

REPORT OF RECEIPTS AND DISBURSEMENTS



FILED
PIKE COUNTY, MS
MAY 03 2019
ROBERT A. GRAVES
CIRCUIT CLERK

Name of Candidate Sheriff Kenny Cotton
Address 2109 Jesse Hall Rd City/Zip Magnolia Ms
Telephone (Work) 601 783 6767 (Home) 601 810 5461 (Fax) 601 783-6586
Contact Name Kenny Cotton Email Address kenny.cotton19@gmail.com
Office Sought Sheriff Political Party (if any) Democratic

Check here if above is different from previous report

TYPE OF REPORT

- May 10, 2019 Periodic Report (January 1, 2019 through April 30, 2019) Mandatory
- June 10, 2019 Periodic Report (May 1, 2019 through May 31, 2019) Mandatory
- July 10, 2019 Periodic Report (June 1, 2019 through June 30, 2019) Mandatory
- July 30, 2019 Primary Pre-Election Report (July 1, 2019 through July 27, 2019) Mandatory
- August 20, 2019 Primary Pre-Runoff Report (July 28, 2019 through August 17, 2019) Runoff Candidates Only
- October 10, 2019 Periodic Report (July 1, 2019 through September 30, 2019) Mandatory
- October 29, 2019 Pre-Election Report (October 1, 2019 through October 26, 2019) Mandatory
- November 19, 2019 Pre-Runoff Report (October 27, 2019 through November 16, 2019) Runoff Candidates Only
- January 10, 2020 Periodic Report (October 1, 2019 through December 31, 2019) Mandatory
- Termination Report (Committee will no longer accept contributions, make campaign expenditures, has no outstanding campaign debt obligation and zero cash on hand balance) 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"

Name of Candidate or Committee Kenny Cotton
 Reporting period Jan 01, 2019 through April 30, 2019

ITEMIZED DISBURSEMENTS

A. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Pike County Circuit Clerk / Democrat Party	01/02/2019	\$ 100.00
Mailing Address		
City, State, Zip Code		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 100.00
Qualify Fee		
B. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Stewart Signs	01/25/2019	\$ 166.92
Mailing Address		
City, State, Zip Code	03/31/2019	\$ 64.20
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 231.12
Campaign Stickers		
C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Latasha Williams	01/24/2019	\$ 100.00
Mailing Address		
City, State, Zip Code		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 100.00
Radio Ads		
D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Allan J. Voisei / Ole Guy Sign Shop / AKA Permit	06/15/2018	\$ 100.00
Mailing Address		
City, State, Zip Code	12/27/2019	\$ 909.50
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 1009.50
Campaign Signs		
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Enterprise - Journal Newspaper	01/30/19	\$ 500.00
Mailing Address		
City, State, Zip Code		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 500.00
Campaign Ads		
F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Lowes Store	2/26/2019	\$ 49.54
Mailing Address		
City, State, Zip Code		
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
Ad Signs Poles		

Total \$1940.62

Name of Candidate or Committee Kenny Cotton
 Reporting period JAN 1, 2019 through April 30, 2019

ITEMIZED DISBURSEMENTS

A. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Lowe's Home Centers		
Mailing Address 1802 Pikes Point Circle	01/30/2019	\$ 229.69
City, State, Zip Code McComb, MS 39648	03/30/19	\$ 57.46
Purpose of Disbursement (Optional) Camp Sign Posts	Aggregate Year-to-date	\$ 287.15
B. Full name Harbor Freight Tools	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 1627 DELAWARE AVE	1/29/19	\$ 12.04
City, State, Zip Code McComb MS 39648	4/30/19	\$ 14.72
Purpose of Disbursement (Optional) Ties for signs	Aggregate Year-to-date	\$ 26.76
C. Full name Handfans - Direct.com / TJM Promos	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 511 N.W. 48th Terr	01/31/2019	\$ 621.50
City, State, Zip Code Deala, Florida 34482	___/___/___	\$
Purpose of Disbursement (Optional) Campaign Ads fans	Aggregate Year-to-date	\$ 621.50
D. Full name WAZZ Radio	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address STATE ST	03/08/2019	\$ 150.00
City, State, Zip Code McComb, MS 39648	___/___/___	\$
Purpose of Disbursement (Optional) Campaign Ad	Aggregate Year-to-date	\$ 150.00
E. Full name Vista Print	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address Online Purchase	3/28/2019	\$ 179.90
City, State, Zip Code Order # 3R9F3-85A71-463	___/___/___	\$
Purpose of Disbursement (Optional) Political Cards	Aggregate Year-to-date	\$ 179.90
F. Full name Vista Print	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address Online	3/30/19	\$
City, State, Zip Code Order # 3R9F3-85A71-463	___/___/___	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$

Total \$1264.61 06

Name of Candidate or Committee Kenny Cotton
 Reporting period Jan 1, 2019 through April 30 2019

ITEMIZED DISBURSEMENTS

A. Full name <u>Stewart Signs</u>	Date (Mo., Day, Year) <u>04/12/19</u>	Amount of each disbursement this period \$ <u>745.75</u>
Mailing Address <u>2109 Hwy 48 West</u>		
City, State, Zip Code <u>McComb, MS 39648</u>	___/___/___	\$
Purpose of Disbursement (Optional) <u>Campaign Signs</u>	Aggregate Year-to-date	\$
B. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	___/___/___	\$
City, State, Zip Code	___/___/___	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	___/___/___	\$
City, State, Zip Code	___/___/___	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	___/___/___	\$
City, State, Zip Code	___/___/___	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	___/___/___	\$
City, State, Zip Code	___/___/___	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	___/___/___	\$
City, State, Zip Code	___/___/___	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$

\$ 745.75 SS04-06

Name of Candidate or Committee Kenny Cotton

Reporting period JAN 1, 2019 through April 30, 2019

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Loan <input type="checkbox"/>	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify) _____		
Full name <u>Mr & Mrs Willie L. Jackson</u>	<u>12/06/18</u>	\$ <u>100.00</u>
Mailing Address <u>2442 White Water Ave SE 734-6884</u>	<u>12/29/2018</u>	\$ <u>100.00</u>
City, State, Zip Code <u>Boone City, MS 39629</u>	<u>01/25/2018</u>	\$ <u>100.00</u>
Name of Employer (Required) <u>Self Georgia Pacific</u>	<u>01/30/2018</u>	\$ <u>75.00</u>
Occupation (Required) <u>Operation Mgr</u>	Aggregate year-to-date	\$ _____
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Loan <input type="checkbox"/>	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify) _____		
Full name <u>SAME</u>	<u>02/05/2018</u>	\$ <u>75.00</u>
Mailing Address	<u>03/15/2018</u>	\$ <u>100.00</u>
City, State, Zip Code	____/____/____	\$ _____
Name of Employer (Required)	____/____/____	\$ _____
Occupation (Required)	Aggregate year-to-date	\$ <u>550.00</u>
C. Source <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Loan <input type="checkbox"/>	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify) _____		
Full name <u>Plantation Calendars / Melanie & Nichols</u>	<u>01/23/2019</u>	\$ <u>1500.00</u>
Mailing Address <u>7903 Huckleberry LN</u>	<u>4/21/19</u>	\$ <u>200.00</u>
City, State, Zip Code <u>Summit, MS 39666-7125</u>	____/____/____	\$ _____
Name of Employer (Required) <u>Self</u>	____/____/____	\$ _____
Occupation (Required) <u>Sale Advertisement</u>	Aggregate year-to-date	\$ <u>1700.00</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/>	Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify) _____		
Full name <u>Hard Hats Direct.com / TIM Pinos</u>	____/____/____	\$ <u>621.50</u>
Mailing Address <u>571 N.W. 48th Terr.</u>	____/____/____	\$ _____
City, State, Zip Code <u>Ocala, Florida 34482</u>	____/____/____	\$ _____
Name of Employer (Required) <u>TIM Pinos</u>	____/____/____	\$ _____
Occupation (Required) <u>Hard Hats Advertisement Pns</u>	Aggregate year-to-date	\$ _____

\$2250.00

Name of Candidate or Committee Kenny Cotton
 Reporting period Jan 1, 2019 through April 30, 2019

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Loan <input type="checkbox"/>		Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify) _____			
Full name	<u>Mr. Lester Swanigan & Mary Swanigan</u>	<u>2/22/2019</u>	\$ <u>200.00</u>
Mailing Address	<u>1004 Sid Nash Road</u>		\$ _____
City, State, Zip Code	<u>Summit, MS 39660</u>		\$ _____
Name of Employer (Required)	<u>Retired</u>		\$ _____
Occupation (Required)		Aggregate year-to-date	\$ <u>200.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Loan <input type="checkbox"/>		Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify) _____			
Full name	<u>Mike Singh</u>	<u>1/14/2019</u>	\$ <u>250.00</u>
Mailing Address	<u>329 S. Locust Street</u>		\$ _____
City, State, Zip Code	<u>McComb MS 39648</u>		\$ _____
Name of Employer (Required)	<u>Self</u>		\$ _____
Occupation (Required)	<u>Business owner</u>	Aggregate year-to-date	\$ <u>250.00</u>
C. Source <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input checked="" type="checkbox"/> Loan <input type="checkbox"/>		Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify) _____			
Full name	<u>Dr. NAZI</u>	<u>4/25/19</u>	\$ <u>250.00</u>
Mailing Address	<u>120th 5th Ave</u>		\$ _____
City, State, Zip Code	<u>McComb MS 39648</u>		\$ _____
Name of Employer (Required)	<u>Self</u>		\$ _____
Occupation (Required)	<u>Doctor</u>	Aggregate year-to-date	\$ <u>250.00</u>
D. Source: <input type="checkbox"/> Corporation <input checked="" type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/>		Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify) _____			
Full name	<u>Forecomm Solutions LLC</u>	<u>4/16/19</u>	\$ <u>2500.00</u>
Mailing Address	<u>37270 Swamp Rd</u>		\$ _____
City, State, Zip Code	<u>Prattville, LA 70769-3820</u>		\$ _____
Name of Employer (Required)	<u>Ty Foreman</u>		\$ _____
Occupation (Required)	<u>CEO</u>	Aggregate year-to-date	\$ <u>2500.00</u>

3650.00

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.

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

JAN. 1, 2019 CASH ON HAND BALANCE				\$
	Itemized (+)	Non-Itemized (=)	This Period	Calendar Year-to-Date
TOTAL AMT OF CONTRIBUTIONS ¹	\$	\$	\$	\$
TOTAL AMT OF DISBURSEMENTS	\$	\$	\$	\$
CASH ON HAND BALANCE				\$

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

JAN. 1, 2019 CASH ON HAND BALANCE				\$
	Itemized (+)	Non-Itemized (=)	This Period	Calendar Year-to-Date
TOTAL AMT OF CONTRIBUTIONS	\$ 5900.00	\$ 100.00	\$ 6000.00	\$ 6000.00
TOTAL AMT OF DISBURSEMENTS	\$ 3950.98	0	\$ 3950.98	\$ 3950.98
CASH ON HAND BALANCE				\$ 2049.02

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

3 May 2019
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.

¹ Contributions to pre-Jan. 1, 2018 campaign funds are limited to interest and dividends earned upon pre-Jan. 1, 2018 monies. SOS 01-2019