

Candidate's Committee  
**REPORT OF RECEIPTS AND DISBURSEMENTS**  
 2024 Annual Report

SECRETARY OF STATE  
**RECEIVED**  
 JAN 29 2025  
 Secretary of State  
 Capitol Office

Name of Candidate Committee to Elect Jason Barrett  
 Address PO Box 729 City/State/Zip Brookhaven MS 39602  
 Telephone (Work) 601-833-1177 (Home) \_\_\_\_\_ (Fax) \_\_\_\_\_  
 Contact Name Jason Barrett Email Address jason todd barrett@gmail.com  
 Office Sought Senate District 39

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) 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 Jan. 1, 2018, campaign contributions accepted and accumulated therefrom ARE subject to the "personal use" 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.
- (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 previous ran 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 PRIOR TO JANUARY 1, 2018**

JAN. 1, 2024 CASH ON HAND BALANCE			\$	<del>10,110</del> None
	Itemized (+)	Non-Itemized (=)		Calendar Year-to-Date
TOTAL AMT OF CONTRIBUTIONS <sup>1</sup>	\$	\$	\$	NONE
TOTAL AMT OF DISBURSEMENTS	\$	\$	\$	
DEC. 31, 2024 CASH ON HAND BALANCE			\$	

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

Name of Candidate or Committee Committee to Elect Jason Barrett

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>ALEC</u>		
Mailing Address	<u>2/7/24</u>	\$
City, State, Zip Code	<u>  /  /  </u>	\$
Purpose of Disbursement (Optional) <u>Membership</u>	Aggregate Year-to-date	\$ <u>\$200.00</u>
B. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Forward Strategies</u>		
Mailing Address	<u>3/5/24</u>	\$
City, State, Zip Code	<u>  /  /  </u>	\$
Purpose of Disbursement (Optional) <u>Invoice 1395</u>	Aggregate Year-to-date	\$ <u>2,110.00</u>
C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Bill Wallace</u>		
Mailing Address	<u>9/23/24</u>	\$ <del>  </del>
City, State, Zip Code	<u>  /  /  </u>	\$
Purpose of Disbursement (Optional) <u>Radio Advertisement</u>	Aggregate Year-to-date	\$ <u>200.00</u>
D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>LRFC</u>		
Mailing Address	<u>10/21/24</u>	\$
City, State, Zip Code	<u>  /  /  </u>	\$
Purpose of Disbursement (Optional) <u>Membership</u>	Aggregate Year-to-date	\$ <u>250.00</u>
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>TCS Events</u>		
Mailing Address	<u>12/5/24</u>	\$
City, State, Zip Code	<u>  /  /  </u>	\$
Purpose of Disbursement (Optional) <u>Fundraiser</u>	Aggregate Year-to-date	\$ <u>955.00</u>
F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u>  /  /  </u>	\$
City, State, Zip Code	<u>  /  /  </u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$

Name of Candidate or Committee Committee to Elect John Barrett

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>Committee for Clean Environment and Fair Taxation</u>	<u>11/19/24</u>	\$
Mailing Address <u>3000 B Jackson, MS 39216</u>	___/___/___	\$
City, State, Zip Code <u>Worcester State Street</u>	___/___/___	\$
Name of Employer (Required) <u>Comm. Hqs</u>	___/___/___	\$
Occupation (Required) <u>Comm. Hqs</u>	Aggregate year-to-date	\$ <u>500.<sup>00</sup></u>
B. Source: <input checked="" type="radio"/> Corporation <input 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>James Walker</u>	<u>11/19/24</u>	\$
Mailing Address <u>710 N. State St. Suite 300</u>	___/___/___	\$
City, State, Zip Code <u>Jackson, MS 39216</u>	___/___/___	\$
Name of Employer (Required)	___/___/___	\$
Occupation (Required)	Aggregate year-to-date	\$ <u>300.<sup>00</sup></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 Asphalt Contractor PAC</u>	<u>11/19/24</u>	\$
Mailing Address <u>711 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.<sup>00</sup></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>Core source Mission PAC</u>	<u>11/19/24</u>	\$
Mailing Address <u>65 E. State St. Ste 201</u>	___/___/___	\$
City, State, Zip Code <u>Columbus, OH 4321-4255</u>	___/___/___	\$
Name of Employer (Required)	___/___/___	\$
Occupation (Required)	Aggregate year-to-date	\$ <u>250.<sup>00</sup></u>

Name of Candidate or Committee Committee to Elect Jason Barrett

Reporting period 1-1-24 through 12-31-24

## ITEMIZED CONTRIBUTIONS

A. Source: <input checked="" type="radio"/> Corporation <input 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>Capital Advocacy</u>	<u>11/19/24</u>	\$
Mailing Address <u>PO Box 217</u>	___/___/___	\$
City, State, Zip Code <u>Jackson, MS</u>	___/___/___	\$
Name of Employer (Required) <u>Corp</u>	___/___/___	\$
Occupation (Required) <u>Corp</u>	Aggregate year-to-date	\$ <u>1,000.00</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>Melia and Scott Christensen</u>	<u>11/19/24</u>	\$
Mailing Address <u>24 Shady Creech Trl</u>	___/___/___	\$
City, State, Zip Code <u>Brookhaven, MS 39601</u>	___/___/___	\$
Name of Employer (Required) <u>KDMC</u>	___/___/___	\$
Occupation (Required) <u>CEU</u>	Aggregate year-to-date	\$ <u>1,000</u>
C. Source: <input checked="" type="radio"/> Corporation <input type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan Other (please specify) _____		
Full name <u>The Fredkin Group</u>	<u>11/19/24</u>	\$
Mailing Address <u>1375 Enclave Hwy</u>	___/___/___	\$
City, State, Zip Code <u>Houston, TX</u>	___/___/___	\$
Name of Employer (Required) <u>Corp.</u>	___/___/___	\$
Occupation (Required) <u>Corp.</u>	Aggregate year-to-date	\$ <u>500.00</u>
D. Source: <input checked="" type="radio"/> Corporation <input type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan Other (please specify) _____		
Full name <u>Exxon Mobil</u>	<u>11/19/24</u>	\$
Mailing Address <u>PO Box 7659</u>	___/___/___	\$
City, State, Zip Code <u>Spring, TX 77387</u>	___/___/___	\$
Name of Employer (Required) <u>Corp</u>	___/___/___	\$
Occupation (Required) <u>Corp</u>	Aggregate year-to-date	\$ <u>500.00</u>

Name of Candidate or Committee Committee to Elect Jason Barnett  
 Reporting period 1-1-24 through 12-31-24

## ITEMIZED CONTRIBUTIONS

A. Source: <input checked="" type="radio"/> Corporation <input 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 Strategies</u>	<u>11 / 19 / 24</u>	\$
Mailing Address <u>200 N. Congress St. Ste 403</u>	___ / ___ / ___	\$
City, State, Zip Code <u>Jackson MS 39201</u>	___ / ___ / ___	\$
Name of Employer (Required) <u>John Morgan Hayes</u>	___ / ___ / ___	\$
Occupation (Required) <u>Entrepreneur</u>	Aggregate year-to-date	\$ <u>500.<sup>00</sup></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>Friends of MS Hospitals</u>	<u>11 / 19 / 24</u>	\$
Mailing Address <u>116 Woodgreen Crossing</u>	___ / ___ / ___	\$
City, State, Zip Code <u>Madison MS 39110</u>	___ / ___ / ___	\$
Name of Employer (Required) <u>PAC</u>	___ / ___ / ___	\$
Occupation (Required) <u>PAC</u>	Aggregate year-to-date	\$ <u>500.<sup>00</sup></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>MS Railers</u>	<u>11 / 25 / 24</u>	\$
Mailing Address <u>Po Box 321000</u>	___ / ___ / ___	\$
City, State, Zip Code <u>Jackson MS 39232</u>	___ / ___ / ___	\$
Name of Employer (Required) <u>PAC</u>	___ / ___ / ___	\$
Occupation (Required) <u>PAC</u>	Aggregate year-to-date	\$ <u>1,000.<sup>00</sup></u>
D. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan Other (please specify) _____		
Full name <u>Blain and Bowen</u>	<u>11 / 26 / 24</u>	\$
Mailing Address <u>618 E. Weldon St.</u>	___ / ___ / ___	\$
City, State, Zip Code <u>Grinth MS 38834</u>	___ / ___ / ___	\$
Name of Employer (Required) <u>Nic Bain</u>	___ / ___ / ___	\$
Occupation (Required) <u>Attly</u>	Aggregate year-to-date	\$ <u>250.<sup>00</sup></u>

Name of Candidate or Committee \_\_\_\_\_

Reporting period \_\_\_\_\_ through \_\_\_\_\_

## ITEMIZED CONTRIBUTIONS

A. Source: <input type="radio"/> Corporation <input 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 Harper & Dailey Governmental Solutions	12/9/24	\$
Mailing Address 217 E. Capitol St. #2180	_/_/_	\$
City, State, Zip Code Jackson, MS	_/_/_	\$
Name of Employer (Required)	_/_/_	\$
Occupation (Required)	Aggregate year-to-date	\$ 250. <sup>00</sup>
B. Source: <input type="radio"/> Corporation <input 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 Mississippi Bail Agents Assoc.	12/9/24	\$
Mailing Address 116 Canton Ave Dr	_/_/_	\$
City, State, Zip Code Canton, MS	_/_/_	\$
Name of Employer (Required)	_/_/_	\$
Occupation (Required)	Aggregate year-to-date	\$ 500. <sup>00</sup>
C. Source: <input checked="" type="radio"/> Corporation <input 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 Dungan Engineering, PA	12/19/24	\$
Mailing Address 1574 Hwy 84E	_/_/_	\$
City, State, Zip Code Columbic MS 39429	_/_/_	\$
Name of Employer (Required) Engineer	_/_/_	\$
Occupation (Required) Engineer	Aggregate year-to-date	\$ 1,000. <sup>00</sup>
D. Source: <input type="radio"/> Corporation <input 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 MS Ind. Repair Store	12/19/24	\$
Mailing Address 921 E. Fortification St.	_/_/_	\$
City, State, Zip Code Jackson, MS 39201	_/_/_	\$
Name of Employer (Required)	_/_/_	\$
Occupation (Required)	Aggregate year-to-date	\$ 500. <sup>00</sup>

Name of Candidate or Committee Committee to Elect Jason Barrett  
 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>MAE-PAC</u>	<u>12/20/24</u>	\$
Mailing Address <u>1657 McFarland Blvd N. Ste</u>	___/___/___	\$
City, State, Zip Code <u>Tuscaloosa, AL 35406</u>	___/___/___	\$
Name of Employer (Required) <u>PAC</u>	___/___/___	\$
Occupation (Required) <u>PAC</u>	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>WMLPAC for Responsible Govt</u>	<u>12/23/24</u>	\$
Mailing Address <u>702 SW 8th St.</u>	___/___/___	\$
City, State, Zip Code <u>Baton Rouge, AR 70716</u>	___/___/___	\$
Name of Employer (Required)	___/___/___	\$
Occupation (Required)	Aggregate year-to-date	\$ <u>1,000.00</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>Financial Service Centers of MS PAC</u>	<u>12/23/24</u>	\$
Mailing Address <u>219 Canola Dr.</u>	___/___/___	\$
City, State, Zip Code <u>Morris Bay, LA 71374</u>	___/___/___	\$
Name of Employer (Required) <u>PAC</u>	___/___/___	\$
Occupation (Required) <u>PAC</u>	Aggregate year-to-date	\$ <u>250.00</u>
D. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input checked="" type="radio"/> Individual <input type="radio"/> Loan Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>W: I Ford Albert Payne</u>	<u>12/24/24</u>	\$
Mailing Address <u>PO Box 1267</u>	___/___/___	\$
City, State, Zip Code <u>Hattiesburg, MS 39403</u>	___/___/___	\$
Name of Employer (Required)	___/___/___	\$
Occupation (Required)	Aggregate year-to-date	\$ <u>500.00</u>

Name of Candidate or Committee Committee to Elect Jean Brett  
 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>MS Indipart Rx PAC</u>	<u>12</u> / <u>31</u> / <u>24</u>	\$
Mailing Address <u>4269 Lealand Dr Ste 399</u>	_ / _ / _	\$
City, State, Zip Code <u>Flowood MS</u>	_ / _ / _	\$
Name of Employer (Required)	_ / _ / _	\$
Occupation (Required)	Aggregate year-to-date	\$ <u>500</u>
B. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan Other (please specify) _____		
Full name	_ / _ / _	\$
Mailing Address	_ / _ / _	\$
City, State, Zip Code	_ / _ / _	\$
Name of Employer (Required)	_ / _ / _	\$
Occupation (Required)	Aggregate year-to-date	\$
C. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan Other (please specify) _____		
Full name	_ / _ / _	\$
Mailing Address	_ / _ / _	\$
City, State, Zip Code	_ / _ / _	\$
Name of Employer (Required)	_ / _ / _	\$
Occupation (Required)	Aggregate year-to-date	\$
D. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan Other (please specify) _____		
Full name	_ / _ / _	\$
Mailing Address	_ / _ / _	\$
City, State, Zip Code	_ / _ / _	\$
Name of Employer (Required)	_ / _ / _	\$
Occupation (Required)	Aggregate year-to-date	\$