PAGE 1 / 13

Image# 14978300589

## FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

, , , , , , , , , , , , , , , , , , ,	-or Other Than An Auth	iorizea Committee	С	Office Use Only
1. NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5	
ALL CITIZENS FOR M	IISSISSIPPI			
ADDRESS (number and street)	1750 ELLIS AVE			
Check if different than previously reported. (ACC)	JACKSON		MS	39204
2. FEC IDENTIFICATION NU	JMBER ▼ CITY	<b>₹</b> ▲	STATE ▲	ZIP CODE ▲
C C00564351	3. IS	THIS EPORT X NEW (N) OR	AMEN (A)	NDED
4. TYPE OF REPORT (Choose One)  (a) Quarterly Reports:	Report Due On:	20 (M2) May 20 (M5 20 (M3) Jun 20 (M6)		Year Only)
April 15		20 (M4) Jul 20 (M7)	Oct 20	(M10) Jan 31 (YE)
Quarterly Report (Quarterly 15	(c) 12-Day  PRE-Election	Primary (12P)	General (12	G) Runoff (12R)
Quarterly Report (Q	Report for the:	Convention (12C)	Special (129	5)
Quarterly Report (Q	Floation	M = M / D = D /	Y W Y W Y	in the
Year-End Report (Y  July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day	General (30G)	Runoff (30R	
Termination Report (TER)	Election	n on	Y Y Y Y Y	in the State of
5. Covering Period 07		through 09	30	2014
I certify that I have examined th	is Report and to the best of r	my knowledge and belief it is to	rue, correct and c	omplete.
Type or Print Name of Treasure	r Jacqueline Vann			
Signature of Treasurer Jacqu	ueline Vann	[Electronically Filed]	Date 10	15 2014
NOTE: Submission of false, errone	eous, or incomplete information	may subject the person signing	this Report to the	penalties of 2 U.S.C. §437g.
Office Use Only				FEC FORM 3X Rev. 12/2004

# SUMMARY PAGE

	OF RECEIPTS AND DISBURSEMENTS	
FEC Form 3X (Rev. 02/2003)	Page 2	2

Write or Type Committee Name

ALL CITIZENS FOR MISSISSIPPI 07 2014 09 30 2014 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 0.00 January 1, 2014 (b) Cash on Hand at 37217.10 Beginning of Reporting Period..... 164340.00 10000.00 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 47217.10 164340.00 6(a) and 6(c) for Column B)..... 38157.64 155280.54 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 9059.46 9059.46 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

#### For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

### ALL CITIZENS FOR MISSISSIPPI

	I. Receipts	I. Receipts COLUMN A Total This Period						
11.	Contributions (other than loans) From:  (a) Individuals/Persons Other  Than Political Committees							
	(i) Itemized (use Schedule A)	0.00	11540.00					
	(ii) Unitemized(iii) TOTAL (add	0.00	800.00					
	Lines 11(a)(i) and (ii)▶	0.00	12340.00					
	(b) Political Party Committees	0.00	0.00					
	(such as PACs)(d) Total Contributions (add Lines	10000.00	152000.00					
	11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	10000.00	164340.00					
12.	Transfers From Affiliated/Other Party Committees	0.00	0.00					
13.	All Loans Received	0.00	0.00					
14	Loan Repayments Received	0.00	0.00					
	Offsets To Operating Expenditures (Refunds, Rebates, etc.)	7	7 7					
16.	(Carry Totals to Line 37, page 5)	0.00	0.00					
17	to Federal Candidates and Other Political Committees Other Federal Receipts	0.00	0.00					
	(Dividends, Interest, etc.)  Transfers from Non-Federal and Levin Funds  (a) Non-Federal Account	0.00	0.00					
	(from Schedule H3)	0.00	0.00					
	(b) Levin Funds (from Schedule H5)	0.00	0.00					
	(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00					
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	10000.00	164340.00					
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)▶	10000.00	164340.00					

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date				
I. Operating Expenditures:  (a) Allocated Federal/Non-Federal  Activity (from Schedule H4)						
(i) Federal Share	0.00	0.00				
(ii) Non-Federal Share	0.00	0.00				
(b) Other Federal Operating						
Expenditures(c) Total Operating Expenditures	17579.83	127704.83				
(add 21(a)(i), (a)(ii), and (b))▶	17579.83	127704.83				
Transfers to Affiliated/Other Party	0.00	0.00				
Committees Contributions to Federal Candidates/Committees	0.00	0.00				
and Other Political Committees	0.00	0.00				
Independent Expenditures (use Schedule E)	20577.81	27575.7				
Coordinated Party Expenditures						
(2 U.S.C. §441a(d)) (use Schedule F)	0.00	0.00				
Loan Repayments Made	0.00	0.00				
Loans Made	0.00	0.00				
Refunds of Contributions To: (a) Individuals/Persons Other	0.00	0.00				
Than Political Committees	0.00	0.00				
(b) Political Party Committees	0.00	0.00				
(c) Other Political Committees (such as PACs)	0.00	0.00				
(d) Total Contribution Refunds						
(add Lines 28(a), (b), and (c))▶	0.00	0.00				
Other Disbursements	0.00	0.00				
Fordered Florities Activity (O.H.C.O. C404/00))						
Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity						
(from Schedule H6)		0.00				
(i) Federal Share	0.00	0.00				
(ii) "Levin" Share	0.00	0.00				
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00				
(c) Total Federal Election Activity (add						
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00				
Total Disbursements (add Lines 21(c), 22,						
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	38157.64	155280.54				
Total Federal Disbursements						
(subtract Line 21(a)(ii) and Line 30(a)(ii)	20157 61	155280.54				
from Line 31)	38157.64	155260.54				

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	10000.00	164340.00
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10000.00	164340.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	17579.83	127704.83
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	17579.83	127704.83

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the		FOR LINE NUMBER: PAGE 6 OF								13	
		(check only one)									
Detailed Summary Page			11a		11b	X	11c		12		
_ common common, range			13		14		15		16		17
not be sold or used by any pedress of any political committee											

	Statements may not be sold or used by any persone name and address of any political committee to	
NAME OF COMMITTEE (In Full) ALL CITIZENS FOR MISSISSI	IPPI	
Full Name (Last, First, Middle Initial)  Mississippi Conservatives  Mailing Address P O Box 2096		Date of Receipt
		08 12 2014
City	State Zip Code	Transaction ID: SA11C.4259
Jackson	MS 39225	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C C00554774	10000.00
Name of Employer	Occupation	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 152000.00	
Full Name (Last, First, Middle Initial)  3.		Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	
Name of Employer	Occupation	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		M = M / D = D / Y = Y = Y
City	State Zip Code	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	The state of the s
Name of Employer	Occupation	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	
SUBTOTAL of Receipts This Page (optional)		10000.00
TOTAL This Period (last page this line number	r only)	10000.00

SCHEDULE B (FEC Form 3X)		EOD LINE	NUMBER: PAGE 7 OF 1:							
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	VOIVIDEIT.							
II LIVIIZED DISBURSEMENTS	for each category of the	X 21b	22 23 24 25							
	Detailed Summary Page	27	28a 28b 28c 29							
Any information copied from such Reports and Staten	nents may not be sold or used	hy any nerso	on for the purpose of soliciting contributions							
or for commercial purposes, other than using the name										
NAME OF COMMITTEE (In Full)										
ALL CITIZENS FOR MISSISSIPPI										
/ ALE CITIZEING FOR MIGGIOGII FF										
Full Name (Last, First, Middle Initial)										
A. American Express			Date of Disbursement							
<u> </u>			M M / D D / Y N Y N Y							
Mailing Address P O Box 650448			07 02 2014							
011.	7'- 0-1-									
City S Dallas	State Zip Code TX 75265		Transaction ID : SB21B.4276							
Purpose of Disbursement	75205									
Campaign Material		006	Amount of Each Disbursement this Period							
Candidate Name										
		Category/ Type	1604.83							
Office Sought: House Disbursen	nent For:	.,,,,,	,							
Senate	Primary General									
President	Other (specify) ▼									
State: District:										
Full Name (Last, First, Middle Initial)										
B. Credell Calhoun			Date of Disbursement							
			08 15 2014							
Mailing Address 255 Myer Ave										
00	7: 0 1									
	City State Zip Code Jackson MS 39209									
Purpose of Disbursement	******									
Door to door get out the vote efforts		007	Amount of Each Disbursement this Period							
Candidate Name		Category/								
		Type	1000.00							
Office Sought: House Disbursen	nent For:									
	Primary General									
President	Other (specify) ▼									
State: District:										
Full Name (Last, First, Middle Initial)										
C. Roosevelt Daniels			Date of Disbursement							
			M M / D D / Y Y Y Y							
Mailing Address P O Box 2264			08 15 2014							
City	State Zip Code									
	MS 39225		Transaction ID : SB21B.4267							
Purpose of Disbursement	1,225									
Door to door get out the vote efforts		007	Amount of Each Disbursement this Period							
Candidate Name		Category/	450000							
		Type	1500.00							
Office Sought: House Disbursen										
	Primary General									
	Other (specify) ▼									
State: District:										
			4404.92							
SUBTOTAL of Disbursements This Page (optional)		······	4104.83							
TOTAL This Period (last page this line number only)	<u> </u>									

### S 17

S	CHEDULE B (FEC Form 3X)				NUMBER: PAGE 8 OF 13						
	•	Use separ	ate schedule(s)	FOR LINE I	-		FAGI	_ 0	01 13		
П	EMIZED DISBURSEMENTS	for each c	ategory of the	X 21b		23 [	24	25	<u> </u>		
		Detailed S	Summary Page	27		28b	28c	29	300		
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Ĺ	NAME OF COMMITTEE (In Full)										
$  \rangle$	ALL CITIZENS FOR MISSISSIPPI										
/	ALL CITIZLING FOR IVIIOSIOSIPPI										
<u></u>	Full Name (Last, First, Middle Initial)										
A.	Kehinde Gaynor				Date of Disb	ursem	ent				
					M = M /	D D	/ Y	YY	Y		
	Mailing Address 1221 Scots Glen				07 02 2014						
	City	State	Zip Code		Transactio	n ID ·	SR21R 43	264			
	Jackson	MS	39204		Transactio		00210.42	-0-7			
	Purpose of Disbursement Brochures			000	A	ask D	iala		Davide		
				006	Amount of E	acn D	ispurseme	ent this	Period		
	Candidate Name			Category/				150	00.00		
	Office Sought: House Disbursen	nont For:		Туре							
		Primary	General								
		Other (speci									
	State: District:	Outor (Speci	·· <i>3</i> / <b>▼</b>								
_	Full Name (Last, First, Middle Initial)										
В.					Date of Disb	ursem	ent				
	Refillide Gaylloi				08 15 2014						
	Mailing Address 1221 Scots Glen										
	5 1221 33010 31011										
	City		Transaction ID : SB21B.4265								
		MS	39204		Transaction ID: 5B21B.4265						
	Purpose of Disbursement										
	Brochures			006	Amount of Each Disbursement this Period						
	Candidate Name			Category/			2500.00				
	Office Country	=		Туре			- 7	200	33.00		
	Office Sought: House Disbursen										
		Primary	General								
	State: President State:	Other (speci	iy) <b>▼</b>								
_											
_	Full Name (Last, First, Middle Initial)				Date of Disb	urcom	ent				
U.	Vince Gordon										
	Mailing Address 752 McClust Dd				07	09	/ Y	2014	Y		
	Mailing Address 753 McCluer Rd				UI	US		2014			
	City	State	Zip Code								
	-	MS	39212		Transactio	n ID :	SB21B.42	270			
	Purpose of Disbursement										
	Use of private vehicle			002	Amount of E	ach D	isburseme	ent this	Period		
	Candidate Name			Category/		-			20.00		
				Type				50	00.00		
	Office Sought: House Disbursen	nent For:									
		Primary	General								
		Other (speci	ify) 🔻								
	State: District:										
								450	00.00		
8	SUBTOTAL of Disbursements This Page (optional)			·····•			-	450	00.00		
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1 7	OTAL This Period (last nage this line number only)			<b>.</b>							

S	CHEDULE B (FEC Form 3X)	(X)					IF NUMBER: PAGE 9 OF 13									
	•	Use sepa	arate schedule(s)		_	LINE NUMBER: PAGE 9 OF ek only one)							UF	13		
11	EMIZED DISBURSEMENTS	for each	category of the	(0		21b	,						25		7 26	
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Ļ.	NAME OF COMMITTEE (In Full)	4441		5011				00			. II	, J	5	J II		
$  \rangle$	ALL CITIZENS FOR MISSISSIPPI															
/	ALL CITIZEINS FOR IVIISSISSIPPI															
<u></u>	Full Name (Last, First, Middle Initial)															
A.	Staci Hunter						[	Date o	f Di	sburse	eme	ent				
								M = M	/	D	D	/	Y	/ I Y	Y	
	Mailing Address 624 Freemont St						07 18 2014									
	,	State MS	Zip Code					Trans	sact	ion ID	: 9	SB211	B.426	6		
	Jackson Purpose of Disbursement	IVIO	39204													
	Consultant			C	03		,	Amoun	t of	Each	Di	sburs	emen	t this	Peri	od
	Candidate Name					01/	í			2.0.1					5.1	
				Cate	egor ype	y/				,				50	0.00	
	Office Sought: House Disbursen	nent For:			-	$\overline{}$										
	Senate	Primary	General													
		Other (spec	cify) 🔻													
_	State: District:															
Р	Full Name (Last, First, Middle Initial)							<b>-</b>	۲ ۲۰	- امام		1				
В.	Staci Hunter						-	Date o	_			ent				
	Mailing Address 624 Freemont St					-		м = м	/		15	/		2014	Y	
	oz4 Freemont St							VO	-					.014		
	City	State	Zip Code					Trans	2204	ion IE		SP24	B 426			
	Jackson	MS	39204					Halls	aci	IOII IL		ו צטע	420.0	0		
	Purpose of Disbursement Consultant					$\neg \neg$					_	-1			Б.	
	Candidate Name				003		-	Amount of Each Disbursement this Period 500.00						od		
	Candidate Ivalle			Cate		ry/										
	Office Sought: House Disbursen	nent For:		17	ype	-									_	
		Primary	General													
		Other (spec														
	State: District:															
	Full Name (Last, First, Middle Initial)															
C.	New Horizon Church International						[	Date o	f Di	sburse	eme	ent				
								M I M	7		D	/		Y	Y	
	Mailing Address 1770 Ellis Ave							07		3	31		_ 2	014		
	Suite 200	State	Zip Code													
	-	MS	39204					Trans	sact	ion ID	) : 9	SB21	B.426	0		
	Purpose of Disbursement				-											
	Rent of office space			C	01		A	Amoun	t of	Each	Di	sburs	emen	t this	Peri	od
	Candidate Name			Cate		ry/								167	5.00	
	000			T	ype				_	7				107	5.00	
	Office Sought: House Disbursen		Comerci													
		Primary Other (spec	General													
	State: District:	Onlei (spec	∪iiy) <b>▼</b>													
	2.5															
ء ا	SUBTOTAL of Disbursements This Page (optional)							-	_					267	5.00	
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Т	OTAL This Period (last page this line number only)					•										

SCHEDULE B (FEC Form 3X)  FOR LINE NUMBER:						PAGE	10 (	OF 13	
IT	EMIZED DISBURSEMENTS		arate schedule(s) category of the	(check or	nly one)				
			Summary Page	X 21k		23	24	25	26
		<u> </u>		27	28a	28b	28c	29	30b
	ny information copied from such Reports and Statem for commercial purposes, other than using the nam								
<u> </u>	NAME OF COMMITTEE (In Full)		7						
$  \rangle$	ALL CITIZENS FOR MISSISSIPPI								
$\angle$									
_	Full Name (Last, First, Middle Initial)					( D: :			
A.	Lauren Taylor					of Disburs			
	Mailing Address P O Box 12133				07			2014	Y
	maining stations 1 0 Box 12100				Ui			-014	
	•	State	Zip Code		Tran	eaction IF	) : SB21B.427	72	
	ouchoon.	MS	39236		ITAII	Saction it	) . 3DZ I D.4Z	2	
	Purpose of Disbursement Consultant			003	Amour	at of Each	Disbursemer	at thic I	Pariod
	Candidate Name				Amour	it of Lacif	Dispuisemen	11 11115 1	enou
				Category/ Type		45		300	.00
	Office Sought: House Disbursem	nent For:		71: -					
		Primary	General						
		Other (spec	cify) 🔻						
_	State: District:								
R	Full Name (Last, First, Middle Initial)				Date	of Disburs	amant		
٥.	Jacqueline Vann				M			Y Y	V
	Mailing Address 1750 Ellis Ave				08			2014	'
	•	State	Zip Code		Tran	saction II	) : SB21B.420	61	
	Jackson Purpose of Disbursement	MS	39204						
	Accounting			001	Amour	nt of Each	Disbursemer	nt this I	Period
	Candidate Name			Category/					
				Type		7		2000	0.00
	Office Sought: House Disbursem								
		Primary	General						
	State: District:	Other (spec	city) $\blacktriangledown$						
_	Full Name (Last, First, Middle Initial)								
C.	James Warren				Date of	of Disburs	ement		
					M N	/ / D	D / Y	YY	Υ
	Mailing Address 695 Luckney Rd				08		15 2	2014	
	City	State	Zip Code						
		MS	39042		Tran	saction II	) : SB21B.420	62	
	Purpose of Disbursement								
	Door to door get out the vote efforts			007	Amour	nt of Each	Disbursemer	nt this I	Period
	Candidate Name			Category/				2000	.00
	Office Sought: House Disbursem	ent For:		Туре		7			
		Primary	General						
		Other (spe							
_	State: District:								
	·								-
5	SUBTOTAL of Disbursements This Page (optional)			·····•		7		4300	.00
L									
1	<b>TOTAL</b> This Period (last page this line number only).			·····					

SCHEDULE B (FEC Form 3X)		FOD	IIIMBER: PAGE 11 OF 13							
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	FOR LINE I	-	TAGE IT OF 13						
II EINIIZED DISDURSEINIEN IS	for each category of the	X 21b		24 25 26						
	Detailed Summary Page	27	28a 28b 2	28c 29 30b						
Any information copied from such Reports and Statem	nents may not be sold or used	by any perso	n for the purpose of soli	citing contributions						
or for commercial purposes, other than using the name										
NAME OF COMMITTEE (In Full)										
ALL CITIZENS FOR MISSISSIPPI										
V										
Full Name (Last, First, Middle Initial)			Data of District							
A. Bill Washington	Date of Disbursement									
Mailing Address P O Box 931			08 15	2014						
	00 10	2014								
City	State Zip Code		Transcratics ID CD2	14D 4000						
	MS 39071		Transaction ID : SB2	TB.4203						
Purpose of Disbursement  Door to door get out the vote efforts	Г	007	Amount of Feet Dist	manuscrat this Deviced						
Candidate Name		007	Amount of Each Disbu	rsement this Period						
Callulate Ivallie		Category/ Type		2000.00						
Office Sought: House Disbursen	nent For:	туре		7						
	Primary General									
President	Other (specify) ▼									
State: District:										
Full Name (Last, First, Middle Initial)										
В.			Date of Disbursement							
Mailing Address			M = M / D = D /	Y Y Y Y						
Ivialility Address										
City										
Purpose of Disbursement	Г	Amount of Each Disbursement this								
Candidate Name			Amount of Each Disbursement this Period							
		Category/ Type								
Office Sought: House Disbursem	nent For:	.,,,,	Турс							
	Primary General									
	Other (specify) ▼									
State: District:										
Full Name (Last, First, Middle Initial)			Data of Distriction							
C.			Date of Disbursement							
Mailing Address			M M / D D /	Y						
City	State Zip Code									
Dispersed of Disharman										
Purpose of Disbursement										
Candidate Name			Amount of Each Disbu	rsement this Period						
		Category/ Type								
Office Sought: House Disbursen	.,,,,									
	Primary General									
President	Other (specify) ▼									
State: District:										
				2000.00						
SUBTOTAL of Disbursements This Page (optional)		······		2000.00						
TOTAL This Period (last nage this line number only)				17579.83						

### SCHEDULE D (FEC Form 3X) **DEBTS AND OBLIGATIONS**

**Excluding Loans** 

(Use separate schedule(s) for each

PAGE FOR LINE NUMBER: (check only one)

9

13

12 OF

ΛU	Juding Loans		numbered line)	<b> X</b>   10	
	ME OF COMMITTEE (In Full) LL CITIZENS FOR MISSISSIPPI				
	A. Full Name (Last, First, Middle Initial) of Debto	Nature of Debt (Pu	Nature of Debt (Purpose): Radio Ad		
	American Media & Advocacy G				
	Mailing Address 815 Slaters Lane	aters Lane			
	City State	Zip Code VA 22314			
ŀ	Alexandria	VA 22314	Transaction ID :	SD10 4194	
	Outstanding Balance Beginning This Period 20577.81	Transaction is	0510.4104		
		Downent This Pariod	Outstanding Pale	and at Class of This Baried	
	Amount Incurred This Period  0.00	Payment This Period		ance at Close of This Period 0.00	
	B. Full Name (Last, First, Middle Initial) of Debtor	Nature of Debt (Pt	Nature of Debt (Purpose):		
	Mailing Address				
	City State	Zip Code			
	Outstanding Balance Beginning This Period	Outstanding Pol	and at Class of This David		
	Amount Incurred This Period	Payment This Period	Outstanding Bala	ance at Close of This Period	
ľ	C. Full Name (Last, First, Middle Initial) of Debto	Nature of Debt (Po	urpose):		
ŀ	Mailing Address				
ŀ	City	State Zip Code			
	Outstanding Balance Beginning This Period				
	Amount Incurred This Period	Payment This Period	Outstanding Bala	ance at Close of This Period	
				7	
1)	SUBTOTALS This Period This Page (optional)		>	0.00	
2)	TOTALS This Period (last page this line number	only)		0.00	
3)	TOTAL OUTSTANDING LOANS from Schedule	C (last page only)	>	, , , , ,	
4)	ADD 2) and 3) and carry forward to appropriate	line of Summary Page (last page of	only) 🕨		

Signature

# SCHEDULE E (FEC Form 3X)

TEMIZED INDEDENDENT EVDENDITUDES	•				10	. 10			
TEMIZED INDEPENDENT EXPENDITURES	,				PAGE 13	OF 13 24 OF FORM 3X			
NAME OF COMMITTEE (In Full)	FFC II	FEC IDENTIFICATION NUMBER ▼							
ALL CITIZENS FOR MISSISSIPPI	Lat	C00564351	011 11022						
Check if 24-hour report 48-hour report	New rep	port Amends repo		M = M	/ D D /	Y Y Y Y Y			
Full Name of Payee American Media & Advocacy Group				of Publi		/Dissemination			
Mailing Address					21	2014			
815 Slaters Lane			Amou	unt					
City	State	Zip Code				20577.81			
Alexandria	VA	22314			D: SE.4195 ursement or	Obligation			
Purpose of Expenditure Radio Ad		Category/ Type 004	$\Box \mid \Box$	M 07	02	2014			
Name of Federal Candidate		Support	Office Sough	ht:	House	District:			
THAD COCHRAN		Oppose	Presid	-	X Senate	State: MS			
Calendar Year-To-Date			Disburseme	Ľ	Primary				
Per Election for Office Sought	7 7	47353.52	2014	Other (sp	pecify) 🕨	Runoff			
Full Name of Payee			Date	of Publ	ic Distribution	n/Dissemination			
			[	M = M	/ D D /	YYYY			
Mailing Address			Amo	unt					
City	State	Zip Code	ΗГ.						
			Date	of Disb	ursement or	Obligation			
Purpose of Expenditure		Category/ Type		M = M	/ D D /	Y Y Y Y Y			
Name of Federal Candidate		Support	Office Soug	ht:	House	District:			
		Oppose	Presid	dent	Senate	State:			
Calendar Year-To-Date			Disburseme	nt For:	Primar	y General			
Per Election for Office Sought	7 7			Other (s	pecify) 🕨				
(a) SUBTOTAL of Itemized Independent Expenditur	rac			•		20577.81			
(a) SOBTOTAL OF HOMEZON HOSPOTHANIE EXPONENTIAL	C3			-	7	20377.01			
(b) SUBTOTAL of Unitemized Independent Expenditures									
(c) TOTAL Independent Expenditures			· •	7		20577.81			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.									
Jacqueline Vann	[Electro	nically Filed] Date	M M /	15	/ Y Y 20	14			
Cignoture		Date	,						