



Candidate
REPORT OF RECEIPTS AND DISBURSEMENTS
 2021 Municipal Election

SECRETARY OF STATE

RECEIVED MAR 23 2021

AF

DATE STAMP

Name of Candidate SCOTTY FERGUSON
 Address 3495 SUMMERWOOD LN City/State/Zip OLIVE BRANCH MS 38654
 Telephone (Work) NA (Home) 901-590-6232 (Fax) _____
 Contact Name SCOTT FERGUSON Email Address feng@bellsouth.net
 Office Sought ALDERMAN WARD 5 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 \$	<u>275.00</u>	+	\$	<u>275.00</u>	<u>275.00</u>
Total amount of disbursements \$	<u>3994.11</u>	+	\$		<u>-3994.11</u>
Total amount of cash on hand			\$	<u>0</u>	

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

Scotty Ferguson
 Signature of Candidate

03-23-2021
 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 Scotty Ferguson

Reporting period _____ through _____

ITEMIZED RECEIPTS – IN-KIND CONTRIBUTIONS

A. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input checked="" type="radio"/> Individual <input type="radio"/> Loan <input type="radio"/> Other (please specify) _____		Date (Mo., Day, Year)
Full name <u>Mark A. Hert</u>		<u>02/06/21</u>
Mailing Address <u>4578 Westminister Circle</u>		Estimated Amount of In-Kind Contribution*
City, State, Zip Code <u>Southaven MS, 38671</u>		
Name of Employer (Required)		\$ <u>175.00</u>
Occupation (Required)		

In-Kind Description:
CASH

B. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input checked="" type="radio"/> Individual <input type="radio"/> Loan <input type="radio"/> Other (please specify) _____		Date (Mo., Day, Year)
Full name <u>GAIL CROCKETT</u>		<u>03/02/21</u>
Mailing Address		Estimated Amount of In-Kind Contribution*
City, State, Zip Code		
Name of Employer (Required)		\$ <u>100.00</u>
Occupation (Required)		

In-Kind Description:
CASH

* Do not add estimated amount of in-kind contribution into total amount of contributions on Report of Receipts and Disbursements.

Name of Candidate or Committee Scotty FergusonReporting period JANUARY 1, 2021 through MARCH 27, 2021

ITEMIZED DISBURSEMENTS

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

A. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Home Depot</u>	<u>3/22/21</u>	\$
Mailing Address		
City, State, Zip Code	<u>___/___/___</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>23.93</u>
B. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Tractor Supply</u>	<u>03/22/21</u>	\$
Mailing Address		
City, State, Zip Code	<u>___/___/___</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>25.62</u>
C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>City, of Southaven</u>	<u>___/___/___</u>	\$
Mailing Address		
City, State, Zip Code	<u>___/___/___</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>100.00</u>
D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Signs Plus Graphics</u>	<u>___/___/___</u>	\$
Mailing Address		
City, State, Zip Code	<u>___/___/___</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>1765.50</u>
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Fund the Nations</u>	<u>___/___/___</u>	\$
Mailing Address		
City, State, Zip Code	<u>___/___/___</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>365.50</u>
F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Paulsen Printing Co.</u>	<u>___/___/___</u>	\$
Mailing Address		
City, State, Zip Code	<u>___/___/___</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>1713.56</u>

