2014

City of Jackson, MS
Mayoral Campaign Contributions

Chokwe A. Lumumba

2014 ELECTION CYCLE

Delbert Hosemann
SECRETARY OF STATE

14 APR -1 PM 4:34
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JACKSON, MS.

Political Committee
REPORT OF RECEIPTS AND DISBURSEMENTS
City of Jackson - Special Election for Mayor

Name of Committee: Committee to Elect Chokwe A. Lumumba

Address: 3234 Medgar Evers Blvd. County: Hinds

Telephone: 601-362-0073 Fax: 601-362-0021

Treasurer: Barry Wayne Howard Email Address: bwhoward@bellsouth.net

☐ Check here if above is different from previous report

✓ April 1, 2014 Pre-Election Report (January 1, 2014 through March 29, 2014).....Mandatory

____ April 15, 2014 Pre-Runoff Report (March 30, 2014 through April 12, 2014).....Runoff Candidates Only

____ January 30, 2015 Annual Report (January 1, 2014 through December 31, 2014).....Mandatory

____ 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

(1) 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.

(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 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	$110,849.55	+$ 12,295.25	$ 123,145.80	$ 123,145.80
Total amount of disbursements	$84,159.35	+$ 593.00	$ 84,752.35	$ 84,752.35
Total amount of cash on hand			$ 19,532.71	

* In-Kind contributions include in total contributions

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 Director or Treasurer

Date 4/1/14

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 Secretary of State: Elections Division, P. O. Box 136, Jackson, MS 39205 or fax to 601-576-2545*
2. *Candidates for countywide and county district offices should return forms to their county Circuit Clerk.*
3. *Candidates for Municipal office should return forms to the Municipal Clerk.*

Name of Candidate or Committee: Chokwe A. Lumumba

Reporting period: Jan 1, 2014 through March 29 14

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ITEMIZED RECEIPTS

	Date (Mo., Day, Year)	Amount of each receipt this period
A. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify) LLC Full name: Capitol Dry Wall LLC Mailing Address: 3924 W. Northside Dr. City, State, Zip Code: Jackson MS 39209 Name of Employer (Required): Occupation (Required):	3/12/14	$ 250.00
		$
		$
		$
	Aggregate year-to-date	$ 250.00
B. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify): Full name: Davis Bozeman Law Firm PC Mailing Address: 4153 B Flat Shoals Parkway City, State, Zip Code: Suite 204 Decatur, GA 30034 Name of Employer (Required): Occupation (Required):	3/19/14	$ 250.00
		$
		$
		$
	Aggregate year-to-date	$ 250.00
C. Source ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify): Full name: Alisha Gaines Fulghum Mailing Address: 4418 E. Ridge Dr. City, State, Zip Code: Jackson MS 39211 Name of Employer (Required): Dan Evans Law Firm Occupation (Required): Attorney	3/19/14	$ 250.00
		$
		$
		$
	Aggregate year-to-date	$ 250.00
D. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify): Full name: Civil Tech Inc. Mailing Address: P.O. Box 12852 City, State, Zip Code: Jackson MS 39236-2852 Name of Employer (Required): Occupation (Required):	3/20/14	$ 250.00
		$
		$
		$
	Aggregate year-to-date	$ 250.00

Name of Candidate or Committee: Chokwe A. Lumumba

Reporting period: Jan 1, 2014 through March 29, 14

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JACKSON, MS

ITEMIZED RECEIPTS

	Date (Mo., Day, Year)	Amount of each receipt this period
A. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify) Full name: Cox Medical and Wellness Mailing Address: 2964 Terry Rd. B-2 City, State, Zip Code: Jackson MS 39212 Name of Employer (Required) Occupation (Required)	3 / 12 / 14	$ 250.00
	☐ / ☐ / ☐	$
	☐ / ☐ / ☐	$
	☐ / ☐ / ☐	$
	Aggregate year-to-date	$ 250.00
B. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify) Full name: Eva M. Henderson Mailing Address: 5918 Canterbury Rd City, State, Zip Code: Jackson MS 39206 Name of Employer (Required): Self-employed Occupation (Required): Physician	3 / 27 / 14	$ 250.00
	☐ / ☐ / ☐	$
	☐ / ☐ / ☐	$
	☐ / ☐ / ☐	$
	Aggregate year-to-date	$ 250.00
C. Source ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify) Full name: Wardell Smith Mailing Address: 1333 Woodfield Dr. City, State, Zip Code: Jackson MS 39211 Name of Employer (Required): Self-employed Occupation (Required): Contractor	3 / 14 / 14	$ 300.00
	☐ / ☐ / ☐	$
	☐ / ☐ / ☐	$
	☐ / ☐ / ☐	$
	Aggregate year-to-date	$ 300.00
D. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify) Full name: Dr. Ted C. Watson / Dr. Sharonthia Watson Mailing Address: 4671 Hwy 18 City, State, Zip Code: Brandon MS 39042 Name of Employer (Required): Solid Rock Church International Occupation (Required): Pastor	3 / 27 / 14	$ 300.00
	☐ / ☐ / ☐	$
	☐ / ☐ / ☐	$
	☐ / ☐ / ☐	$
	Aggregate year-to-date	$ 300.00

Name of Candidate or Committee: Chokwe A. Lumumba

Reporting period: Jan. 1, 2014 through March 29 14

14 APR -1 PM 4:13

ITEMIZED RECEIPTS

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JACKSON, MS.

	Date (Mo., Day, Year)	Amount of each receipt this period
A. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify) Full name: John Leath Mailing Address: 5038 Parking Dr. City, State, Zip Code: Jackson MS 39211 Name of Employer (Required): owner Wing Stop Occupation (Required): Restaurateur	3 / 28 / 14	$ 300.00
	Aggregate year-to-date	$ 300.00
B. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify) Full name: Wilma Scott Mailing Address: 105 Red Oak St City, State, Zip Code: Brandon MS 39110 Name of Employer (Required): EEOC - Federal Occupation (Required): Dist. Dir.	3 / 14 / 14	$ 300.00
	Aggregate year-to-date	$ 300.00
C. Source ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify) Full name: Forcy Bland State Farm Agency Mailing Address: 1602 24th Ave. City, State, Zip Code: Meridian MS 39301 Name of Employer (Required): Occupation (Required):	3 / 13 / 14	$ 300.00
	Aggregate year-to-date	$ 300.00
D. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify) Full name: Latrice Westbrook Mailing Address: 5269 Keele St Suite B City, State, Zip Code: Jackson MS 39206 Name of Employer (Required): City of Jackson Occupation (Required): Attorney	3 / 25 / 14	$ 400.00
	Aggregate year-to-date	$ 400.00

Name of Candidate or Committee: Chokwe A. Lumumba

Reporting period: Jan 1, 14 through March 29 14

14 APR -1 PM 4:35

RECEIVED
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JACKSON, MS

ITEMIZED RECEIPTS

	Date (Mo., Day, Year)	Amount of each receipt this period
A. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify) Full name: Khadi and Watani Tyehimba Mailing Address: 4316 Buckingham Cir. City, State, Zip Code: Decatur GA 30035 Name of Employer (Required): UnKnown Occupation (Required): Nurse	3/14/14	$ 450.00
		$
		$
		$
	Aggregate year-to-date	$ 450.00
B. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify) Full name: Peggy Quinn Mailing Address: 507 FONOREN PL. City, State, Zip Code: Jackson MS 39216 Name of Employer (Required): UnKnown / Paypal Occupation (Required): UnKnown / Paypal	3/23/14	$ 485.20
		$
		$
		$
	Aggregate year-to-date	$ 485.20 Pay Pal
C. Source ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify) Full name: Judith Greene Mailing Address: 139 Washington Ave. City, State, Zip Code: Brooklyn NJ 11205 Name of Employer (Required): Non Profit Justice Strategies Occupation (Required): Policy Analyst	3/17/14	$ 485.20
		$
		$
		$
	Aggregate year-to-date	$ 485.20 Pay Pal
D. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify) Full name: Dr. Sonny Boyle Mailing Address: 521 Houston Ave City, State, Zip Code: Jackson MS 39209 Name of Employer (Required): Jackson State Univ Occupation (Required): professor	3/28/14	$ 500.00
		$
		$
		$
	Aggregate year-to-date	$ 500.00

Name of Candidate or Committee: Chokwe A. Lumumba

Reporting period: 1/1/14 through 3/29/14

14 APR -1 PM 4:36

ITEMIZED RECEIPTS

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CITY CLERK
JACKSON, MS.

	Date (Mo., Day, Year)	Amount of each receipt this period
A. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify)		
Full name: Tyler Turner	3/22/14	$ 500.00
Mailing Address: [illegible]	/ /	$
City, State, Zip Code:	/ /	$
Name of Employer (Required): Nissan	/ /	$
Occupation (Required): Engineer	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: Goodwin E. Doke	3/12/14	$ 500.00
Mailing Address: PO Box 11655	/ /	$
City, State, Zip Code: Jackson MS 39283-1156	/ /	$
Name of Employer (Required): State Farm	/ /	$
Occupation (Required): Sales Farm Bureau	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: Craymon Hughes	3/15/14	$ 500.00
Mailing Address: 17515 Kate Lorn St.	/ /	$
City, State, Zip Code: Detroit, MI 48221	/ /	$
Name of Employer (Required): Retired	/ /	$
Occupation (Required): Retired	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: Tommy Wallace	3/28/14	$ 500.00
Mailing Address: P.O. Box 20073	/ /	$
City, State, Zip Code: Jackson, MS 39289	/ /	$
Name of Employer (Required): MAC Construction	/ /	$
Occupation (Required): Employee of MAC Construction	Aggregate year-to-date	$ 500.00

Name of Candidate or Committee: Charles A. Lumumba

Reporting period: 1/1/14 through 3/29/14

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ITEMIZED RECEIPTS

	Date (Mo., Day, Year)	Amount of each receipt this period
A. Source: ☒ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)		
Full name: BKI Burk-Kleinpeter Inc.	3/25/14	$ 500.00
Mailing Address: 2660 Ridgewood Rd. Suite 201	/ /	$
City, State, Zip Code: Jackson MS 39216	/ /	$
Name of Employer (Required)	/ /	$
Occupation (Required)	Aggregate year-to-date	$ 510.00
B. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Tonia Striggs	3/26/14	$ 508.80
Mailing Address: 5038 Parkway Dr.	/ /	$
City, State, Zip Code: Jackson MS 39211	/ /	$
Name of Employer (Required): Unknown	/ /	$
Occupation (Required): Unknown	Aggregate year-to-date	$ 500.10
C. Source ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Cookie Kilgore	3/26/14	$ 500.00
Mailing Address: 5038 Parkway Dr.	/ /	$
City, State, Zip Code: Jackson MS 39211	/ /	$
Name of Employer (Required): Unknown	/ /	$
Occupation (Required): Unknown	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: Charlotte Keeys	3/26/14	$ 500.00
Mailing Address: P.O. Box 23278	/ /	$
City, State, Zip Code: Jackson MS 39225	/ /	$
Name of Employer (Required): Self A-E Builder	/ /	$
Occupation (Required): Lead Estate Broker	Aggregate year-to-date	$ 500.00

Name of Candidate or Committee: Robert A. Lumumba

Reporting period: 1/1/14 through 3/29/14

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JACKSON, MS

ITEMIZED RECEIPTS

A. Source: ☒ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify) Full name: Intertribal Business Consultants Inc Mailing Address: 1888 Main Street Ste C-148 City, State, Zip Code: Madison MS 39110 Name of Employer (Required): Occupation (Required):	Date (Mo., Day, Year): 3/25/14 Aggregate year-to-date	Amount of each receipt this period: $ 500.00 $ 500.00
B. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify): Full name: Jeloni Parker Mailing Address: 5 Oak High Pl City, State, Zip Code: Jackson MS 39211 Name of Employer (Required): self Occupation (Required): Independent Marketing and Advertising	Date (Mo., Day, Year): 3/25/14 Aggregate year-to-date	Amount of each receipt this period: $ 500.00 $ 500.00
C. Source ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify): Full name: Jesse & Jackie Lyons Mailing Address: 103 Harper Street City, State, Zip Code: Ridgeland MS 39157 Name of Employer (Required): Retired Lab Technician Occupation (Required): Self employed medical lab supply	Date (Mo., Day, Year): 3/22/14 Aggregate year-to-date	Amount of each receipt this period: $ 500.00 $ 500.00
D. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify): LLC Full name: Capitol Hill Assocs LLC Mailing Address: 10 Cabriant Cir. City, State, Zip Code: Jackson MS 39216 Name of Employer (Required): Occupation (Required):	Date (Mo., Day, Year): 3/21/14 Aggregate year-to-date	Amount of each receipt this period: $ 500.00 $ 500.00

Name of Candidate or Committee: Robert D. Lumumba

Reporting period: 1/1/14 through 3/29/14

14 APR -1 PM 4:35

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JACKSON, MS

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Matthew W. Thomas / Carla Thomas	3/19/14	$ 500.00
Mailing Address: 3023 Lynch Street	/ /	$
City, State, Zip Code: Jackson MS 39213	/ /	$
Name of Employer (Required): Retired Federal Insurance Agent	/ /	$
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: Willie L. Robinson	3/12/14	$ 500.00
Mailing Address: 4115 Liberty Hill	/ /	$
City, State, Zip Code: Jackson MS 39206	/ /	$
Name of Employer (Required):	/ /	$
Occupation (Required): Retired	Aggregate year-to-date	$ 501.00

C. Source ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Ivory Phillips	3/16/14	$ 500.00
Mailing Address: 334 Forest Acres	/ /	$
City, State, Zip Code: Jackson MS 39206	/ /	$
Name of Employer (Required):	/ /	$
Occupation (Required): Retired	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: Marilyn Markland	3/15/14	$ 500.00
Mailing Address: 9850 Boyne City Rd.	/ /	$
City, State, Zip Code: Charlevoix MI 49720	/ /	$
Name of Employer (Required):	/ /	$
Occupation (Required): Retired	Aggregate year-to-date	$ 500.00

Name of Candidate or Committee Richard A. Lumpkin

Reporting period 1/1/14 through 3/29/14

ITEMIZED RECEIPTS

14 APR -1 PM 1:33

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JACKSON, MS.

	Date (Mo., Day, Year)	Amount of each receipt this period
A. Source: ☐ Corporation ☐ PAC ☐ ~~Individual~~ ☐ Loan ☐ Other (please specify)		
Full name: John Jackson	3 / 5 / 14	$ 500.00
Mailing Address: 953 Alta Vista Blvd.	/ /	$
City, State, Zip Code: Gautier MS 39209	/ /	$
Name of Employer (Required)	/ /	$
Occupation (Required): Retired	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: Golden Body Shop	3 / 18 / 14	$ 500.00
Mailing Address: 694 N. Mill St	/ /	$
City, State, Zip Code: Gautier MS 39531	/ /	$
Name of Employer (Required): Self-employed	/ /	$
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: Arcel Bobo	3 / 13 / 14	$ 500.00
Mailing Address: P.O. Box 374	/ /	$
City, State, Zip Code: Gautier MS 39553	/ /	$
Name of Employer (Required): City of Gautier, Still Form Lumber	/ /	$
Occupation (Required): Mayor and Lumber Broker	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: John Baldwin	3 / 17 / 14	$ 500.00
Mailing Address: 4120 South Indiana	/ /	$
City, State, Zip Code: Chicago Illinois 60653	/ /	$
Name of Employer (Required)	/ /	$
Occupation (Required): Retired	Aggregate year-to-date	$ 500.00

Name of Candidate or Committee: Chokwe A. Lumumba

Reporting period: 1/1/14 through 3/29/14

ITEMIZED RECEIPTS

14 APR -1 PM 4:35
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	Date (Mo., Day, Year)	Amount of each receipt this period
A. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify) Full name: Barbara Jackson Mailing Address: 4120 South Indiana City, State, Zip Code: Chicago, Illinois 60653 Name of Employer (Required) Occupation (Required): Retired	3/12/14	$ 500.00
	Aggregate year-to-date	$ 500.00
B. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify) Full name: John H. Hudnall Mailing Address: 201 Ivory Brook Ct. City, State, Zip Code: Madison MS 39110 Name of Employer (Required): Neel-Schaffer engineering firm Occupation (Required): officer -- engineering firm	3/5/14	$ 500.00
	Aggregate year-to-date	$ 500.00
C. Source ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify) Full name: Hibbett Neel Mailing Address: P. O. Box 22625 City, State, Zip Code: Jackson MS 39225 Name of Employer (Required): Self - Neel-Schaffer Occupation (Required): President - Engineering Firm	3/5/14	$ 500.00
	Aggregate year-to-date	$ 500.00
D. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify) Full name: Joe F. Royal Mailing Address: 615 Griswold Suite 1724 City, State, Zip Code: Detroit MI 48226 Name of Employer (Required): self employed Occupation (Required): Attorney	3/05/14	$ 500.00
	Aggregate year-to-date	$ 500.00

Name of Candidate or Committee Robert A. Lumumba

Reporting period 1/1/14 through 3/24/14

ITEMIZED RECEIPTS

14 APR -1 PM 4:35

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JACKSON, MS

	Date (Mo., Day, Year)	Amount of each receipt this period
A. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)		
Full Name: [illegible]	3/21/14	$ 525.00
Mailing Address: 1913 Nordan Loop	/ /	$
City, State, Zip Code: Montgomery AL 36106	/ /	$
Name of Employer (Required)	/ /	$
Occupation (Required)	Aggregate year-to-date	$ 525.00
B. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Joe C. Collins	3/12/14	$ 1,000.00
Mailing Address: P.O. Box 9325	/ /	$
City, State, Zip Code: Jackson MS 39286	/ /	$
Name of Employer (Required): self	/ /	$
Occupation (Required): electrician	Aggregate year-to-date	$ 1,000.00
C. Source ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: SOL Engineering	3/12/14	$ 1,000 **
Mailing Address: P.O. Box 1327	/ /	$
City, State, Zip Code: Canton MS 39046	/ /	$
Name of Employer (Required)	/ /	$
Occupation (Required)	Aggregate year-to-date	$ 1,000 **
D. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Jessie Patton	3/12/14	$ 1,000 **
Mailing Address: 1176 Big Creek Rd	/ /	$
City, State, Zip Code: Jackson MS 39212	/ /	$
Name of Employer (Required): self	/ /	$
Occupation (Required): concrete contractor	Aggregate year-to-date	$ 1,111. **

Name of Candidate or Committee: Robert A. Lumpkin

Reporting period: 1/1/14 through 3/25/14

ITEMIZED RECEIPTS

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JACKSON, MS

	Date (Mo., Day, Year)	Amount of each receipt this period
A. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)		
Full name: Stacy Patterson, Mrs.	3/12/14	$ 1,000.00
Mailing Address: 125 Heron Landing	/ /	$
City, State, Zip Code: Ridgeland MS 39157	/ /	$
Name of Employer (Required): Baker Donelson	/ /	$
Occupation (Required): Attorney	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
Full name: Houston Restaurant Group Holdings	3/25/14	$ 1,000.00
Mailing Address: 440 N. Mill St	/ /	$
City, State, Zip Code: Jackson MS 39202	/ /	$
Name of Employer (Required):	/ /	$
Occupation (Required):	Aggregate year-to-date	$ 1,000
C. Source ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Hayden M. Kuykendall	3/25/14	$ 1,000.00
Mailing Address: P.O. Box 24506	/ /	$
City, State, Zip Code: Jackson, MS 39225	/ /	$
Name of Employer (Required): Mississippi School of Law	/ /	$
Occupation (Required): LAW Professor	Aggregate year-to-date	$ 1,101.00
D. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify): PAC	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Robert F. Wilkins PAC	3/12/14	$ 1,000
Mailing Address: 475 E Capitol Street	/ /	$
City, State, Zip Code: Jackson MS 39201	/ /	$
Name of Employer (Required):	/ /	$
Occupation (Required):	Aggregate year-to-date	$ 1,000.00

Name of Candidate or Committee: Robert A. Tannehill

Reporting period: 1/1/14 through 3/29/14

ITEMIZED RECEIPTS

14 APR -1 PM 4:35

RECEIVED
CITY CLERK

A. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Jackson, Mitchell & Shaw, PC	3/28/14	$ 1,000.00
Mailing Address: 615 Griswold Street Ste 1924	/ /	$
City, State, Zip Code: Detroit, MI 48226	/ /	$
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
Full name: Alicia Phillips	3/19/14	$ 1,000.00
Mailing Address: 149 Charles Mayfair Rd	/ /	$
City, State, Zip Code: Olive MS 38654	/ /	$
Name of Employer (Required): Retired	/ /	$
Occupation (Required): Retired	Aggregate year-to-date	$ 1,000.00
C. Source ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Arnold Consulting Group Inc	3/19/14	$ 1,000
Mailing Address: 4252 W. County Line Rd	/ /	$
City, State, Zip Code: Jackson MS 39212	/ /	$
Name of Employer (Required)	/ /	$
Occupation (Required)	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: Smart Enterprises, Inc	3/21/14	$ 1,000.00
Mailing Address: 539 Town Center Dr.	/ /	$
City, State, Zip Code: Brandon MS 39110	/ /	$
Name of Employer (Required)	/ /	$
Occupation (Required)	Aggregate year-to-date	$ 1,000.00

Name of Candidate or Committee: Robert A. Lumpkin

Reporting period: 1/1/14 through 3/29/14

ITEMIZED RECEIPTS

14 APR -1 PM 4:35

RECEIVED
CITY CLERK
JACKSON, MS.

	Date (Mo., Day, Year)	Amount of each receipt this period
A. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)		
Full name: [illegible] Money Mutz Strategies	3/24/14	$ 1,000.00
Mailing Address: P.O. Box 3133		$
City, State, Zip Code: Jackson MS 39207		$
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
Full name: Council & Council Law	3/24/14	$ 1,000.00
Mailing Address: P.O. Box 343		$
City, State, Zip Code: Jackson MS 39207		$
Name of Employer (Required)		$
Occupation (Required)	Aggregate year-to-date	$ 1,000.00
C. Source ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify): LLC	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: TMS Logistics LLC	3/24/14	$ 1,000.00
Mailing Address: 151 Nissan Pkwy Suite F	3/13/14	$ 2,500.00
City, State, Zip Code: Canton MS 39046		$
Name of Employer (Required)		$
Occupation (Required)	Aggregate year-to-date	$ 3,500.00
D. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Industrial Property Services LLC	3/24/14	$ 1,000.00
Mailing Address: 126 Amite St	3/13/14	$ 2,000.00 * Refunds
City, State, Zip Code: Jackson MS 39201		$
Name of Employer (Required)		$
Occupation (Required)	Aggregate year-to-date	$ 3,000.00 *

* see Refund to TMS PA

Name of Candidate or Committee Robert A. Lanerla

Reporting period 1/1/14 through 3/31/14

14 APR -1 PM 4:35

RECEIVED CITY CLERK JACKSON, MS.

ITEMIZED RECEIPTS

A. Source: [ ] Corporation [ ] PAC [ ] Individual [ ] Loan [ ] Other (please specify) PAC

	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: North Jackson Merchant Assn	3/25/14	$ 1,000.00
Mailing Address: PO Box 4532	/ /	$
City, State, Zip Code: Jackson MS 39296	/ /	$
Name of Employer (Required):	/ /	$
Occupation (Required):	Aggregate year-to-date	$ 1,000.00

B. Source: [ ] Corporation [ ] PAC [X] Individual [ ] Loan [ ] Other (please specify)

	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Jerry Kelly	3/28/14	$ 1,000.00
Mailing Address: 5 Concourse Pkwy Ste 3000	/ /	$
City, State, Zip Code: Atlanta GA 30328	/ /	$
Name of Employer (Required): Self	/ /	$
Occupation (Required): Road Builder	Aggregate year-to-date	$ 1,000.00

C. Source [ ] Corporation [ ] PAC [X] Individual [ ] Loan [ ] Other (please specify)

	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Connie Jones / Warren Jones	3/ /14	$ 1,000.00
Mailing Address: 115 Cirencester Dr.	3/10/14	$ 2,500.00
City, State, Zip Code: Richland MS 39157	/ /	$
Name of Employer (Required): Self	/ /	$
Occupation (Required): Contractor/Legislator	Aggregate year-to-date	$ 3,500.00

D. Source: [ ] Corporation [ ] PAC [X] Individual [ ] Loan [ ] Other (please specify)

	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Joseph Simpson	3/ /14	$ 1,000.00
Mailing Address: 320 W. Pearl St	/ /	$
City, State, Zip Code: Jackson MS 39201	/ /	$
Name of Employer (Required): Owner - Iron Horse Grill	/ /	$
Occupation (Required): Restaurateur	Aggregate year-to-date	$ 1,000.00

Name of Candidate or Committee Charlene K. Lumbus

Reporting period 1/1/14 through 3/29/14

ITEMIZED RECEIPTS

RECEIVED
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14 APR -1 PM 4:35

	Date (Mo., Day, Year)	Amount of each receipt this period
A. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify) Full name ORTON, CHARLES. Mailing Address Jackson City, State, Zip Code Name of Employer (Required) Occupation (Required) Attorney	3/☐/14	$ 1,000.00
	☐/☐/☐	$
	☐/☐/☐	$
	☐/☐/☐	$
	Aggregate year-to-date	$ 1,000.00
B. Source: ☒ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify) Full name Electric Mutual INC Mailing Address P.O. Box 9246 City, State, Zip Code Jackson MS 39286 Name of Employer (Required) Occupation (Required)	3/12/14	$ 750.00
	☐/☐/☐	$
	☐/☐/☐	$
	☐/☐/☐	$
	Aggregate year-to-date	$ 750.00
C. Source ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify) Full name John L Markham Mailing Address 1410 Livingston Lane Suite A City, State, Zip Code Jackson MS 39213 Name of Employer (Required) Self Occupation (Required) Attorney	3/12/14	$ 1,000.00
	☐/☐/☐	$
	☐/☐/☐	$
	☐/☐/☐	$
	Aggregate year-to-date	$ 1,000.00
D. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify) Full name Lacresha Randall Mailing Address 531 Belmont Park N Apt. 504 City, State, Zip Code Dayton OH 45405 Name of Employer (Required) Unknown Occupation (Required) Unknown	3/12/14	$ 1,000.00
	☐/☐/☐	$
	☐/☐/☐	$
	☐/☐/☐	$
	Aggregate year-to-date	$ 1,000.00

Name of Candidate or Committee Robert A. Lumumba

Reporting period 1/1/14 through 3/20/14

ITEMIZED RECEIPTS

	Date (Mo., Day, Year)	Amount of each receipt this period
A. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify) Full name: Willie Walker Mailing Address: 5804 Kristen Dr City, State, Zip Code: Jackson MS 39201 Name of Employer (Required): Owner - KBS, LLC Technology Occupation (Required): Technology	3/12/14	$ 1,000.00
		$
		$
		$
	Aggregate year-to-date	$ 1,000.00
B. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify) Full name: Dr. Lafayette Omoregie Mailing Address: 342 Pinehurst Loop City, State, Zip Code: Ridgeland MS 39157 Name of Employer (Required): City of Jackson Occupation (Required): Chief of Staff - Mayors office	3/11/14	$ 1,000.00
		$
		$
		$
	Aggregate year-to-date	$ 1,000.00
C. Source ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify) Full name: Adia Vote Mailing Address: Hobo Town - Bailey Ave. City, State, Zip Code: Name of Employer (Required): Self Occupation (Required): Medical Consultant	3/10/14	$ 1,000.00
		$
		$
		$
	Aggregate year-to-date	$ 1,100.00
D. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify) Full name: Lee K. Buck Mailing Address: 432 Buena Vista Ave. City, State, Zip Code: Jackson MS 39209 Name of Employer (Required): Self Occupation (Required): Contractor	3/12/14	$ 1,000.00
		$
		$
		$
	Aggregate year-to-date	$ 1,100.00

Name of Candidate or Committee Chokwe A. Lumumba

Page 12 of 22

Reporting period 1/1/14 through 3/29/14

ITEMIZED RECEIPTS

14 APR -1 PM 4:35

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	Date (Mo., Day, Year)	Amount of each receipt this period
A. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify) LLC Full name Jackson Mayor for the Mayor Mailing Address 2020 E. Nine Mile Rd. City, State, Zip Code St. Clair Shores, MI 48080 Name of Employer (Required) Occupation (Required)	3/19/14	$ 1,500
		$
		$
		$
	Aggregate year-to-date	$ 1,500
B. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify) Full name David Morris Mailing Address PO Box 104 City, State, Zip Code Jackson MS 39205 Name of Employer (Required) Self Occupation (Required) Real Estate	3/25/14	$ 2,000
		$
		$
		$
	Aggregate year-to-date	$ 2,000
C. Source ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify) Full name Thomas L. Wallace Mailing Address 125 S Congress St. Suite 1615 City, State, Zip Code Jackson MS 39201 Name of Employer (Required) Self - Mac Construction Occupation (Required) Contractor	3/22/14	$ 2,000
		$
		$
		$
	Aggregate year-to-date	$ 2,000
D. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify) Full name Stanton Mansell Mailing Address 2048 Hwy 61 N City, State, Zip Code Port Gibson MS 39150 Name of Employer (Required) Self Occupation (Required) Attorney	3/20/14	$ 2,500
		$
		$
		$
	Aggregate year-to-date	$ 2,500

Name of Candidate or Committee Robert A. Lowman

Reporting period 1/1/14 through 3/29/14

ITEMIZED RECEIPTS

	Date (Mo., Day, Year)	Amount of each receipt this period
A. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify) LLC Full name: 401 Lakeland Blvd. LLC Mailing Address: 115 Corinthwood Blvd Ste 405 City, State, Zip Code: Detroit MI 48226 Name of Employer (Required): Occupation (Required):	3/12/14	$ 2,500
	☐/☐/☐	$
	☐/☐/☐	$
	☐/☐/☐	$ ~~2,500~~
	Aggregate year-to-date	$ 2,500
B. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify) Full name: John Ratcliff Mailing Address: 8922 Crosswill Rd City, State, Zip Code: Shreveport LA 71106 Name of Employer (Required): Retired Occupation (Required): Retired	3/22/14	$ 2912.70
	☐/☐/☐	$
	☐/☐/☐	$
	☐/☐/☐	$
	Aggregate year-to-date	$ 2,912.70 Pd Pd
C. Source ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify) Full name: Chas D. Johnson Mailing Address: 308 B Avondale Dr. City, State, Zip Code: Clinton MS 39056 Name of Employer (Required): self Contract Occupation (Required): JDJ Midwife	3/12/14	$ 3,000
	☐/☐/☐	$
	☐/☐/☐	$
	☐/☐/☐	$
	Aggregate year-to-date	$ 3,000
D. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify) Full name: Richard B. Schmitz Mailing Address: P.O. Box 3949 City, State, Zip Code: Jackson MS 39207-3815 Name of Employer (Required): self Occupation (Required): Attorney	3/24/14	$ 3,000
	3/12/14	$ 2,500 deleted
	3/12/14	$ 2,500 deleted
	3/12/14	$ 2,500 deleted
	Aggregate year-to-date	$ 10,500

Name of Candidate or Committee Robert A. Livingston

Reporting period 1/1/14 through 3/29/14

ITEMIZED RECEIPTS

14 APR -1 PM 4:33 RECEIVED CHANCERY CLERK JACKSON, MS.

	Date (Mo., Day, Year)	Amount of each receipt this period
A. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify) LLC Full name: Core Land Title LLC Mailing Address: 304 S. Lamar St City, State, Zip Code: Jackson MS 39201 Name of Employer (Required): Occupation (Required):	3/10/14	$ 4,000 In Kind
	/ /	$
	/ /	$
	/ /	$
	Aggregate year-to-date	$ 4,000
B. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify) Full name: Tommy Moore Mailing Address: 304 S. Lamar St City, State, Zip Code: Jackson MS 39201 Name of Employer (Required): Self Occupation (Required): entrepreneur owner car lot	3/12/14	$ 5,000 In Kind
	3/14/14	$ 1,000 In Kind
	3/17/14	$ 120.00 In Kind
	/ /	$
	Aggregate year-to-date	$ 6,120.00 In Kind
C. Source ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify) Full name: Winston Jones Thompson Mailing Address: 121 Stratford Dr. City, State, Zip Code: Madison MS 39110 Name of Employer (Required): Cochran Law Firm Occupation (Required): Attorney	3/24/14	$ 5,000 In Kind
	/ /	$
	/ /	$
	/ /	$
	Aggregate year-to-date	$ 5,000
D. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify) Full name: Susan A. Yates Mailing Address: 535 Griswold St. Ste. 1030 City, State, Zip Code: Detroit MI 48226 Name of Employer (Required): Self Employed Occupation (Required): Attorney	3/12/14	$ 5,000 In Kind
	/ /	$
	/ /	$
	/ /	$
	Aggregate year-to-date	$ 5,000

Name of Candidate or Committee: Robert E. Lumpkin

Reporting period: 1/1/14 through 3/29/14

14 APR -1 PM 4:35

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CITY CLERK
JACKSON, MS.

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Harold Ewlyn Mailing Address: 535 Griswold St. Suite 1030 City, State, Zip Code: Detroit MI 48226 Name of Employer (Required): Self Occupation (Required): Attorney	3/25/14	$ 5,000.00
	☐/☐/☐	$
	☐/☐/☐	$
	☐/☐/☐	$
	Aggregate year-to-date	$ 5,000.00
B. Source: ☑ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Teresa Davis Mailing Address: 901 NE Teakettle Dam Loop City, State, Zip Code: Lawton OK 73507 Name of Employer (Required): Self Occupation (Required): Attorney	3/11/14	$ 5,000
	☐/☐/☐	$
	☐/☐/☐	$
	☐/☐/☐	$
	Aggregate year-to-date	$ 5,000
C. Source ☐ Corporation ☐ PAC ☑ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Dwight Utz Mailing Address: 712 Sherwood Dr. City, State, Zip Code: Jackson MS 39216 Name of Employer (Required): Halkert Occupation (Required): Bridge Engineer	3/28/14	$ 500.00
	☐/☐/☐	$
	☐/☐/☐	$
	☐/☐/☐	$
	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: Morris Nosser Mailing Address: 917 N Congress St City, State, Zip Code: Yazoo MS 39194 Name of Employer (Required): Occupation (Required):	☐/☐/☐	$ 1,000.00 In Kind
	☐/☐/☐	$
	☐/☐/☐	$
	☐/☐/☐	$ In Kind
	Aggregate year-to-date	$ 1,000.00

Name of Candidate or Committee: Chloe A. Lumumba

Reporting period: 1/1/14 through 3/29/14

ITEMIZED RECEIPTS

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2014 APR -1 PM 4:25
CLERK

	Date (Mo., Day, Year)	Amount of each receipt this period
A. Source: ☒ Corporation ☐ PAC ☐ Individual ☐ Loan ☐ Other (please specify)		
Full Name: [illegible]	3/26/14	$ 500.00
Mailing Address: 388 Atlantic Avenue #3rd	/ /	$
City, State, Zip Code: Brooklyn NY 11216	/ /	$
Name of Employer (Required)	/ /	$
Occupation (Required)	Aggregate year-to-date	$ 600.00
B. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Jeanne Middleton	3/27/14	$ 250.00 (247.45)
Mailing Address: 1105 Arbor Vista Blvd	/ /	$
City, State, Zip Code: Jackson MS 39211	/ /	$
Name of Employer (Required)	/ /	$
Occupation (Required): Retired Professor	Aggregate year-to-date	$ 242.45
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	$

Name of Candidate or Committee Chokwe A. Lumumba

Page 1 of 5

Reporting period 1/1/14 through 3/29/14

14 APR -1 PM 4:35

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CITY CLERK
JACKSON, MS.

ITEMIZED DISBURSEMENTS

A. Full name / Mailing Address / City, State, Zip Code / Purpose of Disbursement (Optional)	Date (Mo., Day, Year)	Amount of each disbursement this period
3234 Medgar Evers Blvd Jackson MS 39213 Rent Campaign office	3/12/14	$ 2,000.00
	Aggregate Year-to-date	$ 2,000.00
B. Full name Jackson Free Press **Mailing Address** 125 S. Congress St **City, State, Zip Code** Jackson MS 39201 **Purpose of Disbursement (Optional)** Ads	3/12/14	$ 369.25
	3/14/14	$ 1224.50
	Aggregate Year-to-date	$ 1,594.25
C. Full name Debra Scott **Mailing Address** 105 Kodiak Ct **City, State, Zip Code** Jackson MS 39110 **Purpose of Disbursement (Optional)** Refund of personal contribution	3/12/14	$ 300.00
	—/—/—	$
	Aggregate Year-to-date	$ 300.00
D. Full name Comcast Spotlight **Mailing Address** 5915 I-55 N **City, State, Zip Code** Jackson MS 39213 **Purpose of Disbursement (Optional)** Ads	3/17/14	$ 5,075.35
	3/25/14	$ 1,522.00
	Aggregate Year-to-date	$ 6,597.35
E. Full name WJTV **Mailing Address** 1820 TV Road **City, State, Zip Code** Jackson MS 39204 **Purpose of Disbursement (Optional)** Ads	3/20/14	$ 1631.25
	3/28/14	$ 2,422.50
	Aggregate Year-to-date	$ 4058.75
F. Full name SMD Enterprise **Mailing Address** County Line Rd **City, State, Zip Code** Jackson MS 39211 **Purpose of Disbursement (Optional)** T-shirts	3/20/14	$ 252.00
	3/24/14	$ 450.00
	Aggregate Year-to-date	$ 702.00

Name of Candidate or Committee Charles A. Lumpkin

Reporting period 1/1/14 through 3/29/14

14 APR -1 PM 4:35 RECEIVED

ITEMIZED DISBURSEMENTS

	Date (Mo., Day, Year)	Amount of each disbursement this period
A. Full name: Jackson Marketing & Printing Mailing Address: 4125 W. Northside Dr. Ste B City, State, Zip Code: Jackson MS 39209 Purpose of Disbursement (Optional): Signs	3/21/14	$ 15,330
	3/28/14	$ 1,140.00
	Aggregate Year-to-date	$ 16,470
B. Full name: Henry McNeal Mailing Address: Unknown City, State, Zip Code: Purpose of Disbursement (Optional): Canvassing Words	3/24/14	$ 5,000
	__/__/__	$
	Aggregate Year-to-date	$ 5,000 OU
C. Full name: Adolph Thurston Mailing Address: 142 W. Santa Clara City, State, Zip Code: Jackson MS 39212 Purpose of Disbursement (Optional): Campaign office workers	3/24/14	$ 350.00
	3/26/14	$ 500.00
	Aggregate Year-to-date	$ 850.00
D. Full name: Tarsha Howard Mailing Address: 106 Farrington Pl City, State, Zip Code: Madison MS 39110 Purpose of Disbursement (Optional): Purchase of office supplies for Hy. campaign	3/13/14	$ 400.00
	3/13/14	$ 48.00
	Aggregate Year-to-date	$
E. Full name: Tarsha Howard Mailing Address: 106 Farrington Pl City, State, Zip Code: Madison MS 39110 Purpose of Disbursement (Optional): office supplies for campaign	3/12/14	$ 500.00 →
	__/__/__	$
	Aggregate Year-to-date	$ 948.00
F. Full name: Underwood Imprint Services Inc Mailing Address: 126 Amite St City, State, Zip Code: Jackson MS 39201 Purpose of Disbursement (Optional): Refund overlimit	3/24/14	$ 2,000 00
	__/__/__	$
	Aggregate Year-to-date	$ 2,000 00

Name of Candidate or Committee Charles A. Lumpkin

Reporting period 1/1/14 through 3/29/14

Page 3 of 5

14 APR -1 PM 4:36 RECEIVED CITY CLERK JACKSON, MS.

ITEMIZED DISBURSEMENTS

	Date (Mo., Day, Year)	Amount of each disbursement this period
A. Full name: WKXI Mailing Address: 731 S. Pear Orchard City, State, Zip Code: Ridgeland MS 39157 Purpose of Disbursement (Optional): Ads	3/12/14	$ 4,980.00
	3/25/14	$ 2,380.00
	Aggregate Year-to-date	$
B. Full name: WKXI 103.5 Mailing Address: 731 S. Pear Orchard City, State, Zip Code: Ridgeland MS 39157 Purpose of Disbursement (Optional): Ads	3/25/14	$ 2,350.00
	3/25/14	$ 2,350.00
	Aggregate Year-to-date	$ 17,060.00
C. Full name: Deanda TV - WAPT Mailing Address: 7616 Channel 16 Way City, State, Zip Code: Jackson MS 39209 Purpose of Disbursement (Optional): Ads	3/18/14	$ 2125
	3/24/14	$ 1,806.25
	Aggregate Year-to-date	$
D. Full name: Deanda TV - WAPT Mailing Address: 7616 Channel 16 Way City, State, Zip Code: Jackson MS 39209 Purpose of Disbursement (Optional): Ads	3/28/14	$ 2,198.25
	__/__/__	$
	Aggregate Year-to-date	$ 6630.00
E. Full name: Clear Channel Radio 95.5 Mailing Address: 1375 Eastside Rd City, State, Zip Code: Jackson MS 39206 Purpose of Disbursement (Optional): Radio Ads	3/20/14	$ 1,281.25
	__/__/__	$
	Aggregate Year-to-date	$ 6,268.75
F. Full name: The Lamar Companies Mailing Address: 405 Country Pl Pkwy City, State, Zip Code: Pearl MS 39208 Purpose of Disbursement (Optional): Signs - Ads	3/20/14	$ 6,375
	__/__/__	$
	Aggregate Year-to-date	$ 6,375

Name of Candidate or Committee Chokwe A. Lumumba

Page 4 of 5

Reporting period 1/1/14 through 3/29/14

14 APR -1 PM 4:36 RECEIVED CITY CLERK JACKSON, MS.

ITEMIZED DISBURSEMENTS

	Date (Mo., Day, Year)	Amount of each disbursement this period
A. Full name Scott [illegible]		
Mailing Address 409 C. Lindale St	3/21/14	$ 500.00
City, State, Zip Code Jackson MS 39209	3/23/14	$ 250.00
Purpose of Disbursement (Optional) Campaign	Aggregate Year-to-date	$ 750.00
B. Full name WRTMD	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 865 S Pear Orchard Rd	3/25/14	$ 1,008.00
City, State, Zip Code Ridgeland MS 39157	__/__/__	$
Purpose of Disbursement (Optional) Radio Ads	Aggregate Year-to-date	$ 1,008.00
C. Full name Granville Lucas	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address PO Box 1794	3/26/14	$ 500.00
City, State, Zip Code Jackson MS 39216	__/__/__	$
Purpose of Disbursement (Optional) Campaign Worker	Aggregate Year-to-date	$ 500.00
D. Full name Brittney Lucas	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 80 Jackson St NE Apt 4210	3/26/14	$ 500.00
City, State, Zip Code Atlanta GA 30312	__/__/__	$
Purpose of Disbursement (Optional) Campaign Worker	Aggregate Year-to-date	$ 500.00
E. Full name Charles Lumumba	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	3/27/14	$ 750.00
City, State, Zip Code	__/__/__	$
Purpose of Disbursement (Optional) Grand media costs & office supplies	Aggregate Year-to-date	$ 750.00
F. Full name Brand Co.	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 7027 old Madison Pike Ste 108	3/27/14	$ 1,000
City, State, Zip Code Huntsville AL 35806	3/28/14	$ 500
Purpose of Disbursement (Optional) Campaign Consulting Fees	Aggregate Year-to-date	$ 6,500.00

Name of Candidate or Committee Chelsea A. Lumumba

Page 5 of 5

Reporting period 1/1/14 through 3/29/14

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ITEMIZED DISBURSEMENTS

A. Full name / Mailing Address / City, State, Zip Code / Purpose of Disbursement (Optional)	Date (Mo., Day, Year)	Amount of each disbursement this period
Stuart Embry 4465 N Hwy 55 #101 Jackson MS 39216 Campaign event - coffee cost	3/28/14	$ 543.70
	__/__/__	$
	Aggregate Year-to-date	$ 543.70
B. Full name / Mailing Address / City, State, Zip Code / Purpose of Disbursement (Optional)	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
Marshal Ambrose Marshall MS Food - Campaign event	3/29/14	$ 1,100.00
	__/__/__	$
	Aggregate Year-to-date	$ 1,100.00
C. Full name / Mailing Address / City, State, Zip Code / Purpose of Disbursement (Optional)	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
Gary Jones Richland MS 39157 Richard - Bridges - Campaign event	__/__/__	$ 353.55
	__/__/__	$
	Aggregate Year-to-date	$ 353.55
D. Full name / Mailing Address / City, State, Zip Code / Purpose of Disbursement (Optional)	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
~~James~~ Michael Harris 930 B Highway 49 Richland MS 39157 Music - Campaign event	3/29/14	$ 300.00
	__/__/__	$
	Aggregate Year-to-date	$ 300.00
E. Full name / Mailing Address / City, State, Zip Code / Purpose of Disbursement (Optional)	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
	__/__/__	$
	__/__/__	$
	Aggregate Year-to-date	$
F. Full name / Mailing Address / City, State, Zip Code / Purpose of Disbursement (Optional)	**Date (Mo., Day, Year)**	**Amount of each disbursement this period**
	__/__/__	$
	__/__/__	$
	Aggregate Year-to-date	$