

**Candidate**  
**REPORT OF RECEIPTS AND DISBURSEMENTS**  
 2015 Election

Delbert Hosemann  
 SECRETARY OF STATE  
 PIKE COUNTY, MISS.  
 FILED  
 MAY 07 2015  
 BY: *RA* ROGER A. GRAVES  
 CIRCUIT CLERK

Name of Candidate Faye Lowery Hodges  
 Address 3024 Gibson Road, Magnolia, MS 39652 County Pike  
 Telephone (Work) 601-248-5455 (Home) 601-680-2721 (Fax) 601-783-4101  
 Contact Name Faye Hodges Email Address fayhodges@yahoo.com  
 Office Sought District 2, Supervisor Political Party Democrat

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	\$2,322.63	+\$ 20.00	\$ 2,342.63	\$ 2,342.63
Total amount of disbursements	\$2,098.17	+\$ 124.46	\$ 2,222.63	\$ 2,222.63
Total amount of cash on hand			\$ 120.00	

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

Faye Hodges  
 Signature of Candidate

5-6-15  
 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:**

- 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 Faye Lowery Hodges  
 Reporting period January 1, 2015 through April 30, 2015

# 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>Faye Hodges</u>	<u>1/15/15</u>	\$ <u>15.00</u>
Mailing Address <u>3024 Gibson Road</u>	<u>2/2/15</u>	\$ <u>50.81</u>
City, State, Zip Code <u>Magnolia, MS 39652</u>	<u>2/6/15</u>	\$ <u>3.21</u>
Name of Employer (Required) <u>Pike County / Storehouse Church</u>	<u>2/6/15</u>	\$ <u>1.07</u>
Occupation (Required) <u>Supervisor, District 2 / Secretary</u>	Aggregate year-to-date	\$ <u>70.09</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>Faye Hodges</u>	<u>2/6/15</u>	\$ <u>4.28</u>
Mailing Address <u>3024 Gibson Road</u>	<u>2/20/15</u>	\$ <u>50.09</u>
City, State, Zip Code <u>Magnolia, MS 39652</u>	<u>3/120/15</u>	\$ <u>1,255.00</u>
Name of Employer (Required) <u>Pike County / Storehouse Church</u>	<u>3/25/15</u>	\$ <u>275.00</u>
Occupation (Required) <u>Supervisor, District 2 / Secretary</u>	Aggregate year-to-date	\$ <u>1,654.46</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>Faye Hodges</u>	<u>3/13/15</u>	\$ <u>100.00</u>
Mailing Address <u>3024 Gibson Road</u>	<u>4/7/15</u>	\$ <u>154.08</u>
City, State, Zip Code <u>Magnolia, MS 39652</u>	<u>4/30/15</u>	\$ <u>414.09</u>
Name of Employer (Required) <u>Pike County / Storehouse Church</u>	<u>1/1/15</u>	\$ _____
Occupation (Required) <u>Supervisor, District 2 / Secretary</u>	Aggregate year-to-date	\$ <u>2,322.63</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>1/1/15</u>	\$ _____
Mailing Address _____	<u>1/1/15</u>	\$ _____
City, State, Zip Code _____	<u>1/1/15</u>	\$ _____
Name of Employer (Required) _____	<u>1/1/15</u>	\$ _____
Occupation (Required) _____	Aggregate year-to-date	\$ _____

Name of Candidate or Committee Faye Lowery Hodges  
 Reporting period January 1, 2015 through April 30, 2015

## ITEMIZED DISBURSEMENTS

A. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Enterprise Journal</u>		
Mailing Address		
<u>P.O. Box 2009</u>	<u>3/20/15</u>	\$ <u>1,255.00</u>
City, State, Zip Code		
<u>McComb, MS 39649</u>	<u>4/7/15</u>	\$ <u>154.08</u>
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>1,409.08</u>
<u>Advertising: Political Calendar and Ads; Printing: Campaign Cards</u>		
B. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Southwest MS Broadcasting (WAZA)</u>		
Mailing Address		
<u>206 North Front Street</u>	<u>3/25/15</u>	\$ <u>275.00</u>
City, State, Zip Code		
<u>McComb, MS 39648</u>	<u>__/__/__</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>275.00</u>
<u>Advertising: Radio Political Calendar</u>		
C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Stewart Signs</u>		
Mailing Address		
<u>2147 Hwy 48 West</u>	<u>4/30/15</u>	\$ <u>414.09</u>
City, State, Zip Code		
<u>McComb, MS 39648</u>	<u>__/__/__</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>414.09</u>
<u>Printing: Yard Signs</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	\$