2010 ELECTION CYCLE

Delbert Hosemann
SECRETARY OF STATE

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Judicial Candidate
REPORT OF RECEIPTS AND DISBURSEMENTS
2010 Judicial Election

Name of Candidate Noel Rogers

Address 209 Hwy 84 E, Collins MS 39428 County Covington

Telephone Work 601-649-4440 Home 601-765-8524 Fax 601-649-4441

Contact Name Noel Rogers Email Address rogers@gbcolaw.com

Office Sought Circuit Judge District 13

☐ Check here if above is different from previous 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, 2010 Periodic Report** (July 1, 2010, through September 30, 2010).....**Mandatory**

X **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	$ 0	+$ 0	$ 0	$ 0
Total amount of disbursements	$ 2,850.77	+$ 329.98	$ 3,180.75	$ 4,035.47
Total amount of cash on hand			$ 0	

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

Noel R. Rogers
Signature of Candidate

10/25/10
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.

SOS 01-10

Name of Candidate or Committee Noel Rogers

Reporting period October 1, 2010 through October 23, 2010

ITEMIZED DISBURSEMENTS

A. Full name: Mall Printers	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address: 545 Central Ave	9/29/10	$ 199.27
City, State, Zip Code: Laurel, MS 39440	10/19/10	$ 310.30
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 509.57
B. Full name: Signs On The Chepp.com	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address: 11525B Stonehollow Dr	10/18/10	$ 106.17
City, State, Zip Code: Austin, TX 78758	10/19/10	$ 309.03
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 415.20
C. Full name: The News Commercial	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address: P.O. Drawer 1299	9/13/10	$ 140.00
City, State, Zip Code: Collins, MS 39428	10/11/10 10/23/10	$ 75.00 75.00
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 290.00
D. Full name: The Post	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address: P.O. Box 100	9/13/10	$ 125.00
City, State, Zip Code: Taylorsville, MS 39168	10/11/10 10/23/10	$ 78.00 78.00
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 281.00
E. Full name: Smith County Reformer	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address: P.O. Box 187	9/13/10	$ 125.00
City, State, Zip Code: Raleigh MS 39153	10/11/10 10/23/10	$ 65.00 95.00
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 285.00
F. Full name: Jasper County News	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address: 3362 Hwy 15	9/13/10	$ 125.00
City, State, Zip Code: Bay Springs, MS 39422	10/11/10 10/23/10	$ 65.00 95.00
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 285.00

Name of Candidate or Committee Noel Rogers

Reporting period October 1, 2010 through October 23, 2010

ITEMIZED DISBURSEMENTS

A. Full name: Simpson County Impact	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address: 6335 US. Hwy 49 STE 20	9/13/10	$ 125 00
City, State, Zip Code: Hattiesburg MS 39401	10/11/10 10/23/10	$ 85 00 170 00
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 385 00
B. Full name: Magee Courier	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address: P.O. Box 338	10/11/10	$ 200 00
City, State, Zip Code: Magee, MS 39111	10/22/10	$ 200 00
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 400 00
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	$