2023 ELECTION CYCLE

Candidate's Committee REPORT OF RECEIPTS AND DISBURSEMENTS 2023 Election

PIKE COUNTY, MISS.

MAY 0 5 2023

CIRCUIT CLERK

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Name of Committee WE THE PEOPLE	F TO ELECT CLAYTON C. Guy	/-
Address 1063 ST. MARY DRIVE	City/Zip MAGNOLIA, MS	39692
Telephone (601)814-9659	Fax	
Treasurer JULIE GUY	Email Address Claytonguy	g mail, com
Treasurer JULIE GUY JUSTICE COURT JUDGE Office Sought Southern DISTRICT PIKE COUNTY, MS	Party Affiliation INDEPEND	
☐ Check here if above is different from	previous report	
	TYPE OF REPORT	
May 10, 2023 Periodic Report (January 1, 2023 t	through April 30, 2023)	Mandatory
June 9, 2023 Periodic Report (May 1, 2023 throu	igh May 31, 2023)	Mandatory
July 10, 2023 Periodic Report (June 1, 2023 thro	ugh June 30, 2023)	Mandatory
August 1, 2023 Primary Pre-Election Report (Ju	uly 1, 2023 through July 29, 2023)	Mandatory
August 22, 2023 Primary Pre-Runoff Report (Ju	uly 30, 2023 through August 19, 2023)	Runoff Candidates Only
October 10, 2023 Periodic Report (July 1, 2023	through September 30, 2023)	Mandatory
October 31, 2023 Pre-Election Report (October	1, 2023 through October 29, 2023)	Mandatory
November 21, 2023 Pre-Runoff Report (October	r 30, 2023 through November 19, 2023)	Runoff Candidates Only
January 10, 2024 Periodic Report (October 1, 20	023 through December 31, 2023)	Mandatory
Termination Report (Committee will no longer a expenditures, has no outsta	eccept contributions, make campaign anding campaign debt obligation)	Required to terminate reporting obligations
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IMPORTANT

- (1) All candidates for office, and their political committees if organized as such, 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 committee 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.
- (3) Until a committee 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

- 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.
- (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			S -0	
	Itemized (+)	Non-Itemized (=)	This Period	Calendar Year-to-Date
TOTAL AMT OF CONTRIBUTIONS	s -0-	\$ 0	s -0	s -0
TOTAL AMT OF DISBURSEMENTS	s 🛷	\$ 0	8-0	\$.
CASH ON HAND BALANCE				\$ -

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

JAN. 1, 2023 CASH ON HAND BALANCE			s -0	
TOTAL AMT OF CONTRIBUTIONS	Itemized (+) \$ 1090,00	Non-Itemized (=)	This Period \$ 10 90.00	Calendar Year-to-Date
TOTAL AMT OF DISBURSEMENTS	\$1035.23	s -0	\$1035,23	\$ 1035.23
CASH ON HAND BALANCE				\$ 54.77

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 Director or Treaturer

05-05-23

Date

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).

Political Committees supporting or opposing Statewide, State District or Legislative Candidates file this form 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. Political Committees supporting or opposing county and/or county district candidates file this form with the Circuit Clerk's Office.

Name of Candidate or Committee WE THE PEOPLE TO ELECT CLOydon C Guy, Justice Court Judge Reporting period JANUARY 012023 through MAY 10, 2023

ITEMIZED RECEIPTS

A. Source: Ocorporation OPAC Mindustrial Court Judge Court J

A. Source: OCorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name NANCY G. MILLER	02/14/23	\$ 800,00
Mailing Address 17452 LOUERS LANE		s
City, State, Zip Code GORDONSUNIE, VA 22942-8133 Name of Employer (Required)	_/_/_	s
Name of Employer (Required) MICHAEL J. WILLER / NANCY G. MILLER	_'_'_	S
Occupation (Required) AHORNEY AT LAW	Aggregate year-to-date	\$800,00
B. Source: OCorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
CLIFFORD D. DEMERS	03 122/23	s 250, a
Mailing Address 2194 Hwy 48 EAST		s
City, State, Zip Code MAGNOLIA, MS 39652		s
Name of Employer (Required) LEVRON - RETIRED		\$
Occupation (Required) R∈ TIR € D	Aggregate year-to-date	\$ 250,00
C. Source: Ocorporation OPAC Mindividual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Michelle Goy	05 105 123	\$ 40,00
Mailing Address 2111 Somment HOC MESUILLE	_'_'_	S
City, State, Zip Code McCowB, MS. 39652		\$
Name of Employer (Required) TENTRR	_'_'_	\$
Occupation (Required) SELF- CONTractoR - BOOKING AgeN	Aggregate year-to-date	\$ 40,00
D. Source: OCorporation OPAC OIndividual OLoan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify) Full name	1 1	\$
Mailing Address		s
City, State, Zip Code		s
Name of Employer (Required)		s
Occupation (Required)	Aggregate year-to-date	S

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ITEMIZED DISBURSEMENTS

A. Full name	Date	nuary 1, 2018 Amount of each
PIKE COUNTY MISSISSIPPI	(Mo., Day, Year)	disbursement this period
Mailing Address	02/09/23	\$
175 South Cherry ST., MAGNOLIA, MS 39652	<u></u>	58,63
Store Vin Code	1_1_1_	S
Purpose of Disbursement (Optional)		S
Purpose of Disbursement (Optional)	Aggregate Year-to-date	58.63
ELECTRONIC VOTERROLL - INVOICE #99		Amount of each
. Full name	Date (Mo., Day, Year)	disbursement this period
THE ENTERPRISE JOURNAL		S
Vailing Address	03/15/23	555,00
112 CLIVER CHAMERIE		S
Mc Comb MS., 39648 - INVOICE 000004	_'_'_	
Purpose of Disbursement (Optional)	Aggregate	\$ 00
POLICAL CALENDAR AND VETERANS AD	Year-to-date	\$555. <u>°</u>
	Date	Amount of each
A.G. E. GRAPHICS, LLC-(740-989)-0006	(Mo., Day, Year)	disbursement this period
Mailing Address	03/3/123	\$
52231 STATE ROUTE 248	03/2/123	61.60
City, State, Zip Code	1 1	\$
LONG BOHOM, OH 45743	_'-'-	
Purpose of Disbursement (Optional)	Aggregate	\$ // (0
(1000) BUSINESS CARDS	Year-to-date	61.60
D. Full name	Date	Amount of each
BRITNEY GIVENS	(Mo., Day, Year)	disbursement this period
Mailing Address	04107123	\$ 250. €
3152 Summit HOLMESUILLE ROAD		250
City State 7 in Cade	1 1	S
Mc Com B, M5, 39648 (10-5hirts)		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 250, 00
Polytical T-SHIRTS INVOICE #1289-3		
E. Full name	(Mo., Day, Year)	Amount of each disbursement this period
THE ENTERPRISE JOURNAL	-1	6
Mailing Address	04/10/23	1/0,00
1/2 OLIVER EMMERICH DRIVE		s
City, State, Zip Code Mc ComB, MS., 39648	_/_/_	
Mc ComB, MS.1 39648	Aggragata	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	110, =
Political AD / SmokiNG ONTRACKS AD	Date	Amount of each
F. Full name	(Mo., Day, Year)	disbursement this period
Malling 1 ddysge		S
Mailing Address	_'_'_	
City, State 7in Code	97 20	S
City, State, Zip Code	_'_'_	
Power of Dichargement (Ontional)	Aggregate	S
Purpose of Disbursement (Optional)	Year-to-date	