2009 ELECTION CYCLE
SOS-ME

Delbert Hosemann
SECRETARY OF STATE

Candidate and Political Committees' REPORT OF RECEIPTS AND DISBURSEMENTS

RECEIVED
JAN 25 2010
Secretary of State
Capitol Office

Candidate's Name Sherra Hillman Lane

Full Address P.O. Box 971, Waynesboro, MS 39367

Telephone 601 735-5708 (Fax) 601 735-0576

E-mail Sherralhillman@bellsouth.net

Office Sought State Representative District 86 Political Party Democratic

☐ Check here if above is different from previous report

TYPE OF REPORT

✓ January 29, 2010 Annual Report (January 1, 2009, through December 31, 2009).....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 municipal clerk 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	$9,000.00 + $875.00 + 75.00 (in-Kind)	$ 9,875.00	$ 9,875.00
Total amount of disbursements	$750.00 + $999.16	$ 1749.16	$ $1749.16
Total amount of cash on hand		$ 12,428.21	

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

Sherra Hillman Lane
Signature of Candidate

1-25-2010
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 601-359-1499 or 601-576-2819.
2. Candidates for countywide and county district offices should return forms to their county Circuit Clerk.

Name of Candidate or Committee Sherra Hillman Lane

Reporting period 1-1-09 through 12-31-09

ITEMIZED DISBURSEMENTS

A. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
A Catered Affair		
Mailing Address 115 North Wheatley	12/3/09	$ 750.00
City, State, Zip Code Ridgeland, MS 39157	__/__/__	$
Purpose of Disbursement (Optional) Fund Raiser	Aggregate Year-to-date	$ 750.00
B. 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	$
C. 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	$
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	$

Name of Candidate or Committee Sherra Hillman Lane

Reporting period Jan 1st 2009 through Dec. 31st 2009

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☑ Other (please specify) PLLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Robert F. Wilkins	11/18/09	$ 250.00
Mailing Address: 475 East Capitol Street	__/__/__	$
City, State, Zip Code: Jackson, MS 39201	__/__/__	$
Name of Employer (Required): Robert F. Wilkins Law Firm, PLLC	__/__/__	$
Occupation (Required): Attorney	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: AT&T Miss. Political Action Committee	9/18/09	$ 200.00
Mailing Address: 175 E. Capitol St, Landmark Center Room 703	__/__/__	$
City, State, Zip Code: Jackson, MS 39201	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 200.00

C. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☑ Other (please specify) P.A.	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Joshua A. Turner	11/17/09	$ 250.00
Mailing Address: P.O. Box 2448	__/__/__	$
City, State, Zip Code: Oxford, MS 38655	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required): Attorney	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: Ralph E. Chapman	11/25/09	$ 250.00
Mailing Address: 338 Westover Dr.	__/__/__	$
City, State, Zip Code: Clarksdale, MS 38614	__/__/__	$
Name of Employer (Required): Chapman, Lewis, & Swan	__/__/__	$
Occupation (Required): Attorney	Aggregate year-to-date	$ 250.00

Name of Candidate or Committee Sherra Hillman Lane

Reporting period Jan 1, 2009 through Dec 31, 2009

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☑ Other (please specify) PLLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Hawkins, Stracener & Gibson, PLLC	11/24/09	$ 250.00
Mailing Address: PO Box 24627	__/__/__	$
City, State, Zip Code: Jackson, MS 39225-4627	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required): Law Firm	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: Danny E. Cupit	11/23/09	$ 250.00
Mailing Address: P.O. Box 22929	__/__/__	$
City, State, Zip Code: Jackson, MS 39225	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required): Attorney	Aggregate year-to-date	$ 250.00

C. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☑ Other (please specify) business	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: WB Conselidated	12/01/09	$ 1,000.00
Mailing Address: 770 North West St.	__/__/__	$
City, State, Zip Code: Jackson, MS 39205	__/__/__	$
Name of Employer (Required): WB Consolidated	__/__/__	$
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: Barbara A. Smith	12/01/09	$ 250.00
Mailing Address: 350 Old Spanish Trail	__/__/__	$
City, State, Zip Code: Jackson, MS 39212	__/__/__	$
Name of Employer (Required): UMC	__/__/__	$
Occupation (Required): employee	Aggregate year-to-date	$ 250.00

Name of Candidate or Committee Sherra Hillman Lane

Reporting period Jan 1, 2009 through Dec 31, 2009

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Kirkney & Associates	12/01/09	$ 200.00
Mailing Address: PO Box 33	__/__/__	$
City, State, Zip Code: Jackson MS 39205	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required): Attorney	Aggregate year-to-date	$ 200.00

B. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☑ Other (please specify) PLLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: The Diaz Law Firm PLLC	11/25/09	$ 250.00
Mailing Address: 208 Waterford Square, Suite 300	__/__/__	$
City, State, Zip Code: Madison, MS 39110	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required): Attorney	Aggregate year-to-date	$ 250.00

C. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☑ Other (please specify) PC	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Merrida P. Coxwell, PC	12/01/09	$ 200.00
Mailing Address: 500 N. State Street	__/__/__	$
City, State, Zip Code: Jackson MS 39201	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required): Attorney	Aggregate year-to-date	$ 200.00

D. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☑ Other (please specify) PLLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Langston & Langston, PLLC	11/30/09	$ 200.00
Mailing Address: 201 N. President Street	__/__/__	$
City, State, Zip Code: Jackson, MS 39201	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required): Attorneys	Aggregate year-to-date	$ 200.00

Name of Candidate or Committee Sherra Hillman Lane

Reporting period Jan 1, 2009 through Dec 31, 2009

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☑ Other (please specify) PLLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Grenfell, Sledge, & Stevens, PLLC	12/01/09	$ 500.00
Mailing Address: 1535 Felia Drive	__/__/__	$
City, State, Zip Code: Jackson, MS 39216	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required): Attorneys	Aggregate year-to-date	$ 500.00

B. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☑ Other (please specify) LLP	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Pittman, Germany, Roberts & Welsh, LLP	12/01/09	$ 500.00
Mailing Address: P.O. Box 22985	__/__/__	$
City, State, Zip Code: Jackson, MS 39225-2985	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required): Attorneys	Aggregate year-to-date	$ 500.00

C. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☑ Other (please specify) LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Meridian Southern Railway LLC	11/30/09	$ 1,000.00
Mailing Address: 25 Delphine Street	__/__/__	$
City, State, Zip Code: Owego, NY 13827	__/__/__	$
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: Vicki R. Slater, Attorney	12/01/09	$ 1,000.00
Mailing Address: P.O. Box 23981	__/__/__	$
City, State, Zip Code: Jackson, MS 39225-3981	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required): Attorney	Aggregate year-to-date	$ 1,000.00

Name of Candidate or Committee Sherra Hillman Lane

Reporting period Jan 1, 2009 through Dec 31, 2009

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Guy S. Akin	12/01/09	$ 250.00
Mailing Address: 102 Pine Cove	__/__/__	$
City, State, Zip Code: Clinton, MS 39056	__/__/__	$
Name of Employer (Required): Akin Milliam PLLC	__/__/__	$
Occupation (Required): Attorney	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: Sage Advice, Inc	12/01/09	$ 200.00
Mailing Address: 4785 I-55 North, Suite 103	__/__/__	$
City, State, Zip Code: Jackson MS 39206	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required): Governmental affairs	Aggregate year-to-date	$ 200.00

C. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☑ Other (please specify) P.A.	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Cynthia I Mitchell	12/05/09	$ 750.00
Mailing Address: 1620 Anne Dr.	__/__/__	$
City, State, Zip Code: Clarksdale, MS 38614	__/__/__	$
Name of Employer (Required): Merkel & Cocke, P.A.	__/__/__	$
Occupation (Required): Attorney	Aggregate year-to-date	$ 750.00

D. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☑ Other (please specify) PLLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Jones, Funderburg PLLC	12/03/09	$ 250.00
Mailing Address: 901 North State Street	__/__/__	$
City, State, Zip Code: Jackson MS 39201	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required): Attorneys	Aggregate year-to-date	$ 250.00

Name of Candidate or Committee Sherra Hillman Lane

Reporting period Jan. 1 2009 through Dec 31, 2009

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Margaret P. Ellis	11/13/09	$ 250.00
Mailing Address: 2609 Lynwood Street	__/__/__	$
City, State, Zip Code: Pascagoula, MS 39567	__/__/__	$
Name of Employer (Required): State of Mississippi	__/__/__	$
Occupation (Required): attorney	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: MNA PAC	12/14/09	$ 250.00
Mailing Address: 31 Woodgreen Place	__/__/__	$
City, State, Zip Code: Madison, MS 39110	__/__/__	$
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: Mississippi Independent Rx PAC	12/16/09	$ 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

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	$