2010 ELECTION CYCLE

Delbert Hosemann
SECRETARY OF STATE

Political Committee
REPORT OF RECEIPTS AND DISBURSEMENTS
2010 Judicial Election

RECEIVED
JUL 12 2010
Campaign Finance
Secretary of State
DATE STAMP

Name of Committee: Committee to Re-elect Vernon Cotten

Address: 108 Hillside Dr Carthage Ms 39051

Telephone: 601-267-3109 Fax: _____

Treasurer: June Shepard 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	$ 2800 + $ 675.00	$ 3475.00	$ 24774.68
Total amount of disbursements	$ 9150.00 + $ 707.19	$ 9857.25	$ 16077.64
Total amount of cash on hand		$ 8697.04	

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

June Shepard
Signature of Director or Treasurer

7-8-10
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 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.

Page ____ of ____

Name of Candidate or Committee Committee to Re-elect Vernon Cotten

Reporting period June 1, 2010 through June 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: Ms Medical PAC	6/2/2010	$ 2500.00
Mailing Address: P.O. Box 2548	__/__/__	$
City, State, Zip Code: Ridgeland Ms 39158	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 2500.00

B. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Ross Barnett, Sr	6/29/2010	$ 300.00
Mailing Address: 501 South State	__/__/__	$
City, State, Zip Code: Jackson, Ms 39201	__/__/__	$
Name of Employer (Required): Barnett Law Firm	__/__/__	$
Occupation (Required): Attorney	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	__/__/__	$
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	$

Name of Candidate or Committee Committee to Re-elect Vernon Cotten

Reporting period June 1, 2010 through June 30, 2010

ITEMIZED DISBURSEMENTS

A. Full name Jack McMillan	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	6/24/2010	$ 444.16
City, State, Zip Code	__/__/__	$
Purpose of Disbursement (Optional) lumber for signs	Aggregate Year-to-date	$ 444.16
B. Full name Brian Comillaun	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address P.O. Box 129	6/22/2010	$ 464.59
City, State, Zip Code Walnut Grove Ms 39189	__/__/__	$ 2429.18
Purpose of Disbursement (Optional) re-imbursement office supplies computer	Aggregate Year-to-date	$ 5195.49
C. Full name Carol Mabry	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 415 S Main St	4/4/2010	$ 3000.00
City, State, Zip Code Newton Ms	__/__/__	$
Purpose of Disbursement (Optional) campaign strategy	Aggregate Year-to-date	$ 6,000.00
D. Full name Ms Wholesale Trophies	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	__/__/__	$ 1386.33
City, State, Zip Code Jackson Ms	__/__/__	$
Purpose of Disbursement (Optional) signs	Aggregate Year-to-date	$ 1386.33
E. Full name Newton Co Appeal	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	__/__/__	$ 249.00
City, State, Zip Code Union Ms	__/__/__	$
Purpose of Disbursement (Optional) Ads	Aggregate Year-to-date	$ 249.00
F. Full name Scott County Times	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	__/__/__	$ 290.00
City, State, Zip Code Forest	__/__/__	$
Purpose of Disbursement (Optional) Ad	Aggregate Year-to-date	$ 290.00

Name of Candidate or Committee Committee to Reelect Vernon R. Cotten

Reporting period June 1 2010 through June 30, 2010

ITEMIZED DISBURSEMENTS

A. Full name Neshoba Co Democrat	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	6/25/2010	$ 330.00
City, State, Zip Code Philadelphia	__/__/__	$
Purpose of Disbursement (Optional) Ad	Aggregate Year-to-date	$ 330.00
B. Full name Carthaginian	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
Mailing Address	__/__/__	$ 336.25
City, State, Zip Code Carthage Ms	__/__/__	$
Purpose of Disbursement (Optional) Ad	Aggregate Year-to-date	$ 336.25
C. Full name Spirit of Morton	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
Mailing Address	6/25/2010	$ 220.
City, State, Zip Code Morton Ms	__/__/__	$
Purpose of Disbursement (Optional) Ad	Aggregate Year-to-date	$ 220.00
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	$