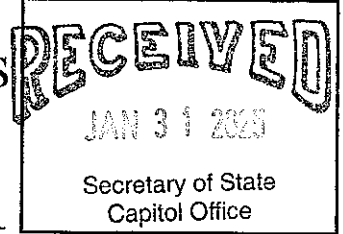


Candidate
REPORT OF RECEIPTS AND DISBURSEMENTS
2024 Annual Report



Name of Candidate Becky CURRIE
 Address 407 Olive Drive City/State/Zip BROOKHAVEN, MS 39601
 Telephone (Work) 601-248-8790 (Home) _____ (Fax) _____
 Contact Name Becky CURRIE Email Address bcurrie@house.ms.gov
 Office Sought House of Rep - District 92

Check here if above information is different from previous report

TYPE OF REPORT

Friday, January 31, 2025 (January 1, 2024 through December 31, 2024) **Annual Report**
 Termination Report (Candidate will no longer accept contributions, make campaign expenditures, has no outstanding campaign debt obligation) **Required to terminate reporting obligations**

IMPORTANT

- (1) Annual Reports are mandatory for all candidates who did not run for office in 2022 filing 2022 Periodic Reports and have not filed a Termination Report prior to December 31, 2022, 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 the reporting period.
- (2) Annual Reports are mandatory for 2022 judicial candidates who did not file a Termination report by January 10, 2023, 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 the reporting period.
- (3) _____
- (4) Until a Candidate files a Termination Report, all campaign finance disclosure reports must be filed in accordance with the applicable schedule set forth by Miss. Code Ann. § 23-15-807 (b) (ii) and (iii).
- (5) The receiving office must be in actual receipt of the required report by 5:00 p.m. on the deadline. If the deadline falls on a weekend or legal holiday, the office must be in actual receipt of the required report by 5:00 p.m. on the first working day *before* the deadline. Reports may be faxed or emailed. Candidates who have previously run for Statewide, State District or Legislative Office file with the Secretary of State's Office. County or County District Office candidates file with the County Circuit Clerk's Office. Municipal candidates file with the Municipal Clerk's Office.

**REPORTED CONTRIBUTIONS AND DISBURSEMENTS FROM CAMPAIGN CONTRIBUTIONS
ACCUMULATED**

JAN. 1, 2024 CASH ON HAND BALANCE		\$	
TOTAL AMT OF CONTRIBUTIONS ¹	\$ 9950.00	\$	Calendar Year-to-Date
TOTAL AMT OF DISBURSEMENTS	\$ 8818.65	\$	
DEC. 31, 2024 CASH ON HAND BALANCE		\$	15,383.92

¹ Contributions to pre-Jan. 1, 2018 campaign funds are limited to interest and dividends earned upon pre-Jan. 1, 2018 monies.

**REPORTED CONTRIBUTIONS AND DISBURSEMENTS FROM CAMPAIGN CONTRIBUTIONS
ACCUMULATED**

JAN. 1, 2024 CASH ON HAND BALANCE				\$
	Itemized (+)	Non-Itemized (=)		Calendar Year-to-Date
TOTAL AMT OF CONTRIBUTIONS	\$ 9950.00	\$	\$	
TOTAL AMT OF DISBURSEMENTS	\$ 8818.65	\$	\$	
DEC. 31, 2024 CASH ON HAND BALANCE				\$

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

Breck Currie
Signature of Candidate

1-30-25
Date

Authority: Miss. Code Ann. §23-15-801, et. seq.

Penalties: A candidate who fails to file, or fails to timely file, required reports in accordance with the statutory deadline cannot be certified as elected to office unless and until he files all reports due as of the date of certification. No candidate who is elected to office shall receive any salary or other remuneration for the office unless and until he files all reports required by statute. Failure to timely submit required reports in accordance with the applicable statutes may result in the imposition of a civil penalty in the amount of \$50 per day for ten (10) days and/or prosecution pursuant to Miss. Code Ann. §§ 23-15-811 and 23-15-813.

Name of Candidate or Committee Becky CURRIE
 Reporting period 1/1/24 through 12/31/24

ITEMIZED DISBURSEMENTS

Disbursements from contributions accumulated Prior to January 1, 2018 or On or After January 1, 2018

A. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Quarter Inn</u>	<u>1/1/24</u>	\$ <u>885.00</u>
Mailing Address <u>1865 Lakeland drive</u>	<u>1/1/24</u>	\$ <u>885.00</u>
City, State, Zip Code <u>Jackson MS 39216</u>	<u>2/1/24</u>	\$ <u>885.00</u>
Purpose of Disbursement (Optional) <u>Rent</u>	Aggregate Year-to-date	\$ <u>1770.00</u>
B. Full name <u>USPS</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>407 Brookhaven St</u>	<u>1/22/24</u>	\$ <u>28.25</u>
City, State, Zip Code <u>Brookhaven MS 39601</u>	<u>1/1/</u>	\$
Purpose of Disbursement (Optional) <u>Postage</u>	Aggregate Year-to-date	\$ <u>28.25</u>
C. Full name <u>Walmart</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>960 Brookway Blvd</u>	<u>1/29/24</u>	\$ <u>58.85</u>
City, State, Zip Code <u>Brookhaven MS 39601</u>	<u>3/31/24</u>	\$ <u>86.67</u>
Purpose of Disbursement (Optional) <u>Office Supplies</u>	Aggregate Year-to-date	\$ <u>145.52</u>
D. Full name <u>Quarter Inn</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>1865 Lakeland drive</u>	<u>3/1/24</u>	\$ <u>885.00</u>
City, State, Zip Code <u>Jackson MS 39216</u>	<u>4/1/24</u>	\$ <u>885.00</u>
Purpose of Disbursement (Optional) <u>Rent</u>	Aggregate Year-to-date	\$ <u>3540.00</u>
E. Full name <u>Lincoln County Republican Women</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>720 Brookwood Drive</u>	<u>3/22/24</u>	\$ <u>50.00</u>
City, State, Zip Code <u>Brookhaven MS 39601</u>	<u>1/1/</u>	\$
Purpose of Disbursement (Optional) <u>Dues</u>	Aggregate Year-to-date	\$ <u>50.00</u>
F. Full name <u>Wreaths Across America</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>P.O. Box 249 Columbia Falls</u>	<u>1/2/24</u>	\$ <u>35.00</u>
City, State, Zip Code <u>ME 04623</u>	<u>1/1/</u>	\$
Purpose of Disbursement (Optional) <u>Donation</u>	Aggregate Year-to-date	\$ <u>35.00</u>

Name of Candidate or Committee Becky Currie

Reporting period 1/1/24 through 12/31/24

ITEMIZED DISBURSEMENTS

Disbursements from contributions accumulated Prior to January 1, 2018 or On or After January 1, 2018

A. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Mississippi GOP</u>	<u>1/9/24</u>	\$ <u>\$100.00</u>
Mailing Address <u>415 Yazoo St. #200</u>	<u>1/9/24</u>	\$ <u>\$100.00</u>
City, State, Zip Code <u>Jackson ms 39201</u>	<u>1/1/24</u>	\$
Purpose of Disbursement (Optional) <u>Donation</u>	Aggregate Year-to-date	\$ <u>100.00</u>
B. Full name <u>ALEC</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>2900 Crystal Drive</u>	<u>4/2/24</u>	\$ <u>575.00</u>
City, State, Zip Code <u>Arlington Va 22202</u>	<u>4/2/24</u>	\$ <u>100.00</u>
Purpose of Disbursement (Optional) <u>Dues, conference</u>	Aggregate Year-to-date	\$ <u>675.00</u>
C. Full name <u>Church of the Redeemer</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>230 W Monticello St</u>	<u>4/21/24</u>	\$ <u>500.00</u>
City, State, Zip Code <u>Brookhaven, ms 39601</u>	<u>4/21/24</u>	\$
Purpose of Disbursement (Optional) <u>Donation</u>	Aggregate Year-to-date	\$ <u>500.00</u>
D. Full name <u>Quarter Inn</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>1865 Lakeland Drive</u>	<u>5/1/24</u>	\$ <u>500.00</u>
City, State, Zip Code <u>Jackson ms 39201</u>	<u>6/1/24</u>	\$ <u>500.00</u>
Purpose of Disbursement (Optional) <u>Rent</u>	Aggregate Year-to-date	\$ <u>41540.00</u>
E. Full name <u>Mississippi GOP</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>415 Yazoo St. #200</u>	<u>5/28/24</u>	\$ <u>600.00</u>
City, State, Zip Code <u>Jackson ms 39201</u>	<u>5/28/24</u>	\$
Purpose of Disbursement (Optional) <u>RNC delegate fees</u>	Aggregate Year-to-date	\$ <u>600.00</u>
F. Full name <u>American Airlines</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>100 International Drive</u>	<u>6/5/24</u>	\$ <u>1221.92</u>
City, State, Zip Code <u>Jackson ms</u>	<u>6/5/24</u>	\$
Purpose of Disbursement (Optional) <u>RNC Travel</u>	Aggregate Year-to-date	\$ <u>1221.92</u>

Name of Candidate or Committee Becky Currie

Reporting period _____ through _____

ITEMIZED DISBURSEMENTS

Disbursements from contributions accumulated Prior to January 1, 2018 or On or After January 1, 2018

A. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Quarter Inn</u>	<u>7/1/24</u>	\$ <u>500.00</u>
Mailing Address <u>1865 Lakeland drive</u>	<u>7/1/24</u>	\$ <u>500.00</u>
City, State, Zip Code <u>Jackson ms 39201</u>	<u>7/1/24</u>	\$ <u>500.00</u>
Purpose of Disbursement (Optional) <u>Rent</u>	Aggregate Year-to-date	\$ <u>5540.00</u>
B. Full name <u>UBER</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>1725 3rd St</u>	<u>7/15/24</u>	\$ <u>15.14</u>
City, State, Zip Code <u>San Francisco California</u>	<u>7/16/24</u>	\$ <u>13.10</u>
Purpose of Disbursement (Optional) <u>transportation RNC</u>	Aggregate Year-to-date	\$ <u>28.24</u>
C. Full name <u>Uber</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>1725 3rd St</u>	<u>7/16/24</u>	\$ <u>20.79</u>
City, State, Zip Code <u>San Francisco California</u>	<u>7/16/24</u>	\$ <u>20.95</u>
Purpose of Disbursement (Optional) <u>transportation RNC</u>	Aggregate Year-to-date	\$ <u>69.98</u>
D. Full name <u>UBER</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>1725 3rd St</u>	<u>7/16/24</u>	\$ <u>55.26</u>
City, State, Zip Code <u>San Francisco California</u>	<u>7/16/24</u>	\$ <u>55.26</u>
Purpose of Disbursement (Optional) <u>Transportation RNC</u>	Aggregate Year-to-date	\$ <u>125.24</u>
E. Full name <u>CORNER Bakery Cafe</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>1305 Capitol drive</u>	<u>7/17/24</u>	\$ <u>34.77</u>
City, State, Zip Code <u>Milwaukee WI</u>	<u>7/18/24</u>	\$ <u>25.38</u>
Purpose of Disbursement (Optional) <u>meals - RNC</u>	Aggregate Year-to-date	\$ <u>60.15</u>
F. Full name <u>TRUMP Campaign</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>P.O. Box 509</u>	<u>7/8/24</u>	\$ <u>200.00</u>
City, State, Zip Code <u>Arlington VA 22216</u>	<u>7/16/24</u>	\$ <u>100.00</u>
Purpose of Disbursement (Optional) <u>Donation</u>	Aggregate Year-to-date	\$ <u>300.00</u>

Name of Candidate or Committee Becky Currie
 Reporting period 1/1/24 through 12/31/24

ITEMIZED DISBURSEMENTS

Disbursements from contributions accumulated Prior to January 1, 2018 or On or After January 1, 2018

A. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Holiday Inn Express</u>	<u>7/14/24</u>	\$ <u>2796.95</u>
Mailing Address <u>525 N Jefferson St</u>	<u>7/14/24</u>	\$ <u>2796.95</u>
City, State, Zip Code <u>Milwaukee, WI 53202</u>	<u>7/14/24</u>	\$ <u>2796.95</u>
Purpose of Disbursement (Optional) <u>Lodging</u>	Aggregate Year-to-date	\$ <u>2796.95</u>
B. Full name <u>Committee to Elect Jennifer</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>Branning FOR SUPREME COURT</u>	<u>9/24/24</u>	\$ <u>200.00</u>
City, State, Zip Code <u>822 Aberdeen Cove Madison, MS 39110</u>	<u>9/24/24</u>	\$ <u>200.00</u>
Purpose of Disbursement (Optional) <u>Donation</u>	Aggregate Year-to-date	\$ <u>200.00</u>
C. Full name <u>Walmart</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>960 Brookway Blvd</u>	<u>11/03/24</u>	\$ <u>216.33</u>
City, State, Zip Code <u>Brookhaven MS 39601</u>	<u>11/03/24</u>	\$ <u>216.33</u>
Purpose of Disbursement (Optional) <u>Supplies - Donation - Veterans event</u>	Aggregate Year-to-date	\$ <u>216.33</u>
D. Full name <u>Dollar Tree</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>958 Brookway Blvd</u>	<u>11/06/24</u>	\$ <u>88.28</u>
City, State, Zip Code <u>Brookhaven MS 39601</u>	<u>11/06/24</u>	\$ <u>88.28</u>
Purpose of Disbursement (Optional) <u>Supplies - Donation - Veterans event</u>	Aggregate Year-to-date	\$ <u>88.28</u>
E. Full name <u>Quarter Inn</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>1865 Lakeland Drive</u>	<u>9/1/24</u>	\$ <u>500.00</u>
City, State, Zip Code <u>Jackson MS 39216</u>	<u>10/1/24</u>	\$ <u>500.00</u>
Purpose of Disbursement (Optional) <u>Rent</u>	Aggregate Year-to-date	\$ <u>6540.00</u>
F. Full name <u>Quarter Inn</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>1865 Lakeland Drive</u>	<u>11/1/24</u>	\$ <u>500.00</u>
City, State, Zip Code <u>Jackson MS 39216</u>	<u>12/1/24</u>	\$ <u>500.00</u>
Purpose of Disbursement (Optional) <u>Rent</u>	Aggregate Year-to-date	\$ <u>7540.00</u>

Name of Candidate or Committee Becky Currie
 Reporting period 1/1/24 through 12/31/24

ITEMIZED CONTRIBUTIONS

A. Source: <input type="radio"/> Corporation <input checked="" type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Duncan Engineering</u>	<u>8/15/24</u>	\$ <u>1,000</u>
Mailing Address <u>1574 Highway 98 East</u>	___/___/___	\$
City, State, Zip Code <u>Columbia, MS</u>	___/___/___	\$
Name of Employer (Required) <u>Self</u>	___/___/___	\$
Occupation (Required) <u>Business Owner</u>	Aggregate year-to-date	\$ <u>1,000</u>
B. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input checked="" type="radio"/> Individual <input type="radio"/> Loan Other (please specify) _____		
Full name <u>Samuel Sones</u>	<u>11/08/24</u>	\$ <u>200.00</u>
Mailing Address <u>303 W Cherokee St</u>	___/___/___	\$
City, State, Zip Code <u>Brookhaven MS 39601</u>	___/___/___	\$
Name of Employer (Required) <u>Self</u>	___/___/___	\$
Occupation (Required) <u>Insurance - Sones Agency</u>	Aggregate year-to-date	\$ <u>200.00</u>
C. Source: <input type="radio"/> Corporation <input checked="" type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan Other (please specify) _____		
Full name <u>HARPER & Bailey government solutions</u>	<u>12/02/24</u>	\$ <u>250.00</u>
Mailing Address <u>317 E Capitol St</u>	___/___/___	\$
City, State, Zip Code <u>Suite 100 Jackson MS 39201</u>	___/___/___	\$
Name of Employer (Required)	___/___/___	\$
Occupation (Required)	Aggregate year-to-date	\$ <u>250.00</u>
D. Source: <input type="radio"/> Corporation <input checked="" type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan Other (please specify) _____		
Full name <u>Friends of Mississippi Hospitals</u>	<u>12/9/24</u>	\$ <u>1500.00</u>
Mailing Address <u>116 Woodgreen Crossing</u>	___/___/___	\$
City, State, Zip Code <u>Madison MS 39110</u>	___/___/___	\$
Name of Employer (Required)	___/___/___	\$
Occupation (Required)	Aggregate year-to-date	\$ <u>1500.00</u>

Name of Candidate or Committee Becky Wylie
 Reporting period 1/1/24 through 12/31/24

ITEMIZED CONTRIBUTIONS

A. Source: <input type="radio"/> Corporation <input checked="" type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Capitol Advocacy Group LLC</u>	<u>12/9/24</u>	\$ <u>1,000</u>
Mailing Address <u>P.O. Box 217</u>	___/___/___	\$
City, State, Zip Code <u>Jackson, ms 39205</u>	___/___/___	\$
Name of Employer (Required)	___/___/___	\$
Occupation (Required)	Aggregate year-to-date	\$ <u>1,000</u>
B. Source: <input type="radio"/> Corporation <input checked="" type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan Other (please specify) _____		
Full name <u>MSW PAC</u>	<u>12/10/24</u>	\$ <u>500.00</u>
Mailing Address <u>P.O. Box 14604</u>	___/___/___	\$
City, State, Zip Code <u>Jackson, ms 39236</u>	___/___/___	\$
Name of Employer (Required)	___/___/___	\$
Occupation (Required)	Aggregate year-to-date	\$ <u>500.00</u>
C. Source: <input type="radio"/> Corporation <input checked="" type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan Other (please specify) _____		
Full name <u>The Corbitt Co. LLC</u>	<u>12/11/24</u>	\$ <u>500.00</u>
Mailing Address <u>PO Box 14225</u>	___/___/___	\$
City, State, Zip Code <u>Jackson ms 39236</u>	___/___/___	\$
Name of Employer (Required)	___/___/___	\$
Occupation (Required)	Aggregate year-to-date	\$ <u>500.00</u>
D. Source: <input type="radio"/> Corporation <input checked="" type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan Other (please specify) _____		
Full name <u>Capitol Resources PAC</u>	<u>12/11/24</u>	\$ <u>500.00</u>
Mailing Address <u>200 N Congress St Suite 500</u>	___/___/___	\$
City, State, Zip Code <u>Jackson ms 39201</u>	___/___/___	\$
Name of Employer (Required)	___/___/___	\$
Occupation (Required)	Aggregate year-to-date	\$ <u>500.00</u>

Name of Candidate or Committee Becky Currie
 Reporting period 1/1/24 through 12/31/24

ITEMIZED CONTRIBUTIONS

A. Source: <input type="radio"/> Corporation <input checked="" type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Ten One PAC</u>	<u>12/11/24</u>	\$ <u>500.00</u>
Mailing Address <u>200 N Congress St Suite 403</u>	_/_/_	\$
City, State, Zip Code <u>Jackson, ms 39201</u>	_/_/_	\$
Name of Employer (Required)	_/_/_	\$
Occupation (Required)	Aggregate year-to-date	\$ <u>500.00</u>
B. Source: <input type="radio"/> Corporation <input checked="" type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Jones Walker LLP</u>	<u>12/16/24</u>	\$ <u>250.00</u>
Mailing Address <u>190 E Capitol St</u>	_/_/_	\$
City, State, Zip Code <u>Jackson ms 39201</u>	_/_/_	\$
Name of Employer (Required)	_/_/_	\$
Occupation (Required) <u>Attorney</u>	Aggregate year-to-date	\$ <u>250.00</u>
C. Source: <input type="radio"/> Corporation <input checked="" type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Cascio Sanford gov law group PLLC</u>	<u>12/16/24</u>	\$ <u>250.00</u>
Mailing Address <u>825 N President St</u>	_/_/_	\$
City, State, Zip Code <u>Jackson ms 39202</u>	_/_/_	\$
Name of Employer (Required)	_/_/_	\$
Occupation (Required)	Aggregate year-to-date	\$ <u>250.00</u>
D. Source: <input type="radio"/> Corporation <input checked="" type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Empower PAC</u>	<u>12/16/24</u>	\$ <u>500.00</u>
Mailing Address <u>1000 North Park Drive</u>	_/_/_	\$
City, State, Zip Code <u>Ridgeland ms 39157</u>	_/_/_	\$
Name of Employer (Required)	_/_/_	\$
Occupation (Required)	Aggregate year-to-date	\$ <u>500.00</u>

Name of Candidate or Committee Becky Currie
 Reporting period 1/1/24 through 12/31/24

ITEMIZED CONTRIBUTIONS

A. Source: <input type="radio"/> Corporation <input checked="" type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>MTC Management & Training</u>	<u>10/31/24</u>	\$ <u>1,000.00</u>
Mailing Address <u>500 N Marketplace Drive</u>	___/___/___	\$
City, State, Zip Code <u>Centerville UT 84114</u>	___/___/___	\$
Name of Employer (Required) _____	___/___/___	\$
Occupation (Required) _____	Aggregate year-to-date	\$ <u>1,000.00</u>
B. Source: <input type="radio"/> Corporation <input checked="" type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Wilford Albert Payne</u>	<u>12/24/24</u>	\$ <u>500.00</u>
Mailing Address <u>PO Box 1267</u>	___/___/___	\$
City, State, Zip Code <u>Hattiesburg MS 39403</u>	___/___/___	\$
Name of Employer (Required) <u>Self</u>	___/___/___	\$
Occupation (Required) <u>Attorney</u>	Aggregate year-to-date	\$ <u>500.00</u>
C. Source: <input type="radio"/> Corporation <input checked="" type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>MS Soft Drink Assn</u>	<u>12/23/24</u>	\$ <u>500.00</u>
Mailing Address <u>300 B North State St</u>	___/___/___	\$
City, State, Zip Code <u>Jackson MS 39216</u>	___/___/___	\$
Name of Employer (Required) _____	___/___/___	\$
Occupation (Required) _____	Aggregate year-to-date	\$ <u>500.00</u>
D. Source: <input type="radio"/> Corporation <input checked="" type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Cornerstone Gov Affairs</u>	<u>7/17/24</u>	\$ <u>1,000</u>
Mailing Address <u>800 Maine Ave 7th Floor</u>	___/___/___	\$
City, State, Zip Code <u>Washington DC 20024</u>	___/___/___	\$
Name of Employer (Required) _____	___/___/___	\$
Occupation (Required) _____	Aggregate year-to-date	\$ <u>1,000</u>