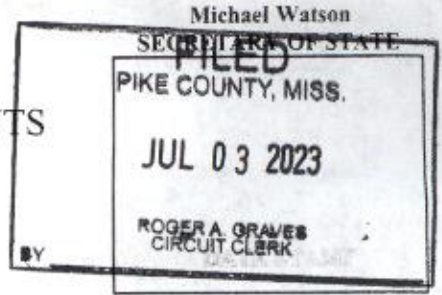




Candidate
REPORT OF RECEIPTS AND DISBURSEMENTS
2023 Election



Name of Candidate Tazwell Bowsky
Address 1169 JOHNNY FORREST RD City/Zip SUMMIT 39666
Telephone (Work) _____ (Home) 601-551-1733^{cell} (Fax) _____
Contact Name _____ Email Address _____
Office Sought SUPERVISOR - DIST. 1 Political Party (if any) DEMOCRAT

Check here if above is different from previous report

TYPE OF REPORT

- May 10, 2023 Periodic Report (January 1, 2023 through April 30, 2023) Mandatory
- June 9, 2023 Periodic Report (May 1, 2023 through May 31, 2023) Mandatory
- July 10, 2023 Periodic Report (June 1, 2023 through June 30, 2023) Mandatory
- August 1, 2023 Primary Pre-Election Report (July 1, 2023 through July 29, 2023) Mandatory
- August 22, 2023 Primary Pre-Runoff Report (July 30, 2023 through August 19, 2023) **Runoff Candidates Only**
- October 10, 2023 Periodic Report (July 1, 2023 through September 30, 2023) Mandatory
- October 31, 2023 Pre-Election Report (October 1, 2023 through October 29, 2023) Mandatory
- November 21, 2023 Pre-Runoff Report (October 30, 2023 through November 19, 2023) **Runoff Candidates Only**
- January 10, 2024 Periodic Report (October 1, 2023 through December 31, 2023) Mandatory
- Termination Report (Committee will no longer accept contributions, make campaign expenditures, has no outstanding campaign debt obligation) **Required to terminate reporting obligations**

IMPORTANT

- (1) All candidates for office shall file periodic reports in the year in which they are to be elected.
- (2) Periodic Reports are mandatory, even if no expenditures were made during the period. In such case, the candidate shall submit a report indicating "0" (zero) for total amount of reported contributions and/or expenditures during this period. Pre-Election Reports are mandatory if the candidate is opposed.
- (3) Until a candidate files a Termination Report, annual reports must be filed in accordance with Miss. Code Ann. § 23-15-807 (b) (ii) and (iii).
- (4) Beginning on Jan. 1, 2018, candidates and officeholders may not "personally use" campaign contributions. Section 23-15-821, Miss. Code Ann., sets forth those "personal use" expenditures which are specifically prohibited from campaign contributions and those disbursements which are not defined as "personal use" and therefore permissible from campaign contributions. Campaign contributions accepted and held prior to Jan. 1, 2018 ARE NOT subject to the "personal use" restrictions of Section 23-15-821, Miss. Code Ann. Beginning on Jan. 1, 2018, campaign contributions accepted and accumulated therefrom ARE subject to the "personal use"

Name of Candidate or Committee _____

Reporting period _____ through _____

ITEMIZED RECEIPTS

A. Source: <input checked="" 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 Neel SCHAFFER	2/3/23	\$ 500.00
Mailing Address 206 MARYLAND Ave.,	_/_/_	\$
City, State, Zip Code McCOMB, MS 39648	_/_/_	\$
Name of Employer (Required)	_/_/_	\$
Occupation (Required)	Aggregate year-to-date	\$ 500.00
B. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input type="radio"/> Individual <input checked="" type="radio"/> Loan Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Tazwell BOWSKY	_/_/_	\$
Mailing Address 1169 JOHNNY FORREST RD	_/_/_	\$
City, State, Zip Code SUMMIT, MS 39666	_/_/_	\$
Name of Employer (Required) SUPERVISOR	_/_/_	\$
Occupation (Required)	Aggregate year-to-date	\$ 2255.87
C. 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	_/_/_	\$
Mailing Address	_/_/_	\$
City, State, Zip Code	_/_/_	\$
Name of Employer (Required)	_/_/_	\$
Occupation (Required)	Aggregate year-to-date	\$
D. 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	_/_/_	\$
Mailing Address	_/_/_	\$
City, State, Zip Code	_/_/_	\$
Name of Employer (Required)	_/_/_	\$
Occupation (Required)	Aggregate year-to-date	\$

Name of Candidate or Committee _____

Reporting period _____ through _____

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
ENTERPRISE JOURNAL	2/14/23	\$ 110.00
Mailing Address P.O. Box 2009		
City, State, Zip Code McComb, MS 39649	2/21/23	\$ 2183.00
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
B. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	3/14/23	\$ 55.00
City, State, Zip Code	3/17/23	\$ 55.00
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	4/14/23	\$ 55.00
City, State, Zip Code	___/___/___	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 2458.00
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	\$