2008 ELECTION CYCLE
CPR – SS 08-02(b)

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Campaign Finance
Secretary of State

# POLITICAL COMMITTEE'S REPORT OF 2008 RECEIPTS AND DISBURSEMENTS

Name of Committee Committee to Elect Adrienne Wooten

Address 511 Pinecrest Circle County Hinds

Telephone (601) 506-6078 (Fax) (601) 859-2311

Treasurer Shanise Leflore Email Address shaniseleflore@yahoo.com

☐ Check here if above is different from previous report

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

___ October 28, 2008 **Pre-Election Report** (January 1, 2008, through October 25, 2008).....**Mandatory**

___ November 18, 2008 **Pre-Runoff Report** (October 26, 2008, through November 15, 2008).....**Runoff Candidates**

✓ January 31, 2009 **Annual Report** (January 1, 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 | $ 5500.00 | + $ 13,552.11 | $ 19,052.11 | $ 19,052.11 |
| Total amount of disbursements | $ 17,293.75 | + $ 550.00 | $ 17,843.75 | $ 17,843.75 |
| Total amount of cash on hand | | | $ 1208.36 | |

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

Adrienne J. Wooten
(Signature of Officer)

1/30/09
(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 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.

SS007-02

Name of Candidate or Committee Committee to Elect Adrienne Wooten

Reporting period January 1, 2008 through December 31, 2008

# ITEMIZED RECEIPTS

| A. 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 Committee | 10/30/08 | $ 500.00 |
| Mailing Address: 175 E. Capitol St. | __/__/__ | $ |
| City, State, Zip Code: Jackson, 39201 | __/__/__ | $ |
| 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: MS Independent RX PAC | 3/3/08 | $ 500.00 |
| Mailing Address: 4209 Lakeland Dr., Ste 399 | 1/24/08 | $ 500.00 |
| City, State, Zip Code: Jackson, MS 39232 | __/__/__ | $ |
| 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: George Schimmell | 1/24/08 | $ 500.00 |
| Mailing Address: 3630 Kings Hwy | 1/24/08 | $ 250.00 |
| City, State, Zip Code: Jackson, MS 39216 | __/__/__ | $ |
| Name of Employer (Required): Self-employed | __/__/__ | $ |
| 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: MS Assc. of Realtors | 1/24/08 | $ 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 |



FROM :BLACKMON & BLACKMON FAX NO. :6018592311 Jan. 30 2009 04:52PM P2/6

Name of Candidate or Committee Committee to Elect Adrienne Wooten

Reporting period January 1, 2008 through December 31, 2008

# ITEMIZED RECEIPTS

| A. Source: ☐ Corporation ☑ PAC ☐ Individual ☐ Loan ☐ Other (please specify) | Date (Mo., Day, Year) | Amount of each receipt this period |
|---|---|---|
| Full name: MS Road Builders Assc. PAC | 1/24/08 | $ 500.00 |
| Mailing Address: 601 George St. | / / | $ |
| City, State, Zip Code: Jackson MS 39202 | / / | $ |
| 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: Alberta Danita Joyner | 1/24/08 | $ 500.00 |
| Mailing Address: 119 Cherry Laurel Ln. | / / | $ |
| City, State, Zip Code: Ridgeland MS 39157 | / / | $ |
| Name of Employer (Required): Self-employed (McDonald's) | / / | $ |
| 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: Jolly Matthews | 1/24/08 | $ 250.00 |
| Mailing Address: 106 Madison Plaza | / / | $ |
| City, State, Zip Code: Hattiesburg MS 39402 | / / | $ |
| Name of Employer (Required): Self-employed | / / | $ |
| 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: Percy Watson | 1/24/08 | $ 500.00 |
| Mailing Address: P.O. Box 17167 | / / | $ |
| City, State, Zip Code: Hattiesburg MS 39403 | / / | $ |
| Name of Employer (Required): Self-employed | / / | $ |
| Occupation (Required): Attorney | Aggregate year-to-date | $ 500.00 |

SS06-03 (B)

Name of Candidate or Committee Committee to Elect Adrienne Wooten

Reporting period January 1, 2008 through December

# ITEMIZED RECEIPTS

| A. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify) | Date (Mo., Day, Year) | Amount of each receipt this period |
|---|---|---|
| Full name: Diane Peranich | 2/1/08 | $ 500.00 |
| Mailing Address: 25176 Le Chene Delisle | __/__/__ | $ |
| City, State, Zip Code: Pass Christian, MS 39571 | __/__/__ | $ |
| 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: Health Assurances LLC | 1/24/08 | $ 750.00 |
| Mailing Address: 5903 Ridgewood Rd, Ste 310 | __/__/__ | $ |
| City, State, Zip Code: Jackson, MS 39211 | __/__/__ | $ |
| Name of Employer (Required) | __/__/__ | $ |
| Occupation (Required) | Aggregate year-to-date | $ 750.00 |

| C. Source: ☐ Corporation ☑ PAC ☐ Individual ☐ Loan ☐ Other (please specify) | Date (Mo., Day, Year) | Amount of each receipt this period |
|---|---|---|
| Full name: Bellsouth Employees MS PAC | 2/1/08 | $ 500.00 |
| Mailing Address: 175 E. Capitol St. Rm #703 | __/__/__ | $ |
| 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: Charles McTeer | 12/17/07 | $ 5000.00 |
| Mailing Address: P.O. Box 1835 | __/__/__ | $ |
| City, State, Zip Code: Greenville MS 38702 | __/__/__ | $ |
| Name of Employer (Required): Self-employed | __/__/__ | $ |
| Occupation (Required): Attorney | Aggregate year-to-date | $ 5000.00 |

SS06-03 (B)

FROM :BLACKMON & BLACKMON FAX NO. :6018592311 Jan. 30 2009 04:53PM P4/6

Name of Candidate or Committee Committee to Elect Adrienne Wooten

Reporting period January 1, 2008 through December 31, 2008

# ITEMIZED RECEIPTS

| A. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify) | Date (Mo., Day, Year) | Amount of each receipt this period |
|---|---|---|
| Full name: Diane Peranich | 2/1/08 | $ 500.00 |
| Mailing Address: 25176 Le Sherne Delisle | __/__/__ | $ |
| City, State, Zip Code: Pass Christian MS 39571 | __/__/__ | $ |
| 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: Health Assurances LLC | 1/24/08 | $ 750.00 |
| Mailing Address: 5903 Ridgewood Rd, Ste 310 | __/__/__ | $ |
| City, State, Zip Code: Jackson MS 39211 | __/__/__ | $ |
| Name of Employer (Required) | __/__/__ | $ |
| Occupation (Required) | Aggregate year-to-date | $ 750.00 |

| 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 | $ |



FROM :BLACKMON & BLACKMON FAX NO. :6018592311 Jan. 30 2009 04:53PM P5/6

Name of Candidate or Committee Committee to Elect Adrienne Wooten

Reporting period January 1, 2008 through December 31, 2008

# ITEMIZED DISBURSEMENTS

| | Date (Mo., Day, Year) | Amount of each disbursement this period |
|---|---|---|
| A. Full name: Schimmel's<br>Mailing Address: 2615 N. State St.<br>City, State, Zip Code: Jackson, MS 39216<br>Purpose of Disbursement (Optional): | 1/17/08 | $ 1368.00 |
| | __/__/__ | $ |
| | Aggregate Year-to-date | $ 1368.00 |
| B. Full name: AT&T<br>Mailing Address: 4253 Robinson Rd.<br>City, State, Zip Code: Jackson, MS 39209<br>Purpose of Disbursement (Optional): | 1/2/08 | $ 224.00 |
| | 1/2/08 | $ 220.00 |
| | Aggregate Year-to-date | $ 995.20 |
| C. Full name: AT&T<br>Mailing Address: 4253 Robinson Rd.<br>City, State, Zip Code: Jackson, MS 39209<br>Purpose of Disbursement (Optional): | 1/28/08 | $ 551.20 |
| | __/__/__ | $ |
| | Aggregate Year-to-date | $ 995.20 |
| D. Full name: American Express<br>Mailing Address:<br>City, State, Zip Code:<br>Purpose of Disbursement (Optional): Campaign Materials | 1/17/08 | $ 201.11 |
| | 5/19/08 | $ 169.44 |
| | Aggregate Year-to-date | $ 370.55 |
| E. Full name: Barbara Martin Blackmon<br>Mailing Address: P.O. Box 105<br>City, State, Zip Code: Canton, MS 39046<br>Purpose of Disbursement (Optional): Loan Repayment | 3/3/08 | $ 98160.00 |
| | __/__/__ | $ |
| | Aggregate Year-to-date | $ |
| F. Full name: Adrienne Wooten<br>Mailing Address: 511 Pinecrest Circle<br>City, State, Zip Code: Jackson, MS 39204<br>Purpose of Disbursement (Optional): Loan Repayment | 4/23/08 | $ 4000.00 |
| | 5/26/08 | $ 700.00 |
| | Aggregate Year-to-date | $ |

SS04-06

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