



**REPORT OF INDEPENDENT EXPENDITURE for CANDIDATES
2023 Election**

Check one of the following:

- The independent expenditure disclosed **was made in support** of the candidate identified.
- The independent expenditure disclosed **was made in opposition** to the candidate identified.

Name of the Candidate of whom the expenditure was in support or in opposition.

Full Name of Individual or Entity Making Independent Expenditure(s).

Please check the appropriate box:

- Corporation
- Individual
- Political Committee
- Other (Specify _____)

Contact Person

Mailing Address *City* *State* *Zip Code*

Phone *Fax* *Email (optional)*

Please check one of the following dates:

- ____ **May 10, 2023 Periodic Report** (January 1, 2023 through April 30, 2023) **Mandatory**
- ____ **June 9, 2023 Periodic Report** (May 1, 2023 through May 31, 2023) **Mandatory**
- ____ **July 10, 2023 Periodic Report** (June 1, 2023 through June 30, 2023) **Mandatory**
- ____ **August 1, 2023 Primary Pre-Election Report** (July 1, 2023 through July 29, 2023) **Mandatory**
- ____ **August 22, 2023 Primary Pre-Runoff Report** (July 30, 2023 through August 19, 2023) **Runoff Candidates Only**
- ____ **October 10, 2023 Periodic Report** (July 1, 2023 through September 30, 2023) **Mandatory**
- ____ **October 31, 2023 Pre-Election Report** (October 1, 2023 through October 29, 2023) **Mandatory**
- ____ **November 21, 2023 Pre-Runoff Report** (October 30, 2023 through November 19, 2023) **Runoff Candidates Only**
- ____ **January 10, 2024 Periodic Report** (October 1, 2023 through December 31, 2023) **Mandatory**

REPORTED CONTRIBUTIONS AND DISBURSEMENTS

	Itemized	+	Non-itemized	=	This Period	Calendar Year-To-Date
Total amount of contributions	\$		+		\$	\$
Total amount of disbursements	\$		+		\$	\$

Attach itemized receipt and itemized disbursement pages, as necessary, to properly disclose the source of contribution(s) received in excess of \$200 in the aggregate and each recipient of expenditure(s) made in excess of \$200 in the aggregate.

Under penalty of perjury, I hereby certify that the disclosed independent expenditure was not made in cooperation, consultation or concert with, or at the request or suggestion of, any candidate or any authorized committee or agent of such candidate.

Authorized Signature
AUTHORITY: Miss. Code Ann. §§ 23-15-807 and §23-15-809

Date

SEND TO: 1. Independent expenditures made for or against candidates for statewide, state district, multi-county and legislative offices should be filed with the Secretary of State, Elections Divisions, P. O. Box 136, Jackson, MS 39205, FAX to 601-576-2545 or EMAIL to CampaignFinance@sos.ms.gov.
2. Independent expenditures made for countywide or county district offices should be filed with county Circuit Clerk.