, State, Zip Code: Aberdeen, MS Purpose of Disbursement (Optional): printed matter / signs	9/13/10	$ 508.25
	9/17/10	$ 288.90
	Aggregate Year-to-date	$
E. Full name: Mailing Address: City, State, Zip Code: Purpose of Disbursement (Optional):	9/30/10	$ 1016.50
	__/__/__	$
	Aggregate Year-to-date	$
F. Full name: Lamar Advertising Mailing Address: P.O. Box 96030 City, State, Zip Code: Baton Rouge, LA 70896 Purpose of Disbursement (Optional): advertising	Date (Mo., Day, Year)	Amount of each disbursement this period
	9/29/10	$ 1680.00
	9/17/10	$ 2500.00
	Aggregate Year-to-date	$ 4180.00

Name of Candidate or Committee: Committee to Elect William Stanks

Reporting period 7/1/10 through 9/30/10

ITEMIZED DISBURSEMENTS

	Date (Mo., Day, Year)	Amount of each disbursement this period
A. Full name: USPS Mailing Address: Main Street City, State, Zip Code: Edwards MS Purpose of Disbursement (Optional): postage	9/13/10	$ 660.00
	9/24/10 9/30/10	$ 352.00 176.00
	Aggregate Year-to-date	$
B. Full name: Broadcast media Mailing Address: 1012 N. Jackson City, State, Zip Code: Starkville, MS Purpose of Disbursement (Optional): advertising	9/28/10	$ 1300.00
	__/__/__	$
	Aggregate Year-to-date	$
C. Full name: Visions Mailing Address: 444c Hwy 12W City, State, Zip Code: Starkville, MS 39759 Purpose of Disbursement (Optional): t shirts	8/13/10	$ 267.50
	__/__/__	$
	Aggregate Year-to-date	$
D. Full name: GT Publication Mailing Address: 818 Shell St. City, State, Zip Code: Tupelo, MS 38801 Purpose of Disbursement (Optional): advertising	8/13/10	$ 150.00
	9/27/10	$ 150.00
	Aggregate Year-to-date	$ 300.00
E. Full name Mailing Address City, State, Zip Code Purpose of Disbursement (Optional)	__/__/__	$
	__/__/__	$
	Aggregate Year-to-date	$
F. Full name Mailing Address City, State, Zip Code Purpose of Disbursement (Optional)	__/__/__	$
	__/__/__	$
	Aggregate Year-to-date	$