

2019 ELECTION CYCLE

Political Committee
REPORT OF RECEIPTS AND DISBURSEMENTS



RECEIVED
SECRETARY OF STATE
JAN 08 2020
Campaign Finance
Secretary of State

Name of Committee Election 2019 Campaign For Rickey Thompson
Address P. O. Box 132 City/State/Zip Shannon, Ms 38868
Telephone 662-995-1043 Fax 662-995-1043
Treasurer Sherry Gill Email Address rickeythompson45@yahoo.com

Check here if above is different from previous report

TYPE OF REPORT

- May 18, 2019 Periodic Report (January 1, 2019 through April 30, 2019) Mandatory
- June 18, 2019 Periodic Report (May 1, 2019 through May 31, 2019) Mandatory
- July 18, 2019 Periodic Report (June 1, 2019 through June 30, 2019) Mandatory
- July 30, 2019 Primary Pre-Election Report (July 1, 2019 through July 27, 2019) Mandatory
- August 20, 2019 Primary Pre-Runoff Report (July 28, 2019 through August 17, 2019) Runoff Candidates Only
- October 18, 2019 Periodic Report (July 1, 2019 through September 30, 2019) Mandatory
- October 28, 2019 Pre-Election Report (October 1, 2019 through October 26, 2019) Mandatory
- November 18, 2019 Pre-Runoff Report (October 27, 2019 through November 16, 2019) Runoff Candidates Only
- January 18, 2020 Periodic Report (October 1, 2019 through December 31, 2019) Mandatory
- Termination Report (Committee will no longer accept contributions, make campaign expenditures, has no outstanding campaign debt obligation and zero cash on hand balance) Required to terminate reporting obligations

IMPORTANT

- (1) Political Committees which accept contributions and/or make expenditures for the purpose of influencing or attempting to influence the action of voters for or against any candidate regularly elected in 2019 are required to file periodic, pre-election and annual reports until the filing of a Termination Report.
- (2) The receiving office must be in actual receipt of the required reports by 5:00 p.m. on the deadline. 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.

	Itemized (+)	Non-Itemized (+)	This Period	Calendar Year-to-Date
TOTAL AMT OF CONTRIBUTIONS	\$650.00	\$0	\$650.00	\$650.00
TOTAL AMT OF DISBURSEMENTS	\$367.39	\$0	\$367.39	\$367.39
CASH ON HAND BALANCE				\$1,000.34

Name of Candidate or Committee Election 2019 Campaign for Ricky Thompson
 Reporting period October 1, 2019 through December 31, 2019

ITEMIZED RECEIPTS

A. Source: <input type="radio"/> Corporation <input checked="" type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan <input type="radio"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Billy F. Thornton	12 / 11 / 19	\$400.00
Mailing Address: P.O. Box 4079	12 / 11 / 19	\$
City, State, Zip Code: Gulfport, Ms 39502	12 / 11 / 19	\$
Name of Employer (Required): Mississippi Power Company State	12 / 11 / 19	\$
Occupation (Required):	Aggregate year-to-date	\$400.00
B. Source: <input type="radio"/> Corporation <input checked="" type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan <input type="radio"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name: Optometry For Progress	12 / 11 / 19	\$250.00
Mailing Address: 141 Executive Drive Suite 5	12 / 11 / 19	\$
City, State, Zip Code: Madison, MS 39110	12 / 11 / 19	\$
Name of Employer (Required):	12 / 11 / 19	\$
Occupation (Required):	Aggregate year-to-date	\$650.00
C. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan <input type="radio"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name:	12 / 11 / 19	\$
Mailing Address:	12 / 11 / 19	\$
City, State, Zip Code:	12 / 11 / 19	\$
Name of Employer (Required):	12 / 11 / 19	\$
Occupation (Required):	Aggregate year-to-date	\$
D. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan <input type="radio"/> Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name:	12 / 11 / 19	\$
Mailing Address:	12 / 11 / 19	\$
City, State, Zip Code:	12 / 11 / 19	\$
Name of Employer (Required):	12 / 11 / 19	\$
Occupation (Required):	Aggregate year-to-date	\$

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

Sherry Hill
Signature of Director or Treasurer

1-7-20
Date

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

Penalties: Failure to timely submit required reports in accordance with the applicable statute(s) 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 813 (1972).

Send to: Political Committees supporting or opposing Statewide, State District or Legislative candidates file this form with the Secretary of State: hand delivered to 401 Mississippi Street, Jackson, MS; mailed to P. O. Box 136, Jackson, MS 39205; faxed to (601) 576-2545; or emailed to CampaignFinance@sos.ms.gov. Political Committees supporting or opposing county and/or county district candidates file this form with the Circuit Clerk's Office.

CASH ONLY IF ALL CHECKING SECURITY FEATURES LISTED ON BACK BECARE NO TAMPERING OR COPIES

3908

Optometry For Progress
141 Executive Drive Suite 3
Madison, MS 39110

TRUSTMARK NATIONAL BANK
85-027893

11/12/2019

PAY TO THE ORDER OF Friends of Rickey Thompson *

\$ 250.00

Two Hundred Fifty and 00/100 ***** DOLLARS

Friends of Rickey Thompson

Linda Ross Allen

⑈003908⑈ ⑈085300279⑈ ⑈1002816918⑈



REGARD T&E Phone
800-499-2177 Fax

MS Call: Fr 10000019 T&Eage
Return: Mon 10000019 0500PM
Operator: FORBANK SCOTT

GILL SHERRY
THE RICHES HILL DRIVE
SHARON, NC 28580

Customer # 3034
MO 886-1342 Phone

Qty	Part	Item Remark	Part	Status	Event End Date	Price
1	100421	OFF WHITE	87 RD FLOOR	Reserved	Mon 1000119 0500PM	\$71.00
1	100492	100" BLACK	87RD FLOOR	Reserved	Mon 1000119 0500PM	\$60.00
1	100493	TABLE FEED 87 RD		Reserved	Mon 1000119 0500PM	\$160.00
1	100494	FEEDING BASE		Reserved	Mon 1000119 0500PM	\$0.00
1	100495	4" TABLE JOIST		Reserved	Mon 1000119 0500PM	\$0.00

Deposits Are Non-Refundable/Non-Transferrable.

Payments made on this contract:

Rental/Setup Fee	\$387.36	Set 12/4/2019 3:55AM Dvd1 Card B/C 0001-000-0001-0004 Auth 088530
Total	\$387.36	

I authorize Budgeted Rent-All to charge my credit card or debit card for any and all charges related to this rental. This includes, but is not limited to, rental charges, overdue and additional rental charges, cleaning charges, damage, loss of rental, costs of repairs, as a result of the rental and all related charges. I agree to pay the above amount according to the card issuer agreement.

Rental Contract

This is a contract. The back of this contract contains important terms and conditions including lessee's obligation from a liability for repair or damage and details of customer's obligations. These terms and conditions are a part of this contract. READ THESE

Terms and conditions. If equipment does not function properly with lessor within 30 minutes of acceptance in residential or otherwise will be made. If this is a reservation or reservation fee up to 10% of the total amount may be charged if reservation is cancelled within 2 weeks of the scheduled "rent and take out".

The damage waiver charge is voluntary and is provided for your protection. See paragraph 12 on the reverse side of this contract. Decline DMC and am fully responsible for any damage or loss in rental accidents.

Decline DMC

I certify that I have read and agree to all terms of this contract.

Signature:

GILL SHERRY

STORE HOURS: Mon-Fri 7:30AM-6PM Sat 7:30AM-NOON CLOSED Sunday After Hours Emergency 800-555-3347
World's Best Customer Service

Business Hours: 10:00AM-6:00PM
www.budgetrentall.com

Rental:	\$71.00
Damage Waiver:	\$0.00
Subtotal:	\$71.00
Setup/Chg Setup Fee:	\$0.00
Total:	\$71.00
Paid:	\$0.00
Amount Due:	\$71.00

MS
DMS
MS 1000119-0500PM

MISSISSIPPI POWER COMPANY 0681
STATE PAC
P.O. BOX 4078
GULFPORT, MS 39002

HANOOKY BANK
2510 14TH STREET
GULFPORT, MS 39001
601-868-8888

4349

11/19/2010

PAY TO THE ORDER OF Rickey Thompson Campaign Fund

\$400.00

Four Hundred and 00/100

(DOLLARS)

MEMO: 2010 Contribution "Void after 90 days"

Brian R. Anderson
Jennifer Walker

#004349# 1065503681: 01 0650757#