

Candidate  
REPORT OF RECEIPTS AND DISBURSEMENTS  
2015 Election

FILED  
PIKE COUNTY, MS  
JUL 08 2015  
RECORDS DIVISION

Name of Candidate Danny Creel  
Address 5028 McComb-Holmesville Rd., McComb, MS County Pike BY [Signature]  
Telephone (Work) 601-783-6434 (Home) 601-248-2500 (Fax) NA  
Contact Name Danny Creel Email Address dcreel3@netzero.com  
Office Sought Chancery Clerk 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*
- 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)  
(Independent Candidates report January 1, 2015 through October 24, 2015)*  
*All Candidates and Political Committees*
- 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, 2015 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	<del>710.00</del>	1780.00	\$ 600.00	\$ 2,060.00
Total amount of disbursements	3,269.23	483.37	\$ 335.00	\$ 4,087.60
Total amount of cash on hand			\$ NA.	

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

Danny G. Creel  
Signature of Candidate

7/6/15  
Date

Authority: Refer to Miss. Code Ann. §23-15-801 (1972) et. seq. for statutory requirements.

Punalties: 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:

- 1. 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
- 2. Candidates for Countywide and County-District offices should return forms to their County Circuit Clerk
- 3. Candidates for Municipal office should return forms to the Municipal Clerk

Name of Candidate or Committee Danny Creek

Reporting period June 1, 2015 through June 30, 2015

# ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Robert Vardaman</u>	<u>6/1/15</u>	\$ <u>500.00</u>
Mailing Address <u>802 Broadway Drive, P.O. Box 1996</u>	/ /	\$
City, State, Zip Code <u>Hattiesburg, Ms 39403-1996</u>	/ /	\$
Name of Employer (Required) <u>Vardaman Buick-Honda, Inc.</u>	/ /	\$
Occupation (Required) <u>Car Dealership Owner</u>	Aggregate year-to-date	\$ <u>500.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	/ /	\$
Mailing Address	/ /	\$
City, State, Zip Code	/ /	\$
Name of Employer (Required)	/ /	\$
Occupation (Required)	Aggregate year-to-date	\$
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	/ /	\$
Mailing Address	/ /	\$
City, State, Zip Code	/ /	\$
Name of Employer (Required)	/ /	\$
Occupation (Required)	Aggregate year-to-date	\$
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	/ /	\$
Mailing Address	/ /	\$
City, State, Zip Code	/ /	\$
Name of Employer (Required)	/ /	\$
Occupation (Required)	Aggregate year-to-date	\$

Name of Candidate or Committee Danny Creel  
 Reporting period June 1, 2015 through June 30, 2015

## ITEMIZED DISBURSEMENTS

A. Full name <u>Hilgerson Printing Company</u>	Date (Mo., Day, Year) <u>6/8/15</u>	Amount of each disbursement this period \$ <u>84.00</u>
Mailing Address <u>P.O. Box 1109</u>		
City, State, Zip Code <u>McComb, Ms. 39649</u>	<u>__/__/__</u>	\$
Purpose of Disbursement (Optional) <u>Political Cards</u>	Aggregate Year-to-date	\$ <u>271.25</u>
B. Full name <u>McComb Printing Inc.</u>	Date (Mo., Day, Year) <u>6/13/15</u>	Amount of each disbursement this period \$ <u>100.00</u>
Mailing Address <u>210 S. Broadway P.O. Box 805</u>		
City, State, Zip Code <u>McComb, Ms. 39649</u>	<u>6/10/15</u>	\$ <u>61.73</u>
Purpose of Disbursement (Optional) <u>Political Banner</u>	Aggregate Year-to-date	\$ <del>100.00</del> <u>819.37</u>
C. Full name <u>Screen Graphics</u>	Date (Mo., Day, Year) <u>6/30/15</u>	Amount of each disbursement this period \$ <u>317.00</u>
Mailing Address <u>2147 Hwy 48 W.</u>		
City, State, Zip Code <u>Magnolia, Ms. 39652</u>	<u>__/__/__</u>	\$
Purpose of Disbursement (Optional) <u>Political Signs</u>	Aggregate Year-to-date	\$ <u>1,529.43</u>
D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u>__/__/__</u>	\$
City, State, Zip Code	<u>__/__/__</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u>__/__/__</u>	\$
City, State, Zip Code	<u>__/__/__</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u>__/__/__</u>	\$
City, State, Zip Code	<u>__/__/__</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$