Candidate REPORT OF RECEIPTS AND DISBURSEMENTS 2023 Election



Name of Candidate Sherre	Agune			
Address 709 High	land Cir	City/Zip Tupels, 38504		
Telephone (Work)	(Home) 42-243 - (S	53> (Fax)		
Contact Name	Email Address_	Shane-guirre@yahos.com		
		if any) Republica		
Check here if above is different from previous report TYPE OF REPORT				
May 10, 2023 Periodic Report (Ja	nuary 1, 2023 through April 30, 2023	3)		
June 9, 2023 Periodic Report (Ma	ny 1, 2023 through May 31, 2023)			
July 10, 2023 Periodic Report (Ju	ne 1, 2023 through June 30, 2023)			
August 1, 2023 Primary Pre-Elec	tion Report (July 1, 2023 through Jul	ly 29, 2023)		
August 22, 2023 Primary Pre-Ru	noff Report (July 30, 2023 through A	August 19, 2023)Runoff Candidates Only		
October 10, 2023 Periodic Report	t (July 1, 2023 through September 30,	, 2023)		
October 31, 2023 Pre-Election Re	port (October 1, 2023 through October	per 29, 2023)		
November 21, 2023 Pre-Runoff R	Report (October 30, 2023 through Nov	vember 19, 2023)Runoff Candidates Only		
January 10, 2024 Periodic Report	t (October 1, 2023 through December	r 31, 2023)		
	will no longer accept contributions, many ses, has no outstanding campaign debt			

IMPORTANT

- (1) All candidates for office shall file periodic reports in the year in which they are to be elected.
- (2) Periodic Reports are mandatory, even if no expenditures were made during the period. In such case, the candidate shall submit a report indicating "0" (zero) for total amount of reported contributions and/or expenditures during this period. Pre-Election Reports are mandatory if the candidate is opposed in the election for which the report is required.
- Until a candidate files a Termination Report, annual reports must be filed in accordance with Miss. Code Ann. §
 23-15-807 (b) (ii) and (iii).
- (4) Beginning on Jan. 1, 2018, candidates and officeholders may not "personally use" campaign contributions. Section 23-15-821, Miss. Code Ann., sets forth those "personal use" expenditures which are specifically prohibited from campaign contributions and those disbursements which are not defined as "personal use" and therefore permissible from campaign contributions. Campaign contributions accepted and held prior to Jan. 1, 2018 ARE NOT subject to the "personal use" restrictions of Section 23-15-821, Miss. Code Ann. Beginning on

- restrictions of Section 2-15-821, Miss. Code Ann. Separate record keeping and reporting is required for candidates and officeholders for any campaign contributions held prior to Jan. 1, 2018, disbursements made therefrom and contributions earned thereon in the form of interest or dividends.
- (5) 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.

REPORTED CONTRIBUTIONS AND DISBURSEMENTS FROM CAMPAIGN CONTRIBUTIONS ACCUMULATED PRIOR TO JANUARY 1, 2018

JAN. 1, 2023 CASH ON HAND BALANCE				1814, 950.85
	Itemized (+)	Non-Itemized (=)	This Period	Calendar Year-to-Date
TOTAL AMT OF CONTRIBUTIONS	\$ 0	\$ 0	\$ 0	\$ 🗇
TOTAL AMT OF DISBURSEMENTS	\$ 0	\$ 0	\$ 0	\$
CASH ON HAND BALANCE			\$14,950.85	

REPORTED CONTRIBUTIONS AND DISBURSEMENTS FROM CAMPAIGN CONTRIBUTIONS ACCUMULATED AFTER JANUARY 1, 2018

JAN. 1, 2023 CASH ON HAND BALAN	CE			\$37802,41
	Itemized (+)	Non-Itemized (=)	This Period	Calendar Year-to-Date
TOTAL AMT OF CONTRIBUTIONS	\$ 1000	\$ 0	\$ 2	\$ 4,150,00
TOTAL AMT OF DISBURSEMENTS	\$ 600	\$ 0	\$ हुन्छ	\$ 600.00
CASH ON HAND BALANCE				\$ 41,352.41

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 Candidate

1 - 8 - 24

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 submit required reports in accordance with applicable statutes may result in the imposition of civil penalties of \$50 per day for a maximum of ten (10) calendar days and/or prosecution. Miss. Code Ann. §§ 23-15-811 and 813 (1972).

Candidates for Statewide, State District or Legislative Office file this Report with the Secretary of State to 401 Mississippi Street, Jackson, MS; P. O. Box 136, Jackson, MS 39205; fax (601) 576-2545; or email CampaignFinance@sos.ms.gov.

Candidates for county and/or county district office file this Report with their respective Circuit Clerk's Office.

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Name of Candidate or Committee	Shevre	2 come			
Reporting period	1 - 23	through 12-	31 - 23		

ITEMIZED DISBURSEMENTS

Disbursements from contributions accumulated Prior to January 1, 2018 of	On or After Ja	anuary 1, 2018
A. Full name Bennie Hanhin	Date (Mo., Day, Year)	Amount of each disbursement this period
Bennie Hankin Mailing Address 3 2 State Park Rd City, State, Zip Code	12 120123	s 605
City, State, Zip Code W 5 3 885 4 Purpose of Disbursement (Optional)		S
Purpose of Disbursement (Optional) Stevens of Carryone Matting B. Full name	Aggregate Year-to-date	\$ 600
	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		\$
City, State, Zip Code	//	S
Purpose of Disbursement (Optional)	Aggregate Year-to-date	S
C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		S
City, State, Zip Code	//	S
Purpose of Disbursement (Optional)	Aggregate Year-to-date	S
D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	//	S
City, State, Zip Code		S
Purpose of Disbursement (Optional)	Aggregate Year-to-date	S
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	//	S
City, State, Zip Code	//	S
Purpose of Disbursement (Optional)	Aggregate Year-to-date	S
F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		S
City, State, Zip Code	//	S
Purpose of Disbursement (Optional)	Aggregate Year-to-date	S