



14 APR -7 PM 12: 02

RECEIVED
CITY CLERK
JACKSON, MS.

CANDIDATE'S/CANDIDATE'S POLITICAL COMMITTEE
48 HOUR REPORT
OF REPORTABLE CONTRIBUTIONS

Check one of the following:

- This is a report from a Candidate.
- This is a report from a Candidate's Political Committee.

John Horn

(Name of the Candidate or Candidate's Political Committee Receiving the Contribution)

Mayor, City of Jackson
(Office sought by Candidate)

(Full Name of Contributor)

See Attachment
(Mailing Address of Contributor)

(Occupation of Contributor)

(Name of Contributor's Employer)

(Date Contribution Received)

\$ *37,050*

(Dollar Amount of Contribution)

(If In-kind, Description of In-kind Contribution)

John
(Signature of Candidate or Political Committee Treasurer)

4/7/14

(Date Signed)

Miss. Code Ann. Section 23-15-807 (f) (i)(1972) requires the following: "If any contribution of more than Two Hundred Dollars (\$200.00) is received by a candidate or candidate's political committee after the tenth day, but more than forty-eight (48) hours before 12:01 a.m. of the day of the election, the candidate or political committee shall notify the appropriate office designated in Section 23-15-805, within forty-eight (48) hours of receipt of the contribution." The notification must include the information required on this form.

According to Miss. Code Ann. Section 23-15-805(1972), candidates for statewide, state district, and all legislative offices must transmit or deliver this report to the Secretary of State's Office. Candidates for countywide or county district office must transmit or deliver the report to their county's Circuit Clerk. Candidates for municipal office must transmit or deliver the report to their Municipal Clerk.

This form may be delivered or transmitted by overnight mail, courier service, or by FAX. However, Miss. Code Ann. Section 23-15-807(f)(ii)(1972) states that the "candidate or candidate's committee shall ensure that the notification shall in fact be received in the appropriate office designated in Section 23-15-805 within forty-eight (48) hours of the contribution."

- SEND TO:**
1. Candidates for statewide, state district, multi-county and all legislative offices should return form to DELBERT HOSEMAN, Secretary of State, 401 Mississippi Street, Jackson, MS 39201 or FAX to 601-576-2545.
 2. Candidates for countywide or county district offices should return form to their county Circuit Clerk.
 3. Candidates for municipal offices should return form to their Municipal Clerk.

Name of Candidate or Committee John HorneReporting period Apr 1, 2014 through Apr 4, 2014

ITEMIZED RECEIPTS

A. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>MedTrans, LLC</u>	<u>4/13/14</u>	\$ <u>2,500⁰⁰</u>
Mailing Address <u>1485 Livingston Rd</u>	□/□/□	\$ _____
City, State, Zip Code <u>Jackson, MS 39213</u>	□/□/□	\$ _____
Name of Employer (Required)	□/□/□	\$ _____
Occupation (Required)	Aggregate year-to-date	\$ <u>2,500⁰⁰</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Frank Drennon</u>	<u>4/13/14</u>	\$ <u>1,000⁰⁰</u>
Mailing Address <u>302 Tuscanng Ct</u>	□/□/□	\$ _____
City, State, Zip Code <u>Ridgeland, MS 39157</u>	□/□/□	\$ _____
Name of Employer (Required) <u>Capital City Beverages</u>	□/□/□	\$ _____
Occupation (Required) <u>distributor</u>	Aggregate year-to-date	\$ <u>1,000⁰⁰</u>
C. Source <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Thomas L. Wallace</u>	<u>4/13/14</u>	\$ <u>1,000⁰⁰</u>
Mailing Address <u>96 River Road</u>	□/□/□	\$ _____
City, State, Zip Code <u>Columbia, MS 39429</u>	□/□/□	\$ _____
Name of Employer (Required) <u>T.L. Wallace Constr</u>	□/□/□	\$ _____
Occupation (Required) <u>building contractor</u>	Aggregate year-to-date	\$ <u>1,000⁰⁰</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>David J. Rutland</u>	<u>4/13/14</u>	\$ <u>5,000⁰⁰</u>
Mailing Address <u>1485 Livingston Rd</u>	□/□/□	\$ _____
City, State, Zip Code <u>Jackson, MS 39213</u>	□/□/□	\$ _____
Name of Employer (Required) <u>MHI, Inc</u>	□/□/□	\$ _____
Occupation (Required) <u>distributor</u>	Aggregate year-to-date	\$ <u>5,000⁰⁰</u>

Name of Candidate or Committee John Horhn
 Reporting period Apr 1, 2014 through Apr 4, 2014

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A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/>	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify) _____		
Full name <u>Robert Durham</u>	<u>4/13/14</u>	\$ <u>2,500⁰⁰</u>
Mailing Address <u>1372 E. Northside Dr</u>	<u> </u> / <u> </u> / <u> </u>	\$ _____
City, State, Zip Code <u>Jackson, MS 39211</u>	<u> </u> / <u> </u> / <u> </u>	\$ _____
Name of Employer (Required) <u>Rx Pro</u>	<u> </u> / <u> </u> / <u> </u>	\$ _____
Occupation (Required) <u>marketing / distribution</u>	Aggregate year-to-date	\$ <u>2,500⁰⁰</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/>		
Other (please specify) _____		
Full name <u>Roosevelt Turner</u>	<u>4/13/14</u>	\$ <u>500⁰⁰</u>
Mailing Address <u>5713 Regenta Dr. N.</u>	<u> </u> / <u> </u> / <u> </u>	\$ _____
City, State, Zip Code <u>Mobile, AL 36609</u>	<u> </u> / <u> </u> / <u> </u>	\$ _____
Name of Employer (Required) <u>self</u>	<u> </u> / <u> </u> / <u> </u>	\$ _____
Occupation (Required) <u>real estate investor</u>	Aggregate year-to-date	\$ <u>500⁰⁰</u>
C. Source <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/>		
Other (please specify) _____		
Full name <u>Harry Morgan</u>	<u>4/13/14</u>	\$ <u>1,500⁰⁰</u>
Mailing Address <u>143 Cambrooka</u>	<u> </u> / <u> </u> / <u> </u>	\$ _____
City, State, Zip Code <u>Hattiesburg, MS 39402</u>	<u> </u> / <u> </u> / <u> </u>	\$ _____
Name of Employer (Required) <u>self</u>	<u> </u> / <u> </u> / <u> </u>	\$ _____
Occupation (Required) <u>contractor</u>	Aggregate year-to-date	\$ <u>1,500⁰⁰</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Loan <input type="checkbox"/>		
Other (please specify) _____		
Full name <u>Lydia G. Horhn</u>	<u>4/13/14</u>	\$ <u>14,000⁰⁰</u>
Mailing Address <u>6035 Waverly Dr</u>	<u> </u> / <u> </u> / <u> </u>	\$ _____
City, State, Zip Code <u>Jackson, MS 39206</u>	<u> </u> / <u> </u> / <u> </u>	\$ _____
Name of Employer (Required) <u>JPS</u>	<u> </u> / <u> </u> / <u> </u>	\$ _____
Occupation (Required) <u>media specialist</u>	Aggregate year-to-date	\$ <u>14,000⁰⁰</u>

Name of Candidate or Committee John Horne
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Other (please specify) _____		
Full name <u>Brew Barr, LLC</u>	<u>4/13/14</u>	\$ <u>2,500⁰⁰</u>
Mailing Address <u>1485 Livingston Lane</u>	<u> </u>	\$ <u> </u>
City, State, Zip Code <u>Jackson, MS 39213</u>	<u> </u>	\$ <u> </u>
Name of Employer (Required) _____	<u> </u>	\$ <u> </u>
Occupation (Required) _____	Aggregate year-to-date	\$ <u>2,500⁰⁰</u>
B. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/>		
Other (please specify) _____		
Full name <u>RKB Real Estate</u>	<u>4/13/14</u>	\$ <u>250⁰⁰</u>
Mailing Address <u>726 Euclid Ave, Apt B</u>	<u> </u>	\$ <u> </u>
City, State, Zip Code <u>Jackson, MS 39202</u>	<u> </u>	\$ <u> </u>
Name of Employer (Required) _____	<u> </u>	\$ <u> </u>
Occupation (Required) _____	Aggregate year-to-date	\$ <u>250⁰⁰</u>
C. Source <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/>		
Other (please specify) _____		
Full name <u>DLP Management Solutions</u>	<u>4/13/14</u>	\$ <u>500⁰⁰</u>
Mailing Address <u>5174 Old Hillsboro Rd</u>	<u> </u>	\$ <u> </u>
City, State, Zip Code <u>Forest, MS 39074</u>	<u> </u>	\$ <u> </u>
Name of Employer (Required) _____	<u> </u>	\$ <u> </u>
Occupation (Required) _____	Aggregate year-to-date	\$ <u>500⁰⁰</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/>		
Other (please specify) _____		
Full name <u>Jeffrey Webster</u>	<u>4/13/14</u>	\$ <u>300⁰⁰</u>
Mailing Address <u>601 Crestridge Ct.</u>	<u> </u>	\$ <u> </u>
City, State, Zip Code <u>Madison, MS 39110</u>	<u> </u>	\$ <u> </u>
Name of Employer (Required) <u>Nissan N.A.</u>	<u> </u>	\$ <u> </u>
Occupation (Required) <u>HR Director</u>	Aggregate year-to-date	\$ <u>300⁰⁰</u>

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Other (please specify) _____		
Full name <u>MS Legislative & Consulting Group</u>	<u>4/3/14</u>	\$ <u>1,080⁰⁰</u>
Mailing Address <u>1037 Lake Village Circle, Ste A</u>	<u> / / </u>	\$ _____
City, State, Zip Code <u>Brandon, MS 39047</u>	<u> / / </u>	\$ _____
Name of Employer (Required)	<u> / / </u>	\$ _____
Occupation (Required)	Aggregate year-to-date	\$ <u>1,080⁰⁰</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/>		
Other (please specify) _____		
Full name <u>Jason Watkins</u>	<u>4/3/14</u>	\$ <u>500⁰⁰</u>
Mailing Address <u>920 Meadowbrook Rd</u>	<u> / / </u>	\$ _____
City, State, Zip Code <u>Jackson, MS 39206</u>	<u> / / </u>	\$ _____
Name of Employer (Required)	<u> / / </u>	\$ _____
Occupation (Required) <u>atty</u>	Aggregate year-to-date	\$ <u>500⁰⁰</u>
C. Source <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/>		
Other (please specify) _____		
Full name	<u> / / </u>	\$ _____
Mailing Address	<u> / / </u>	\$ _____
City, State, Zip Code	<u> / / </u>	\$ _____
Name of Employer (Required)	<u> / / </u>	\$ _____
Occupation (Required)	Aggregate year-to-date	\$ _____
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/>		
Other (please specify) _____		
Full name	<u> / / </u>	\$ _____
Mailing Address	<u> / / </u>	\$ _____
City, State, Zip Code	<u> / / </u>	\$ _____
Name of Employer (Required)	<u> / / </u>	\$ _____
Occupation (Required)	Aggregate year-to-date	\$ _____