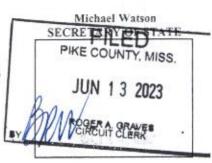
Candidate REPORT OF RECEPTS AND DISBURSEMENTS 2023 Election



Name of Candidate Bryant "Wally" Jones	tw.
Address 2134 45 Hwy 51 North	ity/Zip Sunn'. + 39666
· · · · · · · · · · · · · · · · · · ·	Fax)
Contact Name Bryant "Wally" Jones Email Address Pikel	County Colonelly GADD. LO
Office Sought Sheciff Political Party (if any)	
Check here if above is different from previous report TYPE OF REPORT	
May 10, 2023 Periodic Report (January 1, 2023 through April 30, 2023)	Mandatory
June 9, 2023 Periodic Report (May 1, 2023 through May 31, 2023)	
July 10, 2023 Periodic Report (June 1, 2023 through June 30, 2023)	
August 1, 2023 Primary Pre-Election Report (July 1, 2023 through July 29, 2023)	Mandatory
August 22, 2023 Primary Pre-Runoff Report (July 30, 2023 through August 19, 2	023)Runoff Candidates Only
October 10, 2023 Periodic Report (July 1, 2023 through September 30, 2023)	
October 31, 2023 Pre-Election Report (October 1, 2023 through October 29, 2023)Mandatory
November 21, 2023 Pre-Runoff Report (October 30, 2023 through November 19,	2023)Runoff Candidates Only
January 10, 2024 Periodic Report (October 1, 2023 through December 31, 2023) .	
Termination Report (Committee will no longer accept contributions, make campai expenditures, has no outstanding campaign debt obligation)	gn Required to terminate reporting obligations

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.
- (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 2023

JAN. 1, 2023 CASH ON HAND BALANCE			S 0	
	Itemized (+)	Non-Itemized (=)	This Period	Calendar Year-to-Date
TOTAL AMT OF CONTRIBUTIONS	\$ /	\$ /	s /	s /
	Department of the		red of the later of	
TOTAL AMT OF DISBURSEMENTS	s /	s /	s /	S /
		· 在 · · · · · · · · · · · · · · · · · ·		建筑 发电子
CASH ON HAND BALANCE				S /

REPORTED CONTRIBUTIONS AND DISBURSEMENTS FROM CAMPAIGN CONTRIBUTIONS ACCUMULATED AFTER JANUARY 1, 2018 2043

THE RESERVE THE PARTY OF THE PA	Itemized (+)	Non-Itemized (=)	This Period	Calendar Year-to-Date
TOTAL AMT OF CONTRIBUTIONS	\$ 3469. 43	\$ 0	\$ 3469.43	\$ 12,470.19
TOTAL AMT OF DISBURSEMENTS	\$ 1240.54	\$ 0	\$ 1240.54	\$ 9567. 12

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

Brush for Signature of Candidate	06/09/23
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.

Name of Candidate or Committee Bryant "Wally"	Jones	
Reporting period 05/01/2023 through	05/31/4043	
İTEMIZED REC	CEIPTS	
A. Source: Corporation PAC Individual Loan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Shandy Law Firm	05/10/23	\$ 200.00
Address 2009 Shawnee Dr.	_'_'_	5 /
City, State, Zip Code McComb, MS 39666		5 /
Name of Employer (Required) Tyler Shandy		s /
Occupation (Required)	Aggregate year–to-date	\$ 200,00
B. Source: OCorporation OPAC Individual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name		\$
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 year-to-date	s
O. Source: OCorporation OPAC OIndividual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	//_	s
Vailing Address	tt	s
City, State, Zip Code		s
Name of Employer (Required)		s
Occupation (Required)	Aggregate year-to-date	S

Name of Candidate or Committee B(yant "Wally" Jones

OSIDII 2003 through 05/31/4003

ITEMIZED RECEIPTS

A. Source: OCorporation OPAC AIndividual OLoan		Amount of each
Other (please specify)	(Mo., Day, Year)	receipt this period
Full name Sam Bell	05/01/23	\$ 100.00
Mailing Address 314 Edga(St.		s /
City, State, Zip Code McConb, M5, 39648		\$ /
Name of Employer (Required)		s /
Occupation (Required) Ref.(ed	Aggregate year–to-date	\$ 100.00
B. Source: Corporation OPAC OIndividual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Thrift Auto Sales	05/10/23	969.43
Mailing Address 406 West Presley Blvd		5 /
City, State, Zip Code Mclomb ms. 39648		8 /
Name of Employer (Required)		s /
Occupation (Required) Self-Employed	Aggregate year-to-date	969.43
C. Source: Ocorporation OPAC OIndividual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Jeff Daughdrill	05/06/03	\$ 200.00
1103 Beavel Cleek Rd		5 /
City, State, Zip Code Sharit, MS, 39666		5
Name of Employer (Required)		s /
Occupation (Required) Reticed	Aggregate year-to-date	\$ 200.00
D. Source: OCorporation OPAC OIndividual OLoan Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Keith & Karen Sanders	05/27/23	\$ 2,000.00
Mailing Address 1074 Oak leich Dr.	//	5
City, State, Zip Code City, State, Zip Code City, State, Zip Code McCobb m5, 39648 Name of Employer (Required)		s /
Name of Employer (Required)	//	s /
Occupation (Required) Ref. ced	Aggregate year-to-date	\$ 2.000.00

	Page	l of 1
Name of Candidate or Committee Bryant "Wally"	Jones	
1 1	rough 05/31/200	3
ITEMIZED DISB	URSEMENTS	3
Disbursements from contributions accumulated Prior to Januar	ry 1. 2018 or Von or After Ja	الرواية nuary 1, 2018
A. Full name	~ _	62
Lowes	(Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1802 Pikes Pt. Cr.	05/19/23	300.00
City, State, Zip Code MLlbmb, ms, 3964B		s
Purpose of Disbursement (Optional) T-PDS+	Aggregate Year-to-date	\$ 200.00
Jeff Canton	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 2132 US Highway 51 North	<u>05/24/23</u>	\$ 200.00
Shanit ms 39666		S
Purpose of Disbursement (Optional)	Aggregate Year-to-date	300.00
Gator Granzix	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1020 Macey Andrews Rd.	06/06/23	840.54
City, State, Zip Code Mclomb, M5, 39648 Purpose of Disbursement (Optional)		S
Signs	Aggregate Year-to-date	s 1422.54
D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	_'_'_	S
City, State, Zip Code	_1_1_	S
Purpose of Dishursement (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 Distursement (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	\$