1-4

2010 ELECTION CYCLE

Delbert Hosemann
SECRETARY OF STATE

REPORT OF RECEIPTS AND DISBURSEMENTS
2010 Non-Judicial Election

RECEIVED
JAN 28 2011
Campaign Finance
Secretary of State
DATE STAMP

Name of Candidate JERRY R. TURNER

Address 1290 CARROLLVILLE RD.-BALDWYN, MS 38824

Telephone 662-365-5135 Fax 662-365-5135

Contact Name JERRY TURNER Email jerry.turner@yahoo.com

Office Sought STATE REPRESENTATIVE Political Party REPUBLICAN

☐ 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 16, 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

X 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	$ 5000.00	+ $ 600.00	$ 5,600.00	$ 5,600.00
Total amount of disbursements	$ 2775.62	+ $ 745.00	$ 3,520.62	$ 3520.62
Total amount of cash on hand			$ 6,719.55	

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

Jerry R. Turner
Signature of Candidate

1-26-2011
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 601-576-3918.
2. Candidates for countywide and county district offices should return forms to their county Circuit Clerk.

SOS 01-10

Name of Candidate or Committee JERRY R. TURNER

Reporting period 1/1/2010 through 12/31/2010

ITEMIZED RECEIPTS

A. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: KIMES & STONE CONSTRUCTION CO. INC.	4/30/10	$ 1000.00
Mailing Address: HWY 145 SOUTH	__/__/__	$
City, State, Zip Code: BOONEVILLE, MS. 38829	__/__/__	$
Name of Employer (Required): EARL STONE	__/__/__	$
Occupation (Required): ROAD CONSTRUCTION	Aggregate year-to-date	$ 1000.00

B. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☑ Other (please specify) BANK	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: FARMERS & MERCHANTS BANK	4/30/10	$ 1000.00
Mailing Address: P.O. BOX 278	__/__/__	$
City, State, Zip Code: BALDWYN, MS. 38824	__/__/__	$
Name of Employer (Required): NA	__/__/__	$
Occupation (Required): NA	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: BNSF RAILWAY COMPANY	9/13/10	$ 250.00
Mailing Address: 3253 EAST CHESTNUT EXPRESSWAY	__/__/__	$
City, State, Zip Code: SPRINGFIELD, MO. 65802-2540	__/__/__	$
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: AT&T MS. PAC	10/6/10	$ 500.00
Mailing Address: 175 E. CAPITAL ST., LANDMARK CTR., RM 703	__/__/__	$
City, State, Zip Code: JACKSON, MS. 39201	__/__/__	$
Name of Employer (Required): NA	__/__/__	$
Occupation (Required): N/A	Aggregate year-to-date	$ 500.00

Name of Candidate or Committee JERRY R. TURNER

Reporting period 1/1/2010 through 12/31/2010

ITEMIZED RECEIPTS

A. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name ADVANCE AMERICA	10/25/10	$ 500.00
Mailing Address 135 N. CHURCH ST.	__/__/__	$
City, State, Zip Code SPARTABURG, SC. 29306	__/__/__	$
Name of Employer (Required) N/A	__/__/__	$
Occupation (Required) N/A	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 CAPITAL ADVOCACY GROUP, PAC	12/22/10	$ 500.00
Mailing Address P.O. BOX 217	__/__/__	$
City, State, Zip Code JACKSON, MS. 39205	__/__/__	$
Name of Employer (Required) N/A	__/__/__	$
Occupation (Required) N/A	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 GEORGIA-PACFIC, LLC	__/__/__	$ 250.00
Mailing Address P.O. BOX 61270	__/__/__	$
City, State, Zip Code PHOENIX, AZ 85082-1270	__/__/__	$
Name of Employer (Required) N/A	__/__/__	$
Occupation (Required) N/A	Aggregate year-to-date	$ 250.00

D. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify) RE-IMBURSEMENT	Date (Mo., Day, Year)	Amount of each receipt this period
Full name AMERICAN LEGISLATIVE EXCHANGE COUNCIL	12/31/10	$ 1000.00
Mailing Address 1101 VERMONT AV., NW 11th FLOOR	__/__/__	$
City, State, Zip Code WASHINGTON, DC 2005	__/__/__	$
Name of Employer (Required) N/A	__/__/__	$
Occupation (Required) N/A	Aggregate year-to-date	$ 1000.00

Name of Candidate or Committee JERRY R. TURNER

Reporting period 1-1-2010 through 12-31-2010

ITEMIZED DISBURSEMENTS

	Date (Mo., Day, Year)	Amount of each disbursement this period
A. Full name: LEE COUNTY COURIER		
Mailing Address: 303 WEST MAIN ST	2/5/10	$ 55.00
City, State, Zip Code: TUPELO, MS. 38804	5/13/10	$ 82.50
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ ↓
B. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	6/30/10	$ 180.00
City, State, Zip Code	8/25/10	$ 165.00
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ ↓
C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	12/31/10	$ 165.00
City, State, Zip Code	__/__/__	$ ↓
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 647.50
D. Full name: CHASE CARD SERVICES	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address: P.O. BOX 15298	7/16/10	$ 660.00
City, State, Zip Code: WILMINGTON, DE. 19850-5298	12/10/10	$ 910.78
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 1,570.78
E. Full name: DISCOVER CARD	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address: P.O. BOX 30943	11/3/10	$ 132.90
City, State, Zip Code: SALT LAKE CITY, UT. 84130	11/25/10	$ 128.44
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 261.34
F. Full name: AGNEWS' RESTAURANT	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address: 2154 HWY 370	11/19/10	$ 296.00
City, State, Zip Code: BALDWYN, MS. 38824	__/__/__	$ —
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 296.00