



Candidate
REPORT OF RECEIPTS AND DISBURSEMENTS
 2021 Municipal Election *3-30-21 amm*

Name of Candidate Charlie Hoots
 Address 2243 Carrollton Cove City/State/Zip Southaven, Ms 38671
 Telephone (Work) 901-870-0676 (Home) _____ (Fax) _____
 Contact Name Charlie Hoots Email Address Charliehoots@yahoo.com
 Office Sought Southaven Alderman Ward 2 Political Party (if any) Republican

Check here if above information is different from previous report

TYPE OF REPORT

- Tuesday, March 30, 2021 (January 1, 2021 through March 27, 2021) **Primary Pre-Election Report**
- Tuesday, April 20, 2021 (March 28, 2021 through April 17, 2021) **Primary Pre-Runoff Election Report**
- Tuesday, June 1, 2021 (January 1, 2021 through May 29, 2021*) **General Pre-Election Report**
- Monday, January 31, 2022 (January 1, 2021 through December 31, 2021) **Annual Report**
- Termination Report** (Candidate will no longer accept contributions or make campaign expenditures and has no outstanding campaign debt obligation) **Required to terminate reporting obligations**

IMPORTANT

- (1) *For candidates who filed the Primary Pre-Election Report, the reporting period for the Pre-Election Report due Tuesday, June 1, 2021 is March 28, 2021 through May 29, 2021.
- (2) Pre-Election Reports are mandatory, even if no contributions were received or expenditures made during this period. In such case, the candidate shall submit a report indicating "0" (zero) for total amount of reported contributions and expenditures during this period. Unopposed candidates are not required to file Pre-Election Reports.
- (3) Annual Reports are mandatory, unless a candidate has filed a Termination Report prior to December 31, 2021.
- (4) File with your Municipal Clerk's Office. The Municipal Clerk must be in actual receipt of the required reports by 5:00 p.m. on the reporting day. 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. Reports may be hand delivered, mailed, faxed, or e-mailed.

REPORTED CONTRIBUTIONS AND DISBURSEMENTS

	Itemized	+	Non-Itemized	This Period	Calendar year-to-date
Total amount of contributions \$	3,500.00	+\$	400.00	\$ 3,900.00	\$ 3,900.00
Total amount of disbursements \$	2,221.32	+\$	525.00	\$ 2,746.32	\$ 2,746.32
Total amount of cash on hand				\$ 1,153.68	

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

Charlie Hoots

 Signature of Candidate

03-29-2021

 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. Miss. Code Ann. § 23-15-811 (1972).

Name of Candidate or Committee Charlie Hoots Alderman Ward 2
 Reporting period January 1, 2021 through March 27, 2021

ITEMIZED RECEIPTS

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 <u>Gary Murphy</u>	<u>01</u> <u>21</u> <u>21</u>	\$ 2,000.00
Mailing Address <u>4197 Swinnea</u>	__ / __ / __	\$
City, State, Zip Code <u>Southaven, Ms 38672</u>	__ / __ / __	\$
Name of Employer (Required) <u>Murphy Construction</u>	__ / __ / __	\$
Occupation (Required) <u>Contractor</u>	Aggregate year-to-date	\$ 2,000.00
B. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan Other (please specify) _____		
Full name <u>Fadi Salameh</u>	<u>01</u> <u>21</u> <u>21</u>	\$ 1,000.00
Mailing Address <u>6768 CASSIDY DR</u>	__ / __ / __	\$
City, State, Zip Code <u>Walls, Ms</u>	__ / __ / __	\$
Name of Employer (Required) <u>Raceway</u>	__ / __ / __	\$
Occupation (Required) <u>Store Owner</u>	Aggregate year-to-date	\$ 1,000.00
C. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan Other (please specify) _____		
Full name <u>Lehman Roberts</u>	<u>01</u> <u>21</u> <u>21</u>	\$ 500.00
Mailing Address <u>P.O. Box 1603</u>	__ / __ / __	\$
City, State, Zip Code <u>Memphis, Tn 38101</u>	__ / __ / __	\$
Name of Employer (Required)	__ / __ / __	\$
Occupation (Required)	Aggregate year-to-date	\$ 500.00
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	\$

Name of Candidate or Committee Charlie Hoots Alderman Ward 2

Reporting period _____ through _____

ITEMIZED DISBURSEMENTS

Disbursements from contributions accumulated Prior to January 1, 2018 or On or After January 1, 2018

A. Full name Fox Graphics	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 2881 Hwy 305	01 / 20 / 21	\$ 1,486.23
City, State, Zip Code Hernando, Ms 38632	__ / __ / __	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
B. Full name Fox Graphics	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 2881 Hwy 305	03 / 19 / 21	\$ 735.09
City, State, Zip Code Hernando, Ms 38632	__ / __ / __	\$
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	\$