2010 ELECTION CYCLE

Delbert Hosemann
SECRETARY OF STATE

Candidate

REPORT OF RECEIPTS AND DISBURSEMENTS
2010 Non-Judicial Election

RECEIVED
JAN 31 2011
Secretary of State
Capitol Office
DATE STAMP

Name of Candidate George Flaggs, Jr Campaign

Address P. O. Box 1674

Telephone 601-942-0492 Fax 601-630-8008

Contact Name George Flaggs, Jr. Email 55flaggs@yahoo

Office Sought State Representative Political Party Democrat

☐ Check here if above is different from previous report

TYPE OF REPORT

_____ May 25, 2010 Pre-Election Report (January 1, 2010, through May 22, 2010).....Mandatory

_____ June 15, 2010 Pre-Runoff Report (May 23, 2010, through June 12, 2010).....Runoff Candidates

_____ October 26, 2010 Pre-General Report (May 23, 2010, through October 23, 2010).....All Candidates

_____ November 16, 2010 Pre-Runoff Report (October 24, 2010, through November 13, 2010).....Runoff Candidates

✓ January 31, 2011 Annual Report (January 1, 2010, through December 31, 2010).....All Candidates and Political Committees

_____ 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	$ 56,975.00	+$ 1,000.00	$ 57,975.00	$ 57,975.00
Total amount of disbursements	$ 35,990.89	+$ 9,505.60	$ 45,496.49	$ 45,496.49
Total amount of cash on hand			$ 48,538.30	

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 Candidate _____ Date JAN. 30, 2011

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 George Flaggs, Jr.

Reporting period Jan 1, 2010 through Dec 31, 2010

ITEMIZED RECEIPTS

A. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Medimmune Affairs, Inc	12/06/10	$ 400.00
Mailing Address: One Medimmune Way	__/__/__	$
City, State, Zip Code: Gaithersburg, MD 20878	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 400.00

B. Source: ☐ Corporation ☑ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: MMHA - PAC	12/4/10	$ 1,000.00
Mailing Address: P.O. Box 320369 - 1001 Airport Rd	__/__/__	$
City, State, Zip Code: Jackson, MS 39232	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 1,000.00

C. Source: ☐ Corporation ☑ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Good Government PAC	12/13/10	$ 500.00
Mailing Address: P.O Box 4019	__/__/__	$
City, State, Zip Code: Gulfport, MS 39502	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	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: Jimmy G. or Peggy Gouras	12/2/10	$ 1,000.00
Mailing Address: 725 Fort Hill Dr.	__/__/__	$
City, State, Zip Code: Vicksburg, MS 39180	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 1,000.00

Name of Candidate or Committee George Flaggs, Jr.

Reporting period Jan 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Bobby L. or Susan Beebe	9/17/10	$ 250.00
Mailing Address: 300 Cop Crossing	__/__/__	$
City, State, Zip Code: Madison, MS 39110	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	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: Atmos Entergy Corp, ~~PAC~~ PAC	10/15/10	$ 500.00
Mailing Address: 5430 LBJ Freeway, Ste 160	__/__/__	$
City, State, Zip Code: Dallas, TX 75240	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 500.00

C. Source: ☐ Corporation ☑ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: United HealthCare Services, Inc	10/6/10	$ 500.00
Mailing Address: P.O. Box 1459	__/__/__	$
City, State, Zip Code: Minneapolis, MN 55440	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	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: Strategic Link Consulting	10/5/10	$ 1,000.00
Mailing Address: Peachtree Road NE	__/__/__	$
City, State, Zip Code: Atlanta, Ga 30326	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 1,000.00

Name of Candidate or Committee George Flaggs, Jr.

Reporting period Jan 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: AltRia Client Services, Inc.	9/27/10	$ 500.00
Mailing Address	__/__/__	$
City, State, Zip Code	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	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: United Motor Club of America	9/16/10	$ 500.00
Mailing Address: P.O. Box 60	__/__/__	$
City, State, Zip Code: Paducah, Kentucky 42002	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 500.00

C. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Billy Carroll	9/14/10	$ 250.00
Mailing Address: P.O. Box 391	__/__/__	$
City, State, Zip Code: Meridian, MS	__/__/__	$
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: Billy McCoy Campaign	9/3/10	$ 1,000.00
Mailing Address: 259 County Road	__/__/__	$
City, State, Zip Code: Rienzi, MS 38865	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 1,000.00

Name of Candidate or Committee George Flaggs, Sr.

Reporting period Jan 1, 2010 through Dec. 31, 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 Realtors PAC	9/13/10	$ 500.00
Mailing Address: P.O. Box 321000	__/__/__	$
City, State, Zip Code: Flowood, MS 39232	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	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: The GEO Group, Inc.	9/22/10	$ 500.00
Mailing Address: 621 NW 53rd Street	__/__/__	$
City, State, Zip Code: Boca Raton, FL 33487	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 500.00

C. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Health Management Assoc. MS	9/15/10	$ 1,000.00
Mailing Address: 2550 Flowood Dr., Ste 402	__/__/__	$
City, State, Zip Code: Flowood, MS 39232	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 1,000.00

D. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Check into Cash of MS, Inc.	9/14/10	$ 1,000.00
Mailing Address: P.O. Box 550	__/__/__	$
City, State, Zip Code: Cleveland, MS 37364	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 1,000.00

Name of Candidate or Committee George Flaggs, Jr.

Reporting period Jan. 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Bryan D. Anderson	4/22/10	$ 250.00
Mailing Address: 6241 St. Elmo Road	__/__/__	$
City, State, Zip Code: Bartlett, TN 38135	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	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: Money Now Hattiesburg	4/27/10	$ 250.00
Mailing Address: 1100 Hardy Street, Ste. 20	__/__/__	$
City, State, Zip Code: Hattiesburg, MS 39403	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	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: ENPAC Mississippi	9/1/10	$ 250.00
Mailing Address: P.O. Box 1640	__/__/__	$
City, State, Zip Code: Jackson, MS 39215	__/__/__	$
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: Merck Sharp & Dohme Corp.	7/15/10	$ 500.00
Mailing Address: One Merck Drive	__/__/__	$
City, State, Zip Code: Whitehouse Station, NJ 08889	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 500.00

Name of Candidate or Committee George Flaggs, Jr.

Reporting period JAN. 1, 2010 through DEC. 31, 2010

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☑ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: BANK-plus PAC for Responsible Gov't	9/8/10	$ 500.00
Mailing Address: 1068 Highland Colony Pkwy	__/__/__	$
City, State, Zip Code: Ridgeland, MS 39157	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	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 H. Clayton	9/10/10	$ 250.00
Mailing Address: 103 E. Gresham	__/__/__	$
City, State, Zip Code: Indianola, MS 38751	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	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: First State Bank	9/13/10	$ 500.00
Mailing Address: P.O. Box 506	__/__/__	$
City, State, Zip Code: Waynesboro, MS 39367	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	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: MS Healthcare Association PAC	9/9/10	$ 500.00
Mailing Address: 1076 Highland Colony Pkwy Ste 125	__/__/__	$
City, State, Zip Code: Ridgeland, MS 39157	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 500.00

Name of Candidate or Committee George Flaggs, Jr.

Reporting period Jan 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: eCash Software Systems, Inc.	9/14/10	$ 1,000.00
Mailing Address: 216 Avalon Circle; Ste. A.	__/__/__	$
City, State, Zip Code: Brandon, MS 39047	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 1,000.00

B. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Larry & Delois Montgomery	9/13/10	$ 1,000.00
Mailing Address: 101 Francis Drive	__/__/__	$
City, State, Zip Code: Fulton, MS 38843	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	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: Luke Montgomery	9/13/10	$ 1,000.00
Mailing Address: P.O. Box 37	__/__/__	$
City, State, Zip Code: Fulton, MS 38843	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 1,000.00

D. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Tower Loan	9/9/10	$ 1,000.00
Mailing Address: P.O. Box 320001	__/__/__	$
City, State, Zip Code: Flowood, MS 39232	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 1,000.00

Name of Candidate or Committee George Flagg, Sr.

Reporting period Jan. 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: First State BANK	9/13/10	$ 500.00
Mailing Address: P.O. Box 506	/ /	$
City, State, Zip Code: Waynesboro, MS 39367	/ /	$
Name of Employer (Required)	/ /	$
Occupation (Required)	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: Financial Management Services	9/13/10	$ 500.00
Mailing Address: P.O. Box 3073	/ /	$
City, State, Zip Code: Cordova, TN 38088	/ /	$
Name of Employer (Required)	/ /	$
Occupation (Required)	Aggregate year-to-date	$ 500.00

C. Source: ☐ Corporation ☑ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: LEN PAC	9/14/10	$ 1,000.00
Mailing Address: 3 Lakeland Cir Ste 201	/ /	$
City, State, Zip Code: Jackson, MS 39216	/ /	$
Name of Employer (Required)	/ /	$
Occupation (Required)	Aggregate year-to-date	$ 1,000.00

D. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Caplin Enterprises, INC	9/13/10	$ 1,000.00
Mailing Address: DBA Quick Cash 147 W. Gallatin St.	/ /	$
City, State, Zip Code: Hazlehurst, MS 39083	/ /	$
Name of Employer (Required)	/ /	$
Occupation (Required)	Aggregate year-to-date	$ 1,000.00

Name of Candidate or Committee George Flaggs, Jr.

Reporting period Jan. 1, 2010 through Dec 31, 2010

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: John I. Brasher	9/14/10	$ 300.00
Mailing Address: 145 Brasher Rd	__/__/__	$
City, State, Zip Code: Batesville, MS 38606	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 300.00

B. Source: ☐ Corporation ☑ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Mississippi Independent RX PAC	9/14/10	$ 500.00
Mailing Address: 4209 Lakeland Dr., Ste 399	__/__/__	$
City, State, Zip Code: Flowood, MS 39232	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 500.00

C. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: CASH IN A Flash Check Advance	9/8/10	$ 500.00
Mailing Address: 320 Meadowbrook Rd	__/__/__	$
City, State, Zip Code: Jackson, MS 39206	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	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: MTPA, PAC	9/11/10	$ 500.00
Mailing Address: 345 Hwy 6 West	__/__/__	$
City, State, Zip Code: Batesville, MS 38606	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 500.00

Name of Candidate or Committee George Hagan, Jr.

Reporting period Jan. 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Charles Myers	9/14/10	$ 250.00
Mailing Address: 215 Katherine Drive	/ /	$
City, State, Zip Code: Flowood, MS 39232	/ /	$
Name of Employer (Required)	/ /	$
Occupation (Required)	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: The Corbitt Co. LLC	9/13/10	$ 250.00
Mailing Address: P.O. Box 14225	/ /	$
City, State, Zip Code: Jackson, MS 39236	/ /	$
Name of Employer (Required)	/ /	$
Occupation (Required)	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: MS Power company State PAC	9/8/10	$ 250.00
Mailing Address: P.O. Box 4079	/ /	$
City, State, Zip Code: Gulfport, MS 39502	/ /	$
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: James H. Clayton	9/10/10	$ 250.00
Mailing Address: 103 E Grisham	/ /	$
City, State, Zip Code: Indianola, MS 38751	/ /	$
Name of Employer (Required)	/ /	$
Occupation (Required)	Aggregate year-to-date	$ 250.00

Name of Candidate or Committee George Flaggs Jr.

Reporting period Jan. 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Anheuser-Busch Cos, Inc	8/25/10	$ 500.00
Mailing Address	__/__/__	$
City, State, Zip Code	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	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: Wells Fargo & Co. Alabama Employees Good Government Fund	9/7/10	$ 500.00
Mailing Address	__/__/__	$
City, State, Zip Code	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 500.00

C. Source: ☐ Corporation ☑ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: MS Bankers Association PAC	8/24/10	$
Mailing Address: P.O. Box 1091	__/__/__	$ 1,500.00
City, State, Zip Code: Jackson, MS 39215	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 1,500.00

D. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Check Exchange of MS, Inc.	9/2/10	$ 1,000.00
Mailing Address: 711 Brookway Blvd; Ste C & D	__/__/__	$
City, State, Zip Code: Brookhaven, MS 39601	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 1,000.00

Name of Candidate or Committee George Flaggs, Jr.

Reporting period Jan. 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☑ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Mississippi Dental PAC	8/17/10	$ 1,000.00
Mailing Address	__/__/__	$
City, State, Zip Code: Jackson, MS	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 1,000.00

B. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Centene Management Co. LLC	12/10/09	$ 500.00
Mailing Address	__/__/__	$
City, State, Zip Code: St. Louis, MO 63105	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 500.00

C. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Isle of Capri Casino, Inc.	12/21/09	$ 1,000.00
Mailing Address: 600 Emerson Rd., Ste. 300	__/__/__	$
City, State, Zip Code: St. Louis, MO 63141	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 1,000.00

D. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Bank of Brookhaven	12/31/09	$ 1,000.00
Mailing Address	__/__/__	$
City, State, Zip Code: Brookhaven, MS	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 1,000.00

Name of Candidate or Committee George Flaggs, Sr.

Reporting period Jan. 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☑ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: LEN PAC	4/14/10	$ 1,000.00
Mailing Address: 3 Lakeland Cr., Ste 201	__/__/__	$
City, State, Zip Code: Jackson, MS 39216	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 1,000.00

B. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: First Heritage Credit, LLC	4/22/10	$ 2,000.00
Mailing Address: 605 Crescent Blvd., Ste. 101	__/__/__	$
City, State, Zip Code: Ridgeland, MS 39157	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 2,000.00

C. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: United Motor Club of America	4/26/10	$ 2,000.00
Mailing Address: P.O. Box 60	__/__/__	$
City, State, Zip Code: Paducah, Kentucky 42002	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 2,000.00

D. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: First Tower Corp.	4/22/10	$ 500.00
Mailing Address: P.O. Box 6000	__/__/__	$
City, State, Zip Code: Jackson, MS 39288	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 500.00

Name of Candidate or Committee George Flaggs, Jr.

Reporting period Jan. 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Billy Carroll	4/5/10	$ 500.00
Mailing Address: P.O. Box 391	__/__/__	$
City, State, Zip Code: Meridian, MS 39302	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	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 Thurman	4/27/10	$ 1,000.00
Mailing Address: P.O. Box 451	__/__/__	$
City, State, Zip Code: Dayton, TN 37321	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 1,000.00

C. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: James F. Dill, Jr	4/27/10	$ 1,000.00
Mailing Address: P.O. Box 50	__/__/__	$
City, State, Zip Code: Dayton, TN 37321	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 1,000.00

D. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: James F. Dill	4/27/10	$ 1,000.00
Mailing Address: P.O. Box 451	__/__/__	$
City, State, Zip Code: Dayton, TN 37321	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 1,000.00

Name of Candidate or Committee George Flaggs, Jr.

Reporting period Jan. 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Eli Lilly & Company	7/9/10	$ 250.00
Mailing Address	__/__/__	$
City, State, Zip Code: Indianapolis, Indiana 46285	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	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: Zenaca Services	8/5/10	$ 400.00
Mailing Address: P.O. Box 15437	__/__/__	$
City, State, Zip Code: Wilmington, DE 19850	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 400.00

C. Source: ☐ Corporation ☑ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: AT&T MS Political Action Comm	8/6/10	$ 500.00
Mailing Address: 175 E. Capital Street	__/__/__	$
City, State, Zip Code: Jackson, MS 39201	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	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: MAE-PAC	8/26/10	$ 1,000.00
Mailing Address	__/__/__	$
City, State, Zip Code: Jackson, MS	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 1,000.00

Name of Candidate or Committee George Flaggs, Jr.

Reporting period Jan. 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Allergan USA, INC.	1/7/10	$ 500.00
Mailing Address: 2525 Dupont Drive	/ /	$
City, State, Zip Code: Irvine, CA 92612	/ /	$
Name of Employer (Required)	/ /	$
Occupation (Required)	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: First Heritage Credit, LLC	2/15/10	$ 500.00
Mailing Address: 605 Crescent Blvd, Ste. 101	/ /	$
City, State, Zip Code: Ridgeland, MS 39157	/ /	$
Name of Employer (Required)	/ /	$
Occupation (Required)	Aggregate year-to-date	$ 500.00

C. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: DAN Robinson	4/20/10	$ 500.00
Mailing Address: 578 C Lakeland Drive	/ /	$
City, State, Zip Code: Flowood, MS 39232	/ /	$
Name of Employer (Required)	/ /	$
Occupation (Required)	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: Jerry Stogner	4/20/10	$ 1,000.00
Mailing Address: P.O. Box 1683	/ /	$
City, State, Zip Code: McComb, MS 39649	/ /	$
Name of Employer (Required)	/ /	$
Occupation (Required)	Aggregate year-to-date	$ 1,000.00

Name of Candidate or Committee George Flaggs, Jr.

Reporting period Jan. 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: CAPLIN ENTERPRISES INC. - Zippy Cks	4/20/10	$ 1,000.00
Mailing Address: 147 W. Gallatin Street	__/__/__	$
City, State, Zip Code: Hazelhurst, MS 39083	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 1,000.00

B. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Montgomery Enterprises, Inc.	4/20/10	$ 1,000.00
Mailing Address: P.O. Box 37	__/__/__	$
City, State, Zip Code: Fulton, MS 38843	__/__/__	$
Name of Employer (Required)	__/__/__	$ 1,000.00
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: 1st. FRANKLIN Financial	4/12/10	$ 500.00
Mailing Address: P.O. Box 880.	__/__/__	$
City, State, Zip Code: Toccoa, GA 30577	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	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: Gulf Islands Credit, Inc.	4/26/10	$ 500.00
Mailing Address: 1115 Pass Road	__/__/__	$
City, State, Zip Code: Gulfport, MS 39501	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 500.00

Name of Candidate or Committee George Flaggs, Sr.

Reporting period Jan. 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Keene Financial Group, INC	9/2/10	$ 1,000.00
Mailing Address: 711 Brookway Blvd; Ste C&D	__/__/__	$
City, State, Zip Code: Brookhaven, MS 39601	__/__/__	$
Name of Employer (Required)	__/__/__	$ 1,000.00
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: Speedee Cash Management Co.	8/23/10	$ 1,000.00
Mailing Address: P.O. Box 535	__/__/__	$
City, State, Zip Code: Crestview FL 32536	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 1,000.00

C. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: First Heritage Credit, LLC	9/9/10	$ 1,000.00
Mailing Address: 605 Crescent Blvd; Ste 101	__/__/__	$
City, State, Zip Code: Ridgeland, MS 39157	__/__/__	$
Name of Employer (Required)	__/__/__	$ 1,000.00
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: Title Cash, INC.	8/27/10	$ 1,000.00
Mailing Address: 2842 Clay St.	__/__/__	$
City, State, Zip Code: Vicksburg, MS 39183	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 1,000.00

Name of Candidate or Committee George Flaggs, Sr.

Reporting period Jan 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Deweese Title Loan, LLC	8/23/10	$ 1,000.00
Mailing Address: 208 B. Hwy. 12 west	__/__/__	$
City, State, Zip Code: Starkville, MS 39759	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 1,000.00

B. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: All American Check Cashing	7/23/10	$ 1,000.00
Mailing Address: P.O. Box 1350	__/__/__	$
City, State, Zip Code: Ridgeland, MS 39158	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 1,000.00

C. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Eddie or Shelley McKinney	8/30/10	$ 500.00
Mailing Address: 15 CR 459	__/__/__	$
City, State, Zip Code: Corinth, MS 38834	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	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: W.B. Consolidated	9/14/10	$ 500.00
Mailing Address: 770 Northwest Street	__/__/__	$
City, State, Zip Code: Jackson, MS 39205	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 500.00

Name of Candidate or Committee George Flaggs, Jr.

Reporting period Jan. 1, 2010 through Dec. 31, 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 Association for Homecare	11/22/10	$ 300.00
Mailing Address: 134 Fairmont St, Ste. B.	__/__/__	$
City, State, Zip Code: Clinton, MS 39056	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 300.00

B. Source: ☐ Corporation ☑ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Abbott Laboratories Emp. PAC	11/4/10	$ 325.00
Mailing Address: 100 Abbott Park Road	__/__/__	$
City, State, Zip Code: Abbott Park, IL 60064	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 325.00

C. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Ameristar Casino Vicksburg	11/11/10	$ 1,000.00
Mailing Address: 4116 Washington Street	__/__/__	$
City, State, Zip Code: Vicksburg, MS 39180	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 1,000.00

D. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Medco Health Solutions, Inc.	12/03/10	$ 500.00
Mailing Address: and Medco Health Affiliates 100 Parsons Pond Drive	__/__/__	$
City, State, Zip Code: Franklin Lakes, NJ 07417	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 500.00

Name of Candidate or Committee George Flaggs Sr.

Reporting period Jan 1, 2010 through Dec. 31, 2010

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☑ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: MISS LUPAC	12/15/10	$ 1,000.00
Mailing Address: P.O. Box 13649	__/__/__	$
City, State, Zip Code: Jackson, MS 39236	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 1,000.00

B. 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	$

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 George Flaggs, Jr.

Reporting period Jan 1, 2010 through Dec 31, 2010

ITEMIZED DISBURSEMENTS

	Date (Mo., Day, Year)	Amount of each disbursement this period
A. Full name: Alamo Car Rental - Airport Mailing Address: 143 South Hanger Dr. City, State, Zip Code: Jackson, MS 39208 Purpose of Disbursement (Optional):	5/27/10 __/__/__ Aggregate Year-to-date	$ 297.15 $ $ 297.15
B. Full name: Tougaloo College Mailing Address: City, State, Zip Code: Tougaloo, MS Purpose of Disbursement (Optional):	7/22/10 __/__/__ Aggregate Year-to-date	$ 200.00 $ $ 200.00
C. Full name: Stow Away - Pearl Mailing Address: 4195 Highway 80 E City, State, Zip Code: Pearl, MS 39208 Purpose of Disbursement (Optional):	10/20/10 __/__/__ Aggregate Year-to-date	$ 319.00 $ $ 319.00
D. Full name: Vicksburg Eagles Mailing Address: P.O. Box 820255 City, State, Zip Code: Vicksburg, MS 39182 Purpose of Disbursement (Optional):	4/1/10 __/__/__ Aggregate Year-to-date	$ 150.00 $ $ 150.00
E. Full name: Miller's Tree mart Mailing Address: 1709 clay St. City, State, Zip Code: Vicksburg, MS 39183 Purpose of Disbursement (Optional):	10/29/10 __/__/__ Aggregate Year-to-date	$ 300.00 $ $ 300.00
F. Full name: Vicksburg Venom Baseball Mailing Address: City, State, Zip Code: Vicksburg, MS Purpose of Disbursement (Optional):	2/19/10 __/__/__ Aggregate Year-to-date	$ 150.00 $ $ 150.00

Name of Candidate or Committee George Flaggs, Jr.

Reporting period Jan 1, 2010 through Dec. 31, 2010

ITEMIZED DISBURSEMENTS

A. Full name Jefferson Funeral Home	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	12/9/10	$ 300.00
City, State, Zip Code Vicksburg, MS	__/__/__	$
Purpose of Disbursement (Optional) Funeral assistance	Aggregate Year-to-date	$ 300.00
B. Full name Les Soeurs Charmantes	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	12/9/10	$ 200.00
City, State, Zip Code Vicksburg, MS	__/__/__	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 200.00
C. Full name Lowes Atlanta Hotel	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1065 Peachtree Street	11/29/10	$ 1,067.00
City, State, Zip Code atlanta, GA	__/__/__	$ 120.0
Purpose of Disbursement (Optional) Legislative Conference	Aggregate Year-to-date	$ 1187.00
D. Full name Dr. LLoyd	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 4754 Lee Roath	11/29/10	$ 200.00
City, State, Zip Code Vicksburg, MS	__/__/__	$
Purpose of Disbursement (Optional) Donation	Aggregate Year-to-date	$ 200.00
E. Full name LeFleur Limousine	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 219 Industrial Drive	11/19/10	$ 510.00
City, State, Zip Code Ridgeland, MS 39157	__/__/__	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 510.00
F. Full name Griffith Florist of Vicksburg	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1019 Jackson Street	__/__/__	$ 222.56
City, State, Zip Code Vicksburg, MS	__/__/__	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 222.56

Name of Candidate or Committee George Flaggs, Jr.

Reporting period Jan 1, 2010 through Dec. 31, 2010

ITEMIZED DISBURSEMENTS

A. Full name NBCSL	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address P. O. Box 179	10/29/10	$ 475.00
City, State, Zip Code Madison, AL 35758	__/__/__	$
Purpose of Disbursement (Optional) Registration	Aggregate Year-to-date	$ 475.00
B. Full name Alcorn State University	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address Alumni Foundation, Inc. 107 Colonial Drive	10/14/10	$ 100.00
City, State, Zip Code Vicksburg, MS 39180	__/__/__	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 100.00
C. Full name Enterprise Leasing Co.	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 5355 I-55 Frontage Rd	12/7/10	$ 279.62
City, State, Zip Code Jackson, MS 39206	__/__/__	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 279.62
D. Full name Dept. of Human Service	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	12/14/10	$ 225.00
City, State, Zip Code Vicksburg, MS	__/__/__	$
Purpose of Disbursement (Optional) Christmas Gift Donation	Aggregate Year-to-date	$ 225.00
E. Full name Committee to Elect Melvin Priester	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	12/27/10	$ 300.00
City, State, Zip Code Jackson, MS	__/__/__	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 300.00
F. Full name Elliott George Flaggs	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 2000 Lexington Point	12/27/10	$ 500.00
City, State, Zip Code Oxford, MS 38655	__/__/__	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 500.00

Name of Candidate or Committee George Flagg, Jr.

Reporting period Jan. 1, 2010 through Dec. 31, 2010

ITEMIZED DISBURSEMENTS

	Date (Mo., Day, Year)	Amount of each disbursement this period
A. Full name: Bettye Neal Mailing Address: 603 Howard Street City, State, Zip Code: Vicksburg, MS 39180 Purpose of Disbursement (Optional): Retirement party	5/8/10	$ 380.00
	__/__/__	$
	Aggregate Year-to-date	$ 380.00
B. Full name: American Express Mailing Address: P.O. Box 650448 City, State, Zip Code: Dallas, TX 75265 Purpose of Disbursement (Optional):	9/27/10	$ 940.79
	5/10/10	$ 1,000.00
	Aggregate Year-to-date	$ 1,940.79
C. Full name: American Express Mailing Address: P.O. Box 650448 City, State, Zip Code: Dallas, TX 75265 Purpose of Disbursement (Optional):	8/8/10	$ 424.61
	3/30/10	$ 1,000.00
	Aggregate Year-to-date	$ 1,424.61
D. Full name: American Express Mailing Address: P.O. Box 650448 City, State, Zip Code: Dallas, TX 75265 Purpose of Disbursement (Optional):	6/28/10	$ 1,210.03
	10/29/10	$ 677.57
	Aggregate Year-to-date	$ 1,887.60
E. Full name: American Express Mailing Address: P.O. Box 650448 City, State, Zip Code: Dallas, TX 75265 Purpose of Disbursement (Optional):	8/30/10	$ 1,370.63
	__/__/__	$
	Aggregate Year-to-date	$ 1,370.63
F. Full name: Shapley's Restaurant Mailing Address: City, State, Zip Code: Ridgeland, MS Purpose of Disbursement (Optional):	11/20/10	$ 110.00
	11/14/10	$ 241.51
	Aggregate Year-to-date	$ 351.51

Name of Candidate or Committee George Flaggs, Jr.

Reporting period Jan. 1, 2010 through Dec. 31, 2010

ITEMIZED DISBURSEMENTS

	Date (Mo., Day, Year)	Amount of each disbursement this period
A. Full name: Jackson Chapter of Jack & Jill		
Mailing Address: P.O. Box 13983	1/11/10	$ 200.00
City, State, Zip Code: Jackson, MS 39236	__/__/__	$
Purpose of Disbursement (Optional): ad	Aggregate Year-to-date	$ 200.00
B. Full name: Beverly Stewart		
Mailing Address	1/29/10	$ 200.00
City, State, Zip Code: Vicksburg, MS	__/__/__	$
Purpose of Disbursement (Optional): Donation	Aggregate Year-to-date	$ 200.00
C. Full name: Brandon Jones		
Mailing Address: P.O. Box 571	6/1/10	$ 250.00
City, State, Zip Code: Pascagoula, MS 39568	__/__/__	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 250.00
D. Full name: Miller's tire mart		
Mailing Address: 1709 Clay Street	6/1/10	$ 400.00
City, State, Zip Code: Vicksburg, MS 39183	__/__/__	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 400.00
E. Full name: Vicksburg Homecoming Benevolent Club		
Mailing Address	6/7/10	$ 1,500.00
City, State, Zip Code: Vicksburg, MS	__/__/__	$
Purpose of Disbursement (Optional): Sponsorship	Aggregate Year-to-date	$ 1,500.00
F. Full name: Car Care Clinic Jet Lube		
Mailing Address: 105 Triangle Drive	6/9/10	$ 498.53
City, State, Zip Code: Jackson, MS 39206	__/__/__	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 498.53

Name of Candidate or Committee George Haggs Jr.

Reporting period Jan. 1, 2010 through Dec. 31, 2010

ITEMIZED DISBURSEMENTS

	Date (Mo., Day, Year)	Amount of each disbursement this period
A. Full name: Shape up Sisters Mailing Address: 3215 Plaza Drive City, State, Zip Code: Vicksburg, MS 39180 Purpose of Disbursement (Optional):	__/__/__ Aggregate Year-to-date	$ 500.00 $ 500.00
B. Full name: V-PAC Mailing Address: City, State, Zip Code: Jackson, MS Purpose of Disbursement (Optional):	2/26/10 __/__/__ Aggregate Year-to-date	$ 1,000.00 $ $ 1,000.00
C. Full name: Juanita Sims Doty Mailing Address: P.O. Box 16613 City, State, Zip Code: Jackson, MS 39 Purpose of Disbursement (Optional):	3/21/10 __/__/__ Aggregate Year-to-date	$ 200.00 $ $ 200.00
D. Full name: Kuhn Memorial Hospital Mailing Address: City, State, Zip Code: Vicksburg, MS Purpose of Disbursement (Optional): Reunion Banquet	3/19/2010 __/__/__ Aggregate Year-to-date	$ 400.00 $ $ 400.00
E. Full name: Jamilah Akilah Perkins Mailing Address: 806 South Blvd. City, State, Zip Code: Greenwood, MS 38390 Purpose of Disbursement (Optional): Donation	4/1/10 __/__/__ Aggregate Year-to-date	$ 200.00 $ $ 200.00
F. Full name: Vicksburg Cpty Delta Sigma Mailing Address: City, State, Zip Code: Vicksburg, MS Purpose of Disbursement (Optional): Donation	__/__/__ __/__/__ Aggregate Year-to-date	$ 400.00 $ $ 400.00

Name of Candidate or Committee George Flagg, Jr.

Reporting period Jan. 1, 2010 through Dec 31, 2010

ITEMIZED DISBURSEMENTS

	Date (Mo., Day, Year)	Amount of each disbursement this period
A. Full name: Sandestin Golf & Beach Resort Mailing Address: 9300 Emerald Coast Parkway W City, State, Zip Code: Destin, FL 32550 Purpose of Disbursement (Optional):	5/24/10	$ 441.88
	Aggregate Year-to-date	$ 441.88
B. Full name: Jackson State University Mailing Address: National alumni assn. Vicksburg Chapter City, State, Zip Code: Vicksburg, MS Purpose of Disbursement (Optional): Sponsorship	9/27/10	$ 500.00
	Aggregate Year-to-date	$ 500.00
C. Full name: Vicksburg Convention & Visitors Bureau Mailing Address: P.O. Box 110 City, State, Zip Code: Vicksburg, MS 39181 Purpose of Disbursement (Optional): Video for Beulah Cementary	8/3/10	$ 1,250.00
	Aggregate Year-to-date	$ 1,250
D. Full name: Jacqueline House African American museum Mailing Address: City, State, Zip Code: Vicksburg, MS Purpose of Disbursement (Optional): Donation	9/8/10	$ 500.00
	Aggregate Year-to-date	$ 500.00
E. Full name: Fisher Ferry Volunteer Fire Mailing Address: City, State, Zip Code: Vicksburg, MS Purpose of Disbursement (Optional):	9/8/10	$ 500.00
	Aggregate Year-to-date	$ 500.00
F. Full name: United Cleaners Mailing Address: 1905 Cherry Street City, State, Zip Code: Vicksburg, MS Purpose of Disbursement (Optional):	2/2/10	$ 1,088.00
	Aggregate Year-to-date	$ 1,088.00

Name of Candidate or Committee George Flaggs, Jr.

Reporting period Jan. 1, 2010 through Dec. 31, 2010

ITEMIZED DISBURSEMENTS

	Date (Mo., Day, Year)	Amount of each disbursement this period
A. Full name: Meray Baptist Church Mailing Address: 5 Dos Casa Lane City, State, Zip Code: Vicksburg, MS 39180 Purpose of Disbursement (Optional):	7/12/10 __/__/__ Aggregate Year-to-date	$ 200.00 $ $ 200.00
B. Full name: United Way Mailing Address: 920 South Street City, State, Zip Code: Vicksburg, MS Purpose of Disbursement (Optional): Donation	7/6/10 __/__/__ Aggregate Year-to-date	$ 500.00 $ $ 500.00
C. Full name: Ebony Pearls Foundation Mailing Address: City, State, Zip Code: Vicksburg, MS Purpose of Disbursement (Optional): Sponsorship	11/16/10 __/__/__ Aggregate Year-to-date	$ 250.00 $ $ 250.00
D. Full name: Carla B. Metcalf Mailing Address: 7728 Old Canton Road City, State, Zip Code: Madison, MS 39110 Purpose of Disbursement (Optional):	11/16/10 __/__/__ Aggregate Year-to-date	$ 493.00 $ $ 493.00
E. Full name: Dell Mailing Address: P.O. Box 6403 City, State, Zip Code: Carol Stream, IL 60197 Purpose of Disbursement (Optional):	11/12/10 __/__/__ Aggregate Year-to-date	$ 400.00 $ $ 400.00
F. Full name: Tanna Singleton Edmond Mailing Address: Hwy. 80 City, State, Zip Code: Vicksburg, MS Purpose of Disbursement (Optional): Donation	11/5/10 __/__/__ Aggregate Year-to-date	$ 300.00 $ $ 300.00

Name of Candidate or Committee George Flaggs, Jr.

Reporting period Jan. 1, 2010 through Dec 31, 2010

ITEMIZED DISBURSEMENTS

	Date (Mo., Day, Year)	Amount of each disbursement this period
A. Full name: El Sombroro Mailing Address: City, State, Zip Code: Vicksburg, MS Purpose of Disbursement (Optional):	8/14/10	$ 67.78
	11/22/10	$ 47.44
	Aggregate Year-to-date	$ 115.22
B. Full name: El Sombroro Restaurant Mailing Address: City, State, Zip Code: Vicksburg, MS Purpose of Disbursement (Optional):	11/29/10	$ 88.60
	12/18/10	$ 44.00
	Aggregate Year-to-date	$ 132.60
C. Full name: Ruth Chris Steak House Mailing Address: City, State, Zip Code: Ridgeland, MS Purpose of Disbursement (Optional):	3/15/10	$ 180.66
	1/6/10	$ 247.00
	Aggregate Year-to-date	$ 427.66
D. Full name: MANSOUR'S Mailing Address: City, State, Zip Code: Vicksburg, MS Purpose of Disbursement (Optional):	6/11/10	$ 211.00
	__/__/__	$
	Aggregate Year-to-date	$ 211.00
E. Full name: AJ's Seafood Grill Mailing Address: City, State, Zip Code: Ridgeland, MS Purpose of Disbursement (Optional):	6/20/10	$ 188.00
	4/6/10	$ 144.66
	Aggregate Year-to-date	$ 332.66
F. Full name: New ORleans Hilton Hotel Mailing Address: City, State, Zip Code: New Orleans, La Purpose of Disbursement (Optional):	12/10/10	$ 280.00
	__/__/__	$
	Aggregate Year-to-date	$ 280.00

Name of Candidate or Committee George Flagg, Jr.

Reporting period Jan. 1, 2010 through Dec. 31, 2010

ITEMIZED DISBURSEMENTS

	Date (Mo., Day, Year)	Amount of each disbursement this period
A. Full name: JB Entertainment		
Mailing Address: P.O. Box 1982	10/6/10	$ 1,000.00
City, State, Zip Code: Jackson, MS 39215	__/__/__	$
Purpose of Disbursement (Optional): Sponsorship ASU Alumni	Aggregate Year-to-date	$ 1,000.00
B. Full name: LD's Kitchen		
Mailing Address: 111 Mulberry Street	3/19/10	$ 300.00
City, State, Zip Code: Vicksburg, MS 39183	__/__/__	$ 269.62
Purpose of Disbursement (Optional): Catering Services	Aggregate Year-to-date	$ 569.62
C. Full name: LD's Kitchen		
Mailing Address: 111 Mulberry Street	5/14/10	$ 724.95
City, State, Zip Code: Vicksburg, MS 39183	12/17/10	$ 352.51
Purpose of Disbursement (Optional): Catering Services	Aggregate Year-to-date	$ 1,077.46
D. Full name: LD's Kitchen		
Mailing Address: 111 Mulberry Street	10/20/10	$ 167.50
City, State, Zip Code: Vicksburg, MS 39183	9/3/10	$ 156.00
Purpose of Disbursement (Optional): Catering Services	Aggregate Year-to-date	$ 323.50
E. Full name: LD's Kitchen		
Mailing Address: 111 Mulberry Street	6/22/10	$ 1,500
City, State, Zip Code: Vicksburg, MS	__/__/__	$
Purpose of Disbursement (Optional): Catering Services	Aggregate Year-to-date	$ 1,500
F. Full name: Mandalay Bay Resort		
Mailing Address: 3950 Las Vegas Blvd.	10/5/10	$ 986.86
City, State, Zip Code: Las Vegas, NV	__/__/__	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 986.86

Name of Candidate or Committee George Flaggs, Jr.

Reporting period Jan. 1, 2010 through Dec. 31, 2010

ITEMIZED DISBURSEMENTS

	Date (Mo., Day, Year)	Amount of each disbursement this period
A. Full name Shapley's Restaurant Mailing Address City, State, Zip Code Ridgeland, MS Purpose of Disbursement (Optional)	3/20/10	$ 180.00
	__/__/__	$
	Aggregate Year-to-date	$ 180.00
B. Full name Fitzgerald's Restaurant Mailing Address County line Road City, State, Zip Code Jackson, MS Purpose of Disbursement (Optional)	11/19/10	$ 114.88
	9/17/10	$ 95.43
	Aggregate Year-to-date	$ 210.31
C. Full name Fitzgerald's Restaurant Mailing Address County line Road City, State, Zip Code Jackson, MS Purpose of Disbursement (Optional)	12/1/10	$ 80.85
	7/23/10	$ 99.11
	Aggregate Year-to-date	$ 179.96
D. Full name Char Mailing Address City, State, Zip Code Jackson, MS Purpose of Disbursement (Optional)	3/29/10	$ 155.99
	8/13/10	$ 111.50
	Aggregate Year-to-date	$ 267.49
E. Full name Char Mailing Address City, State, Zip Code Jackson, MS Purpose of Disbursement (Optional)	7/19/10	$ 101.03
	8/31/10	$ 96.11
	Aggregate Year-to-date	$ 199.14
F. Full name Char Mailing Address City, State, Zip Code JACKSON, MS Purpose of Disbursement (Optional)	11/18/10	$ 120.36
	11/4/10	$ 58.58
	Aggregate Year-to-date	$ 178.94

Name of Candidate or Committee George Flagg, Jr

Reporting period Jan. 1, 2010 through Dec. 31, 2010

ITEMIZED DISBURSEMENTS

A. Full name Que Sera Sera	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	7/24/10	$ 67.66
City, State, Zip Code Jackson, MS	4/18/10	$ 49.00
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 116.66
B. Full name Que Sera Sera	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	12/31	$ 56.00
City, State, Zip Code Jackson, MS	5/29	$ 73.32
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 129.32
C. Full name Nick's Restaurant	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	3/26/10	$ 60.14
City, State, Zip Code Jackson, MS	3/26/10	$ 47.69
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 107.81
D. Full name Nick's Restaurant	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	8/24/10	$ 137.17
City, State, Zip Code Jackson, MS	8/24/10	$ 66.32
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 203.49
E. Full name Nick's Restaurant	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	9/3/10	$ 164.82
City, State, Zip Code Jackson, MS	9/22/10	$ 131.73
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 296.55
F. Full name Nick's Restaurant	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	10/6/10	$ 106.02
City, State, Zip Code Jackson, MS	6/8/10	$ 103.47
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 209.49

Name of Candidate or Committee George Flaggs, Jr.

Reporting period Jan. 1, 2010 through Dec. 31, 2010

ITEMIZED DISBURSEMENTS

A. Full name Tico's Restaurant	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	11/29/10	$ 189.60
City, State, Zip Code Jackson, MS	11/13/10	$ 130.00
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 319.60
B. Full name Julep's Restaurant	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	7/16/10	$ 68.70
City, State, Zip Code Jackson, MS	10/27/10	$ 84.02
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 152.72
C. Full name Julep's Restaurant	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	11/20/10	$ 66.80
City, State, Zip Code Jackson, MS	__/__/__	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 66.80
D. Full name Red Lobster	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	4/14/10	$ 167.80
City, State, Zip Code Jackson, MS	5/6/10	$ 87.60
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 255.40
E. Full name Parker House Restaurant	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	9/23/10	$ 192.11
City, State, Zip Code Ridgeland, MS	10/6/10	$ 28.87
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 220.98
F. Full name Beau Rivage	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	9/12/10	$ 298.37
City, State, Zip Code Biloxi, MS	__/__/__	$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 298.37