2023 ELECTION CYCLE



Name of Candidate Denny So	hasin		
Address P.O. Box 1019		City/Zip Samut 1/8	39klele
Telephone (Work) 601-246-7246 (F	Home)	(Fax)	
Contact Name	Email Address		
Office Sought Constable N. Dita	Political Party (if any)	2epublican	-
☐ Check here if above is different fr	om previous report		
	TYPE OF REPORT		
May 10, 2023 Periodic Report (January 1, 20	23 through April 30, 2023)	N	Jandatory
June 9, 2023 Periodic Report (May 1, 2023 th	hrough May 31, 2023)	N	Aandatory
July 10, 2023 Periodic Report (June 1, 2023	through June 30, 2023)	N	Andatory
August 1, 2023 Primary Pre-Election Repor	t (July 1, 2023 through July 29, 2023	i)	Tandatory
August 22, 2023 Primary Pre-Runoff Repor	t (July 30, 2023 through August 19,	2023)Runoff Candid	lates Only
October 10, 2023 Periodic Report (July 1, 20	23 through September 30, 2023)		Aanda tory
October 31, 2023 Pre-Election Report (Octo	ber 1, 2023 through October 29, 202	3)	Aanda tory
November 21, 2023 Pre-Runoff Report (Oct	ober 30, 2023 through November 19,	, 2023)Runoff Candid	dates Only
January 10, 2024 Periodic Report (October	1, 2023 through December 31, 2023)		landatory
Termination Report (Committee will no long expenditures, has no o	er accept contributions, make campa utstanding campaign debt obligation	ign Required to reporting ob	

IMPORTANT

- (1) All candidates for office shall file periodic reports in the year in which they are to be elected.
- 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.
- (3) 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 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				\$	
	Itemized (+)	Non-Itemized (=)	This Period	Calendar Year-to-Date	
TOTAL AMT OF CONTRIBUTIONS	\$	\$	\$	S	
	Market Spiece				
TOTAL AMT OF DISBURSEMENTS	\$	S	\$	\$	
CASH ON HAND BALANCE	2 2 3 6 2 2 3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			\$	

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

JAN. 1, 2023 CASH ON HAND BALAN	ICE	annersaga aran camun ang Belasa nasa s		\$
			E ATTENDED	一种人们的
	Itemized (+)	Non-Itemized (=)	This Period	Calendar Year-to-Date
TOTAL AMT OF CONTRIBUTIONS	\$ -	\$ 0	s =	5 -0
		CARLES WAS IN		
TOTAL AMT OF DISBURSEMENTS	\$ -3	\$ 0	\$ -0	\$
				Carlotta en
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.

Signature of Candidate

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.

	Page	of
Name of Candidate or Committee		
Reporting period	through	
ITEMIZED I	DISBURSEMENTS	S
Disbursements from contributions accumulated Pri	ior to January 1, 2018 or 🎑 On or After Ja	nuary 1, 2018
A. 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
B. 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
C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
failing Address	_/_/_	s
City, State, Zip Code		s
'urpose of Disbursement (Optional)	Aggregate Year-to-date	S
). 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
. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		s
City, State, Zip Code		s

Purpose of Disbursement (Optional)

Purpose of Disbursement (Optional)

F. Full name

Mailing Address

City, State, Zip Code

S

5

\$

\$

Amount of each

disbursement this period

Aggregate Year-to-date

Date

(Mo., Day, Year)

Aggregate Year-to-date

	Page _	of
Name of Candidate or Committee	22	
Reporting periodthrough		
ITEMIZED REC	CEIPTS	
A. Source: OCorporation OPAC OIndividual OLoan	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)		\$
Mailing Address		s
City, State, Zip Code		S
Name of Employer (Required)	_/_/_	s
Occupation (Required)	Aggregate year-to-date	S
B. Source: OCorporation OPAC OIndividual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name		S
Mailing Address		S
City, State, Zip Code		s
Name of Employer (Required)		\$
Occupation (Required)	Aggregate year-to-date	s
C. Source: Ocorporation OPAC OIndividual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name		s
Mailing Address		S
City, State, Zip Code	_/_/_	S
Name of Employer (Required)	_/_/_	s
Occupation (Required)	Aggregate yearto-date	s
D. Source: OCorporation OPAC OIndividual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name		s
Mailing Address		s
City, State, Zip Code	1 1	s

Name of Employer (Required)

Occupation (Required)

\$

\$

Aggregate year–to-date