RECEIVED
JAN 28 2010
Campaign Finance
Secretary of State

2008 ELECTION CYCLE
CPR – SS 08-02

POLITICAL COMMITTEE'S REPORT OF 2008 RECEIPTS AND DISBURSEMENTS
(Participating in Judicial Races)

Name of Committee: Committee to Elect Chief Justice Jim Smith
Address: P.O. Box 320366, Flowood, MS 39232 County: Rankin
Telephone: 601.936.1515 (Fax) 601.932-1014
Treasurer: Ray Perilloux Email Address: rperilloux@msLawFirm.biz

☐ Check here if above is different from previous report

TYPE OF REPORT
• CHECK THE CATEGORY OF REPORT YOU ARE SUBMITTING •

___	May 9, 2008	Periodic Report (January 1, 2008, through April 30, 2008)	Mandatory
___	June 10, 2008	Periodic Report (May 1, 2008, through May 31, 2008)	Mandatory
___	July 10, 2008	Periodic Report (June 1, 2008, through June 30, 2008)	Mandatory
___	October 10, 2008	Periodic Report (July 1, 2008 through September 30, 2008)	Mandatory
___	October 28, 2008	Pre-Election Report (October 1, 2008, through October 25, 2008)	Mandatory
___	November 18, 2008	Pre-Runoff Report (October 26, 2008, through November 15, 2008)	Runoff Candidates
___	January 9, 2009	Periodic Report (October 26, 2008, through December 31, 2008)	Mandatory
✓	Termination Report (Candidate will no longer accept contributions or make campaign expenditures and has no outstanding campaign debt or obligations.)		Required to terminate reporting obligations

IMPORTANT

(1) Periodic 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 appropriate office 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.

(4) Contributions in excess of $200 received after the reporting period but more than 48 hours before 12:01 a.m. on the day of the election must be reported by FAX or otherwise within 48 hours of the contribution. Use separate form "48 Hour Report" to report such activity.

REPORTED CONTRIBUTIONS AND DISBURSEMENTS

	(itemized + non-itemized)	Total This Period	Calendar year-to-date
Total amount of contributions	$5,650.00 + $1,607.20	$7,257.20	$7,257.20
Total amount of disbursements	$8,203.39 + $ —	$8,203.39	$8,203.39
Total amount of cash on hand		$ Ø	

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 Officer) Treasurer (Date) 8/25/09

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 Delbert Hosemann, 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.

SS807-02

Page 1 of 3

Name of Candidate or Committee Committee to Re-Elect Justice Jim Smith

Reporting period 6/01/09 through 5/25/09

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Fullname: Medical Assurance Company	1/28/09	$ 1,000.00
Mailing Address: 404 N Parkway Place	__/__/__	$
City, State, Zip Code: Ridgeland, MS 39157	__/__/__	$
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
Fullname: MS AGC PAC	2/4/09	$ 250.00
Mailing Address: P.O. Box 12615	__/__/__	$
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: Stuart M. Irby	2/11/09	$ 1,000.00
Mailing Address: 3940 Stuart Place	__/__/__	$
City, State, Zip Code: Jackson, MS 39211-6752	__/__/__	$
Name of Employer (Required): Stuart Irby Corp	__/__/__	$
Occupation (Required): Executive	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: Evan Johnson & Sons Construction, Inc	2/12/09	$ 250.00
Mailing Address: P.O. Box 111	__/__/__	$
City, State, Zip Code: Brandon, MS 39043	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 250.00

Page 2 of 3

Name of Candidate or Committee Committee to Re-Elect Justice Jim Smith

Reporting period 01/01/09 through 8/25/09

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full Name: Brian Penny	2/19/09	$ 250.00
Mailing Address: 1048 Saint Ann Street	__/__/__	$
City, State, Zip Code: Jackson, MS 39202	__/__/__	$
Name of Employer (Required): Capstone Public Affairs	__/__/__	$
Occupation (Required): Public Affairs	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: Lampton, Lee Crum	2/20/09	$ 250.00
Mailing Address: PO Box 2401	__/__/__	$
City, State, Zip Code: Jackson, MS 39225	__/__/__	$
Name of Employer (Required): Ergon, Inc	__/__/__	$
Occupation (Required): Executive	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: Robert H. Lampton	2/20/09	$ 250.00
Mailing Address: PO Box 2401	__/__/__	$
City, State, Zip Code: Jackson, MS 39225	__/__/__	$
Name of Employer (Required): Ergon, Inc.	__/__/__	$
Occupation (Required): Executive	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: Leslie B. Lampton, III	2/20/09	$ 250.00
Mailing Address: P.O. Box 2401	__/__/__	$
City, State, Zip Code: Jackson, MS 39225	__/__/__	$
Name of Employer (Required): Ergon, Inc.	__/__/__	$
Occupation (Required): Executive	Aggregate year-to-date	$ 250.00

Page 3 of 3

Name of Candidate or Committee Committee to Re-Elect Chief Justice Jim Smith

Reporting period 1/01/09 through 6/25/09

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: William W. Langston	2/20/09	$ 250.00
Mailing Address: P.O. Box 2401	__/__/__	$
City, State, Zip Code: Jackson, MS 39225	__/__/__	$
Name of Employer (Required): Cigna, Inc	__/__/__	$
Occupation (Required): Executive	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: Lewis W. Bell	2/27/09	$ 400.00
Mailing Address: 1576 N. Lakeline	__/__/__	$
City, State, Zip Code: Jackson, MS 39211	__/__/__	$
Name of Employer (Required): Self-Employed	__/__/__	$
Occupation (Required): Attorney	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: James D. Shannon	2/27/09	$ 1,500.00
Mailing Address: 100 W. Gallatin Street	__/__/__	$
City, State, Zip Code: Hazlehurst, MS 39083	__/__/__	$
Name of Employer (Required): Shannon Law Firm	__/__/__	$
Occupation (Required): Attorney	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	__/__/__	$
Mailing Address	__/__/__	$
City, State, Zip Code	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$

Page 1 of 1

Name of Candidate or Committee Committee to Elect Chief Justice Jim Smith

Reporting period 1/1/09 through 8/25/09

ITEMIZED DISBURSEMENTS

	Date (Mo., Day, Year)	Amount of each disbursement this period
A. Full name SARA WILLIAMS	1/28/09	$ 1,000.00
Mailing Address 1984 Petit Bois	2/27/09	$ 3,000.00
City, State, Zip Code JACKSON, TN 39211	Aggregate Year-to-date	$ 4,000.00
Purpose of Disbursement (Optional) FUNDRAISING Expense		
B. Full name SARA WILLIAMS	3/10/09	$ 3,300.00
Mailing Address 1984 Petit Bois	__/__/__	$
City, State, Zip Code JACKSON, TN 39211	Aggregate Year-to-date	$ 7,300.00
Purpose of Disbursement (Optional) FUNDRAISING Expense		
C. Full name DANNA LAMB	8/25/09	$ 451.70
Mailing Address 8580 BEAVERWOOD DR.	__/__/__	$
City, State, Zip Code COLLIERVILLE, TN 38138	Aggregate Year-to-date	$ 451.70
Purpose of Disbursement (Optional) COMPLIANCE Reporting Expense		
D. Full name Kimberly Tyler	8/25/09	$ 451.69
Mailing Address 102 Ravens Cove	__/__/__	$
City, State, Zip Code Terry, MS 39170	Aggregate Year-to-date	$ 451.69
Purpose of Disbursement (Optional) Bookkeeping Expense		
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	$