

2013 ELECTION CYCLE

**Municipal Candidate
REPORT OF RECEIPTS AND DISBURSEMENTS**
2013 Election

Delbert Rosemann
SECRETARY OF STATE

Name Frank Bluntson
Address 4226 Overbrook Dr County Hinds
Telephone 601-366-7078 Fax 601-366-5899
Office Sought Mayor of Jackson Email Address _____

☐ Check here if above is different from previous report

- ☒ April 30, 2013 Primary Pre-Election Report (January 1, 2013, through April 27, 2013) Mandatory
May 14, 2013 Primary Pre-Runoff Report (April 28, 2013, through May 11, 2013) Primary Candidates Only
May 28, 2013 General Pre-Election Report Mandatory
(Primary Election Winners report April 28, 2013, through May 25, 2013) All Candidates
(Independent Candidates report January 1, 2013, through May 25, 2013) must report
January 31, 2014 Annual Report (January 1, 2013 through December 31, 2013) Mandatory
All Candidates must report unless terminated
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

- 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.
- 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) (i) and (iii).
- 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	\$24,851 + \$2550.00	\$ 27401.00	\$ 27401.00
Total amount of disbursements	\$24,140.00	\$ 24,140.00	\$ 24,140.00
Total amount of cash on hand		\$ 3,261.00	

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

Frank Bluntson
Signature of Candidate

4-29-13
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. §§ 23-15-611 and 613 (1972).

SEND TO:

- 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 39208 or fax to 601-576-2645.
- Candidates for countywide and county district offices should return forms to their county Circuit Clerk.
- Candidates for Municipal office should return forms to their Municipal Clerk.

Name of Candidate or Committee Frank BlantonReporting period Jan 1, 2013 through April 24, 2013

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)		Date (Mo., Day, Year)	Amount of each receipt this period
Full name	<u>DADA SHREE</u>	<u>4/14/13</u>	\$ <u>300.00</u>
Mailing Address	<u>6058 ISS N</u>	<u>1/1/</u>	\$
City, State, Zip Code	<u>JACKSON, MS 39211</u>	<u>1/1/</u>	\$
Name of Employer (Required)		<u>1/1/</u>	\$
Occupation (Required)		Aggregate year-to-date	\$ <u>300.00</u>
B. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify)		Date (Mo., Day, Year)	Amount of each receipt this period
Full name	<u>Ms Earnestine Ross</u>	<u>4/11/13</u>	\$ <u>500.00</u>
Mailing Address	<u>2433 Overbrook Dr</u>	<u>1/1/</u>	\$
City, State, Zip Code	<u>Jackson, MS 39213</u>	<u>1/1/</u>	\$
Name of Employer (Required)		<u>1/1/</u>	\$
Occupation (Required)		Aggregate year-to-date	\$ <u>500.00</u>
C. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify)		Date (Mo., Day, Year)	Amount of each receipt this period
Full name	<u>Hesselheim Tire Co.</u>	<u>1/1/</u>	\$
Mailing Address	<u>4199 Industrial Dr</u>	<u>4/11/13</u>	\$ <u>1000.00</u>
City, State, Zip Code	<u>Jackson, MS 39213</u>	<u>1/1/</u>	\$
Name of Employer (Required)	<u>Mr Dennis King</u>	<u>1/1/</u>	\$
Occupation (Required)		Aggregate year-to-date	\$ <u>1000.00</u>
D. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify)		Date (Mo., Day, Year)	Amount of each receipt this period
Full name	<u>Rev. Charles Miller</u>	<u>4/14/13</u>	\$ <u>1600.00</u>
Mailing Address	<u>2511 Montebello Dr</u>	<u>1/1/</u>	\$
City, State, Zip Code	<u>Jackson, MS 39213</u>	<u>1/1/</u>	\$
Name of Employer (Required)		<u>1/1/</u>	\$
Occupation (Required)		Aggregate year-to-date	\$ <u>1600.00</u>

Name of Candidate or Committee Frank BluntsonReporting period 1-1-13 through 4-27-13

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Matt Thomas</u>	<u>1/15/13</u>	\$ <u>500.00</u>
Mailing Address <u>P.O. Box 1235</u>	<u>1/1/13</u>	\$
City, State, Zip Code <u>Jackson, Ms 39215</u>	<u>1/1/13</u>	\$
Name of Employer (Required) _____	<u>1/1/13</u>	\$
Occupation (Required) <u>Insurance Agent</u>	Aggregate year-to-date	\$ <u>500.00</u>
B. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Marzell Smith</u>	<u>1/12/13</u>	\$ <u>400.00</u>
Mailing Address <u>6355 N.W. 200 Street</u>	<u>1/1/13</u>	\$
City, State, Zip Code <u>Miami Fla 33015</u>	<u>1/1/13</u>	\$
Name of Employer (Required) _____	<u>1/1/13</u>	\$
Occupation (Required) _____	Aggregate year-to-date	\$ <u>400.00</u>
C. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Howard Catching</u>	<u>2/3/13</u>	\$ <u>250.00</u>
Mailing Address <u>6027 Woodlea Dr</u>	<u>1/1/13</u>	\$
City, State, Zip Code <u>Jackson, Ms 39206</u>	<u>1/1/13</u>	\$
Name of Employer (Required) _____	<u>1/1/13</u>	\$
Occupation (Required) _____	Aggregate year-to-date	\$ <u>250.00</u>
D. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Dr. Ivin Patel</u>	<u>2/6/13</u>	\$ <u>250.00</u>
Mailing Address <u>Metro Inn - Ellis Ave.</u>	<u>1/1/13</u>	\$
City, State, Zip Code <u>Jackson, Ms 39209</u>	<u>1/1/13</u>	\$
Name of Employer (Required) _____	<u>1/1/13</u>	\$
Occupation (Required) _____	Aggregate year-to-date	\$ <u>250.00</u>

Name of Candidate or Committee Frank Bluntson
 Reporting period 1-1-13 through 4-27-13

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>ERIC BLUNTSON</u>	<u>2-7-13</u>	\$ <u>2500.00</u>
Mailing Address <u>1134 WINTER ST.</u>	<u>1-1-</u>	\$
City, State, Zip Code <u>Jackson, MS 39204</u>	<u>1-1-</u>	\$
Name of Employer (Required) <u>Miss. Family Health Center</u>	<u>1-1-</u>	\$
Occupation (Required) <u>Finance officer</u>	Aggregate year-to-date	\$ <u>2500.00</u>

B. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Frank Bluntson</u>	<u>2-10-13</u>	\$ <u>5000.00</u>
Mailing Address <u>4226 Overbrook Dr.</u>	<u>1-1-</u>	\$
City, State, Zip Code <u>Jackson, MS</u>	<u>1-1-</u>	\$
Name of Employer (Required) <u>Lean to Campagin</u>	<u>1-1-</u>	\$ <u>5000.00</u>
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 <u>Joe Jenkins</u>	<u>2-10-13</u>	\$ <u>1000.00</u>
Mailing Address <u>Mayes St</u>	<u>1-1-</u>	\$
City, State, Zip Code <u>Jackson, MS</u>	<u>1-1-</u>	\$
Name of Employer (Required) <u>Grocery Store</u>	<u>1-1-</u>	\$
Occupation (Required)	Aggregate year-to-date	\$ <u>1000.00</u>

D. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Kelvin M^{rs} Donald</u>	<u>2-4-13</u>	\$ <u>300.00</u>
Mailing Address <u>1425 University Blvd</u>	<u>1-1-</u>	\$
City, State, Zip Code <u>Jackson, MS 39204</u>	<u>1-1-</u>	\$
Name of Employer (Required) <u>Same</u>	<u>1-1-</u>	\$
Occupation (Required) <u>Store</u>	Aggregate year-to-date	\$ <u>300.00</u>

Name of Candidate or Committee Frank BluntsonReporting period 1-1-13 through 4-27-13

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)		Date (Mo., Day, Year)	Amount of each receipt this period
Full name	<u>Heena & BHM LLC</u>	<u>4.11.13</u>	<u>\$ 300.00</u>
Mailing Address	<u>1040 Van Beaul Lane</u>	<u>— — —</u>	\$
City, State, Zip Code	<u>Summit, MS 39666</u>	<u>— — —</u>	\$
Name of Employer (Required)	<u>DBA Six Diamond Gas</u>	<u>— — —</u>	\$
Occupation (Required)	<u>and Deli</u>	Aggregate year-to-date	<u>\$ 300.00</u>
B. Source: ☒ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify)		Date (Mo., Day, Year)	Amount of each receipt this period
Full name	<u>Leland R Speed</u>	<u>4.11.13</u>	<u>\$ 2000.00</u>
Mailing Address	<u>P.O. Box 22728</u>	<u>— — —</u>	\$
City, State, Zip Code	<u>Jackson, MS 39225</u>	<u>— — —</u>	\$
Name of Employer (Required)		<u>— — —</u>	\$
Occupation (Required)		Aggregate year-to-date	<u>\$ 2000.00</u>
C. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify)		Date (Mo., Day, Year)	Amount of each receipt this period
Full name	<u>Studio 6 Sahil, LLC</u>	<u>4.11.13</u>	<u>\$ 250.00</u>
Mailing Address	<u>5925 I 55 North</u>	<u>— — —</u>	\$
City, State, Zip Code	<u>Jackson, MS 39213</u>	<u>— — —</u>	\$
Name of Employer (Required)		<u>— — —</u>	\$
Occupation (Required)		Aggregate year-to-date	<u>\$ 250.00</u>
D. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify)		Date (Mo., Day, Year)	Amount of each receipt this period
Full name	<u>JAI Hanuman LLC</u>	<u>4.11.13</u>	<u>\$ 250.00</u>
Mailing Address	<u>6058 I 55 N</u>	<u>— — —</u>	\$
City, State, Zip Code	<u>Jackson, MS 39211</u>	<u>— — —</u>	\$
Name of Employer (Required)		<u>— — —</u>	\$
Occupation (Required)		Aggregate year-to-date	<u>\$ 250.00</u>

Name of Candidate or Committee Frank BluntsonReporting period 1-1-13 through 4-27-13

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name	<u>Joe Haynes</u>	<u>4/15/13</u>	\$ <u>200.00</u>
Mailing Address	<u>634 Sheringham Ct</u>	<u>1-1-</u>	\$
City, State, Zip Code	<u>Ridgeland, MS 39157</u>	<u>1-1-</u>	\$
Name of Employer (Required)		<u>1-1-</u>	\$
Occupation (Required)		Aggregate year-to-date	\$ <u>200.00</u>
B. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name	<u>Atty Sarah O'Reilly - Evans</u>	<u>4/14/13</u>	\$ <u>250.00</u>
Mailing Address	<u>510 West Ash</u>	<u>1-1-</u>	\$
City, State, Zip Code	<u>P.O. Box 1167 - Jackson, MS 39215</u>	<u>1-1-</u>	\$
Name of Employer (Required)		<u>1-1-</u>	\$
Occupation (Required)	<u>Attorney</u>	Aggregate year-to-date	\$ <u>250.00</u>
C. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name	<u>Tommy Buffkin</u>	<u>4/15/13</u>	\$ <u>200.00</u>
Mailing Address	<u>2511 Robinson Rd.</u>	<u>1-1-</u>	\$
City, State, Zip Code	<u>Jackson, MS 39289</u>	<u>1-1-</u>	\$
Name of Employer (Required)		<u>1-1-</u>	\$
Occupation (Required)		Aggregate year-to-date	\$ <u>200.00</u>
D. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name	<u>Danny Cupit</u>	<u>4/15/13</u>	\$ <u>500.00</u>
Mailing Address	<u>P.O. Box 22929</u>	<u>1-1-</u>	\$
City, State, Zip Code	<u>Jackson, MS 39225</u>	<u>1-1-</u>	\$
Name of Employer (Required)		<u>1-1-</u>	\$
Occupation (Required)		Aggregate year-to-date	\$ <u>500.00</u>

Name of Candidate or Committee Frank Bluntson
 Reporting period 1-1-13 through 4-22-13

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Hitesh M. Patel</u>	<u>4-11-13</u>	\$ <u>250.00</u>
Mailing Address <u>6351 I 55 N. Suite 119</u>	<u>1-1-13</u>	\$
City, State, Zip Code <u>Jackson, MS 39213</u>	<u>1-1-13</u>	\$
Name of Employer (Required) <u>Motel 6</u>	<u>1-1-13</u>	\$
Occupation (Required)	Aggregate year-to-date	\$ <u>250.00</u>
B. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Capitol Parts Company</u>	<u>4-23-13</u>	\$ <u>1000.00</u>
Mailing Address <u>P.O. Box 329</u>	<u>1-1-13</u>	\$
City, State, Zip Code <u>Jackson, MS 39205</u>	<u>1-1-13</u>	\$
Name of Employer (Required) <u>Dealership</u>	<u>1-1-13</u>	\$
Occupation (Required)	Aggregate year-to-date	\$ <u>1000.00</u>
C. Source: ☒ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Econo Lodge</u>	<u>4-25-13</u>	\$ <u>301.00</u>
Mailing Address <u>839 Ridgewood Rd</u>	<u>1-1-13</u>	\$
City, State, Zip Code <u>Ridgeland, MS 39157</u>	<u>1-1-13</u>	\$
Name of Employer (Required) <u>Hotel</u>	<u>1-1-13</u>	\$
Occupation (Required)	Aggregate year-to-date	\$ <u>301.00</u>
D. Source: ☒ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Atty Dennis Sweet</u>	<u>4-24-13</u>	\$ <u>500.00</u>
Mailing Address <u>158 E. Pascagoula St</u>	<u>1-1-13</u>	\$
City, State, Zip Code <u>Jackson, MS</u>	<u>1-1-13</u>	\$
Name of Employer (Required)	<u>1-1-13</u>	\$
Occupation (Required) <u>Attorney</u>	Aggregate year-to-date	\$ <u>500.00</u>

Name of Candidate or Committee Frank Bluntson
 Reporting period 1-1-13 through 1-27-13

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>George Smith</u>	<u>4-1-13</u>	\$ <u>200.00</u>
Mailing Address <u>1866 Ridgeway St</u>	<u>1-1-</u>	\$
City, State, Zip Code <u>Jackson, MS 39213</u>	<u>1-1-</u>	\$
Name of Employer (Required) _____	<u>1-1-</u>	\$
Occupation (Required) _____	Aggregate year-to-date	\$ <u>200.00</u>
B. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Puja Neha</u>	<u>1-1-</u>	\$ <u>250.00</u>
Mailing Address <u>2800 Greenway Drive</u>	<u>1-1-</u>	\$
City, State, Zip Code <u>Quality Inn & Suites</u>	<u>1-1-</u>	\$
Name of Employer (Required) <u>Jackson, MS 39209</u>	<u>1-1-</u>	\$
Occupation (Required) <u>Hotel Business</u>	Aggregate year-to-date	\$ <u>250.00</u>
C. Source: ☒ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Sukhdev S Thind</u>	<u>4-1-13</u>	\$ <u>2700.00</u>
Mailing Address <u>102 Colony Way</u>	<u>1-1-</u>	\$
City, State, Zip Code <u>Brandon, MS 39047</u>	<u>1-1-</u>	\$
Name of Employer (Required) _____	<u>1-1-</u>	\$
Occupation (Required) <u>Stores Enterprise</u>	Aggregate year-to-date	\$ <u>2700.00</u>
D. Source: ☒ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Shreesai LLC</u>	<u>4-1-13</u>	\$ <u>500.00</u>
Mailing Address <u>4508 Methodist Home R</u>	<u>1-1-</u>	\$
City, State, Zip Code <u>Jackson, MS</u>	<u>1-1-</u>	\$
Name of Employer (Required) _____	<u>1-1-</u>	\$
Occupation (Required) <u>Hotel Owner</u>	Aggregate year-to-date	\$ <u>500.00</u>

Name of Candidate or Committee

Frank Bluntson

Reporting period

1-1-13

through

4-27-13

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Atty Barbara Blackman</u>		<u>3/30/13</u>	\$ <u>500.00</u>
Mailing Address <u>907. place St.</u>		<u>1/1/</u>	\$
City, State, Zip Code <u>Canton Miss</u>		<u>1/1/</u>	\$
Name of Employer (Required)		<u>1/1/</u>	\$
Occupation (Required)		Aggregate year-to-date	\$ <u>500.00</u>
B. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Bob Heggindattom</u>		<u>4/10/13</u>	\$ <u>1000.00</u>
Mailing Address <u>3856 Noble St</u>		<u>1/1/</u>	\$
City, State, Zip Code <u>Jackson, MS 39209</u>		<u>1/1/</u>	\$
Name of Employer (Required)		<u>1/1/</u>	\$
Occupation (Required)		Aggregate year-to-date	\$ <u>1000.00</u>
C. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name		<u>1/1/</u>	\$
Mailing Address		<u>1/1/</u>	\$
City, State, Zip Code		<u>1/1/</u>	\$
Name of Employer (Required)		<u>1/1/</u>	\$
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		<u>1/1/</u>	\$
Mailing Address		<u>1/1/</u>	\$
City, State, Zip Code		<u>1/1/</u>	\$
Name of Employer (Required)		<u>1/1/</u>	\$
Occupation (Required)		Aggregate year-to-date	\$

Name of Candidate or Committee Frank Bluntson
 Reporting period 1-1-13 through 4-27-13

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ITEMIZED DISBURSEMENTS

A. Full name <u>Ron The Sign man</u>		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>10016 Navarre Pkwy</u>		<u>1-6-13</u>	\$ <u>3600.00</u>
City, State, Zip Code <u>Navarre, FL 32566</u>		<u>4-1-13</u>	\$ <u>1500.00</u>
Purpose of Disbursement (Optional) <u>Signs</u>		Aggregate Year-to-date	\$ <u>5100</u>
B. Full name <u>Robert Henderson</u>		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>1451 Meadmont</u>		<u>1-15-13</u>	\$ <u>1875</u>
City, State, Zip Code <u>Jackson, MS 39203</u>		<u>2-10-13</u>	\$ <u>16.50</u>
Purpose of Disbursement (Optional) <u>Field Work</u>		Aggregate Year-to-date	\$ <u>35.25</u>
C. Full name <u>Robert Henderson</u>		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>4451 Meadmont</u>		<u>3-15-13</u>	\$ <u>1800.00</u>
City, State, Zip Code <u>Jackson, MS 39203</u>		<u>4-15-13</u>	\$ <u>1950.00</u>
Purpose of Disbursement (Optional) <u>Field Work</u>		Aggregate Year-to-date	\$ <u>3750.00</u>
D. Full name <u>Sharon Greenfield</u>		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>3540 Lunnington St</u>		<u>3-29-13</u>	\$ <u>700.00</u>
City, State, Zip Code <u>Jackson, MS 39213</u>		<u>4-26-13</u>	\$ <u>700.00</u>
Purpose of Disbursement (Optional) <u>Office Work</u>		Aggregate Year-to-date	\$ <u>1400.00</u>
E. Full name <u>Timothy Liddell</u>		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>364 North pond</u>		<u>3-29-13</u>	\$ <u>1850.00</u>
City, State, Zip Code <u>Jackson, MS 39211</u>		<u>4-26-13</u>	\$ <u>1600.00</u>
Purpose of Disbursement (Optional) <u>Field Work</u>		Aggregate Year-to-date	\$ <u>3450</u>
F. Full name <u>Office Supplies & Apparatus</u>		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>Radio Ads. & Text</u>		<u>4-15-13</u>	\$ <u>6415.00</u>
City, State, Zip Code <u>Misc. Freight</u>		<u>4-15-13</u>	\$ <u>500.00</u>
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$ <u>6915.00</u>

Name of Candidate or Committee Frank Blanton
 Reporting period 1-1-13 through 4-27-13

ITEMIZED DISBURSEMENTS

A. Full name		Date (Mo., Day, Year)	Amount of each disbursement this period
Sign First		1-27-13	\$ 832.00
Mailing Address			
4445 Robinson Rd			
City, State, Zip Code			
Jackson, Ms 39209			
Purpose of Disbursement (Optional)			
Aggregate Year-to-date			\$
B. Full name		Date (Mo., Day, Year)	Amount of each disbursement this period
Charles Brown		4-10-13	\$ 700.00
Mailing Address			
4121 Sagamore Ave			
City, State, Zip Code			
Jackson, Ms			
Purpose of Disbursement (Optional)			
Putting out materials			
Aggregate Year-to-date			\$ 700
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			\$