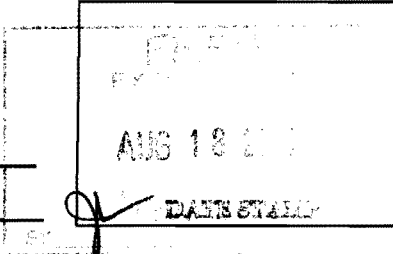




REPORT OF RECEIPTS AND DISBURSEMENTS



Name of Candidate LAURIE L. ALLEN  
 Address 1059 LLOYD HAMILTON RD County PIKE  
 Telephone (Work) 601-783-4130 (Home) 601-551-0698 (Fax) \_\_\_\_\_  
 Contact Name LAURIE L. ALLEN Email Address alaurie41@yahoo.com  
 Office Sought PIKE COUNTY ASSESSOR Political Party REPUBLICAN

Check here if above is different from previous report

**TYPE OF REPORT**

- \_\_\_ May 8, 2015 Periodic Report (January 1, 2015, through April 30, 2015) ..... Mandatory
- \_\_\_ June 10, 2015 Periodic Report (May 1, 2015, through May 31, 2015) ..... Mandatory
- \_\_\_ July 10, 2015 Periodic Report (June 1, 2015, through June 30, 2015) ..... Mandatory
- \_\_\_ July 28, 2015 Pre-Election Report (July 1, 2015, through July 25, 2015) ..... Mandatory  
*All Primary Candidates and Political Committees*
- X August 18, 2015 Pre-Election Report (July 26, 2015, through August 15, 2015) ..... Runoff Candidates Only  
*All Primary Candidates and Political Committees in a Runoff Election*
- \_\_\_ October 9, 2015 Periodic Report (July 1, 2015, through September 30, 2015) ..... Mandatory
- \_\_\_ October 27, 2015 Pre-Election Report ..... Mandatory  
*(Primary Election Winners report October 1, 2015, through October 24, 2015) All Candidates and Political Committees*  
*(Independent Candidates report January 1, 2015 through October 24, 2015)*
- \_\_\_ November 17, 2015 Pre-Runoff Report (October 25, 2015, through November 14, 2015) ..... Runoff Candidates Only  
*All Candidates and Political Committees in a Runoff Election*
- \_\_\_ January 8, 2016 Periodic Report (October 1, 2015, through December 31, 2015) ..... Mandatory
- \_\_\_ 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) Pre-Election reports are mandatory, even if no contributions or expenditures have occurred. In such case, the candidate shall submit a report indicating "0" (Zero) for total amount of reported contributions and expenditures during this period.

(2) Until a Candidate files a Termination Report, annual and periodic reports must still be filed in accordance with Miss. Code Ann. § 23-15-807 (b) (ii) and (iii).

(3) The Secretary of State 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. Faxed reports are acceptable.

**REPORTED CONTRIBUTIONS AND DISBURSEMENTS**

	Itemized	+ Non-Itemized	This Period	Calendar year-to-date
Total amount of contributions \$		\$ 4,195.89	\$	\$ 10,105.20
Total amount of disbursements \$	\$ 4,195.89		\$ 4,195.89	\$ 10,105.20
Total amount of cash on hand			\$	

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

Laurie L. Allen  
Signature of Candidate

8/18/15  
Date

Authority: Refer to Miss. Code Ann. §23-15-801 (1972) et. seq. for statutory requirements.  
 Penalties: Failure to submit required reports, or failure to submit reports in accordance with statutory deadlines, or failure to submit valid reports shall result in fines of \$50 per day and/or prosecution in accordance with Miss. Code Ann. §§ 23-15-811 and 813 (1972).

**SEND TO:**

- Candidates for Statewide, State-District, Multi-County and all Legislative offices should return form to Secretary of State, Elections Division, P. O. Box 136, Jackson, MS 39205 or fax to (601) 576-2545
- Candidates for Countywide and County-District offices should return forms to their County Circuit Clerk
- Candidates for Municipal office should return forms to the Municipal Clerk

Name of Candidate or Committee LAURIE L. ALLENReporting period 7/26/15 through 8/15/15

## ITEMIZED DISBURSEMENTS

A. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Stewart Signs</u>	___/___/___	\$ 679.45
Mailing Address <u>2109 Hwy 48 W</u>	___/___/___	\$
City, State, Zip Code <u>Magnolia, MS 39652</u>	___/___/___	\$
Purpose of Disbursement (Optional) <u>Political Signs</u>	Aggregate Year-to-date	\$
B. Full name <u>McComb Printing</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>210 Broadway S</u>	___/___/___	\$ 961.67
City, State, Zip Code <u>McComb, MS 39648</u>	___/___/___	\$
Purpose of Disbursement (Optional) <u>Mailouts</u>	Aggregate Year-to-date	\$
C. Full name <u>US Postmaster</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>530 Delaware Ave</u>	___/___/___	\$ 877.27
City, State, Zip Code <u>McComb, MS 39648</u>	___/___/___	\$
Purpose of Disbursement (Optional) <u>Mailout Postage</u>	Aggregate Year-to-date	\$
D. Full name <u>Victor's Tint &amp; Graphics</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>1090 Hwy 51 N</u>	___/___/___	\$ 87.50
City, State, Zip Code <u>McComb, MS 39648</u>	___/___/___	\$
Purpose of Disbursement (Optional) <u>Thank You stickers</u>	Aggregate Year-to-date	\$
E. Full name <u>Enterprise-Journal</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>112 Oliver Emmerich Dr</u>	___/___/___	\$ 1,590.00
City, State, Zip Code <u>McComb, MS 39648</u>	___/___/___	\$
Purpose of Disbursement (Optional) <u>Political Ads 7/26, 7/29, 8/2, 8/9</u>	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	\$