

JUL 28 2015

**Candidate**  
**REPORT OF RECEIPTS AND DISBURSEMENTS**  
**2015 Election**

BARBARA DUNN, CIRCUIT CLERK  
*[Signature]* D.C.

Name of Candidate Zack Wallace  
Address PO Box 3648, Jackson, MS 39207 County Hinds  
Telephone (Work) 601-201-5677 (Home) 601-201-5677 (Fax) \_\_\_\_\_  
Contact Name Kedra Wallace Email Address zackwallace4circuitclerk@gmail.com  
Office Sought Hinds County Circuit Clerk Political Party Democrat

Check here if above is different from previous report

**TYPE OF REPORT**

- \_\_\_ May 8, 2015 Periodic Report (January 1, 2015, through April 30, 2015) ..... **Mandatory**
- \_\_\_ June 10, 2015 Periodic Report (May 1, 2015, through May 31, 2015) ..... **Mandatory**
- \_\_\_ July 10, 2015 Periodic Report (June 1, 2015, through June 30, 2015) ..... **Mandatory**
- July 28, 2015 Pre-Election Report (July 1, 2015, through July 25, 2015) ..... **Mandatory**  
*All Primary Candidates and Political Committees*
- \_\_\_ August 18, 2015 Pre-Election Report (July 26, 2015, through August 15, 2015) ..... **Runoff Candidates Only**  
*All Primary Candidates and Political Committees in a Runoff Election*
- \_\_\_ October 9, 2015 Periodic Report (July 1, 2015, through September 30, 2015) ..... **Mandatory**
- \_\_\_ October 27, 2015 Pre-Election Report ..... **Mandatory**  
*(Primary Election Winners report October 1, 2015, through October 24, 2015)* *All Candidates and Political Committees*  
*(Independent Candidates report January 1, 2015 through October 24, 2015)*
- \_\_\_ November 17, 2015 Pre-Runoff Report (October 25, 2015, through November 14, 2015) ..... **Runoff Candidates Only**  
*All Candidates and Political Committees in a Runoff Election*
- \_\_\_ January 8, 2016 Periodic Report (October 1, 2015, through December 31, 2015) ..... **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 Secretary of State 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	\$2,100.00	+\$ 1,978.00	\$ 4,078.00	\$ 54,370.82
Total amount of disbursements	\$9,716.15	+\$ 615.97	\$10,332.12	\$ 44,287.46
Total amount of cash on hand			\$ 455.00	

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

*Zack Wallace*  
Signature of Candidate

07/27/2015  
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. §§ 23-15-811 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 Zack WallaceReporting period July 1, 2015 through July 25, 2015**ITEMIZED RECEIPTS**

A. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/>		Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify) _____			
<b>Full name</b> Deviney Brothers		<u>07</u> / <u>01</u> / <u>15</u>	\$ <u>200.00</u>
<b>Mailing Address</b> PO Box 6717		<u>    </u> / <u>    </u> / <u>    </u>	\$ <u>    </u>
<b>City, State, Zip Code</b> Jackson, MS 39282		<u>    </u> / <u>    </u> / <u>    </u>	\$ <u>    </u>
<b>Name of Employer (Required)</b> _____		<u>    </u> / <u>    </u> / <u>    </u>	\$ <u>    </u>
<b>Occupation (Required)</b> Self		<b>Aggregate year-to-date</b>	\$ <u>200.00</u>
B. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/>		Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify) _____			
<b>Full name</b> Baker Services		<u>07</u> / <u>02</u> / <u>15</u>	\$ <u>200.00</u>
<b>Mailing Address</b> PO Box 6717		<u>    </u> / <u>    </u> / <u>    </u>	\$ <u>    </u>
<b>City, State, Zip Code</b> Jackson, MS 39282		<u>    </u> / <u>    </u> / <u>    </u>	\$ <u>    </u>
<b>Name of Employer (Required)</b> _____		<u>    </u> / <u>    </u> / <u>    </u>	\$ <u>    </u>
<b>Occupation (Required)</b> Self		<b>Aggregate year-to-date</b>	\$ <u>200.00</u>
C. 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) _____			
<b>Full name</b> Birdie LaMarca		<u>07</u> / <u>10</u> / <u>15</u>	\$ <u>200.00</u>
<b>Mailing Address</b> 103 Spencer Cove		<u>    </u> / <u>    </u> / <u>    </u>	\$ <u>    </u>
<b>City, State, Zip Code</b> Clinton, MS 39056		<u>    </u> / <u>    </u> / <u>    </u>	\$ <u>    </u>
<b>Name of Employer (Required)</b> UMMC		<u>    </u> / <u>    </u> / <u>    </u>	\$ <u>    </u>
<b>Occupation (Required)</b> Associate Professor		<b>Aggregate year-to-date</b>	\$ <u>200.00</u>
D. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/>		Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify) _____			
<b>Full name</b> Lee & Associates		<u>07</u> / <u>11</u> / <u>15</u>	\$ <u>500.00</u>
<b>Mailing Address</b> _____		<u>    </u> / <u>    </u> / <u>    </u>	\$ <u>    </u>
<b>City, State, Zip Code</b> _____		<u>    </u> / <u>    </u> / <u>    </u>	\$ <u>    </u>
<b>Name of Employer (Required)</b> _____		<u>    </u> / <u>    </u> / <u>    </u>	\$ <u>    </u>
<b>Occupation (Required)</b> _____		<b>Aggregate year-to-date</b>	\$ <u>1000.00</u>

Name of Candidate or Committee Zack WallaceReporting period July 1, 2015 through July 25, 2015**ITEMIZED RECEIPTS**

A. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/>		Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify) _____			
<b>Full name</b> Bryant Guy		<u>07</u> / <u>21</u> / <u>15</u>	\$ <u>250.00</u>
<b>Mailing Address</b> _____		<u>  </u> / <u>  </u> / <u>  </u>	\$ _____
<b>City, State, Zip Code</b> _____		<u>  </u> / <u>  </u> / <u>  </u>	\$ _____
<b>Name of Employer (Required)</b> _____		<u>  </u> / <u>  </u> / <u>  </u>	\$ _____
<b>Occupation (Required)</b> _____		<b>Aggregate year-to-date</b>	\$ <u>500.00</u>
B. 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) _____			
<b>Full name</b> John Brunini		<u>07</u> / <u>21</u> / <u>15</u>	\$ <u>300.00</u>
<b>Mailing Address</b> 708 Welford Court		<u>  </u> / <u>  </u> / <u>  </u>	\$ _____
<b>City, State, Zip Code</b> Madison, MS 39110		<u>  </u> / <u>  </u> / <u>  </u>	\$ _____
<b>Name of Employer (Required)</b> Self		<u>  </u> / <u>  </u> / <u>  </u>	\$ _____
<b>Occupation (Required)</b> Attorney		<b>Aggregate year-to-date</b>	\$ <u>300.00</u>
C. Source <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/>		Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify) _____			
<b>Full name</b> Kirksey & Associates		<u>07</u> / <u>21</u> / <u>15</u>	\$ <u>250.00</u>
<b>Mailing Address</b> PO Box 33		<u>  </u> / <u>  </u> / <u>  </u>	\$ _____
<b>City, State, Zip Code</b> Jackson, MS 39205		<u>  </u> / <u>  </u> / <u>  </u>	\$ _____
<b>Name of Employer (Required)</b> Self		<u>  </u> / <u>  </u> / <u>  </u>	\$ _____
<b>Occupation (Required)</b> Attorney		<b>Aggregate year-to-date</b>	\$ <u>250.00</u>
D. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/>		Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify) _____			
<b>Full name</b> Maxie Gordon & Associates		<u>07</u> / <u>23</u> / <u>15</u>	\$ <u>200.00</u>
<b>Mailing Address</b> 5 Charleston Ave		<u>  </u> / <u>  </u> / <u>  </u>	\$ _____
<b>City, State, Zip Code</b> Clinton, MS 39056		<u>  </u> / <u>  </u> / <u>  </u>	\$ _____
<b>Name of Employer (Required)</b> Self		<u>  </u> / <u>  </u> / <u>  </u>	\$ _____
<b>Occupation (Required)</b> Physician		<b>Aggregate year-to-date</b>	\$ <u>200.00</u>

Name of Candidate or Committee Zack Wallace  
 Reporting period July 1, 2015 through July 25, 2015

## ITEMIZED DISBURSEMENTS

<b>A. Full name</b> VistaPrint	<b>Date</b> (Mo., Day, Year)	<b>Amount of each</b> <b>disbursement this period</b>
<b>Mailing Address</b>	07 / 01 / 15	\$ 421.96
<b>City, State, Zip Code</b>	07 / 15 / 15	\$ 187.24
<b>Purpose of Disbursement (Optional)</b>	<b>Aggregate</b> <b>Year-to-date</b>	\$ 3,064.46
<b>B. Full name</b> Chunda Longino	<b>Date</b> (Mo., Day, Year)	<b>Amount of each</b> <b>disbursement this period</b>
<b>Mailing Address</b>	07 / 01 / 15	\$ 2,611.50
<b>City, State, Zip Code</b>	__ / __ / __	\$
<b>Purpose of Disbursement (Optional)</b> Canvas Team	<b>Aggregate</b> <b>Year-to-date</b>	\$ 8,641.50
<b>C. Full name</b> Hafid Muhammad	<b>Date</b> (Mo., Day, Year)	<b>Amount of each</b> <b>disbursement this period</b>
<b>Mailing Address</b>	07 / 05 / 15	\$ 374.50
<b>City, State, Zip Code</b>	__ / __ / __	\$
<b>Purpose of Disbursement (Optional)</b>	<b>Aggregate</b> <b>Year-to-date</b>	\$ 374.50
<b>D. Full name</b> WAPT 16	<b>Date</b> (Mo., Day, Year)	<b>Amount of each</b> <b>disbursement this period</b>
<b>Mailing Address</b>	07 / 08 / 15	\$ 400.00
<b>City, State, Zip Code</b>	__ / __ / __	\$
<b>Purpose of Disbursement (Optional)</b>	<b>Aggregate</b> <b>Year-to-date</b>	\$ 400.00
<b>E. Full name</b> Jackson Free Press	<b>Date</b> (Mo., Day, Year)	<b>Amount of each</b> <b>disbursement this period</b>
<b>Mailing Address</b>	07 / 08 / 15	\$ 445.00
<b>City, State, Zip Code</b>	__ / __ / __	\$
<b>Purpose of Disbursement (Optional)</b>	<b>Aggregate</b> <b>Year-to-date</b>	\$ 445.00
<b>F. Full name</b> Jackson Jambalya	<b>Date</b> (Mo., Day, Year)	<b>Amount of each</b> <b>disbursement this period</b>
<b>Mailing Address</b>	07 / 08 / 15	\$ 300.00
<b>City, State, Zip Code</b>	__ / __ / __	\$
<b>Purpose of Disbursement (Optional)</b>	<b>Aggregate</b> <b>Year-to-date</b>	\$ 300.00

Name of Candidate or Committee Zack Wallace  
 Reporting period July 1, 2015 through July 25, 2015

## ITEMIZED DISBURSEMENTS

<b>A. Full name</b> John Morgan Hughes		<b>Date</b> (Mo., Day, Year)	<b>Amount of each</b> <b>disbursement this period</b>
<b>Mailing Address</b>		07 / 16 / 15	\$ 3,551.50
<b>City, State, Zip Code</b>		___ / ___ / ___	\$
<b>Purpose of Disbursement (Optional)</b> Mailout		<b>Aggregate</b> <b>Year-to-date</b>	\$ 5,898.42
<b>B. Full name</b> Stephens Printing		<b>Date</b> (Mo., Day, Year)	<b>Amount of each</b> <b>disbursement this period</b>
<b>Mailing Address</b>		07 / 23 / 15	\$ 684.80
<b>City, State, Zip Code</b>		___ / ___ / ___	\$
<b>Purpose of Disbursement (Optional)</b>		<b>Aggregate</b> <b>Year-to-date</b>	\$ 8,724.78
<b>C. Full name</b> Hinds County News		<b>Date</b> (Mo., Day, Year)	<b>Amount of each</b> <b>disbursement this period</b>
<b>Mailing Address</b>		06 / 16 / 15	\$ 160.00
<b>City, State, Zip Code</b>		07 / 23 / 15	\$ 160.00
<b>Purpose of Disbursement (Optional)</b>		<b>Aggregate</b> <b>Year-to-date</b>	\$ 320.00
<b>D. Full name</b> Broadstreet		<b>Date</b> (Mo., Day, Year)	<b>Amount of each</b> <b>disbursement this period</b>
<b>Mailing Address</b>		07 / 23 / 15	\$ 419.65
<b>City, State, Zip Code</b>		___ / ___ / ___	\$
<b>Purpose of Disbursement (Optional)</b>		<b>Aggregate</b> <b>Year-to-date</b>	\$ 419.65
<b>E. Full name</b>		<b>Date</b> (Mo., Day, Year)	<b>Amount of each</b> <b>disbursement this period</b>
<b>Mailing Address</b>		___ / ___ / ___	\$
<b>City, State, Zip Code</b>		___ / ___ / ___	\$
<b>Purpose of Disbursement (Optional)</b>		<b>Aggregate</b> <b>Year-to-date</b>	\$
<b>F. Full name</b>		<b>Date</b> (Mo., Day, Year)	<b>Amount of each</b> <b>disbursement this period</b>
<b>Mailing Address</b>		___ / ___ / ___	\$
<b>City, State, Zip Code</b>		___ / ___ / ___	\$
<b>Purpose of Disbursement (Optional)</b>		<b>Aggregate</b> <b>Year-to-date</b>	\$