

Candidate
REPORT OF RECEIPTS AND DISBURSEMENTS
2017 Municipal Election

RECEIVED MAY 30 2017
69

Name of Candidate George L. Bass
 Address 20171 Lovers Lane Long Beach, MS
 Telephone (Work) _____ (Home) 2282341832 (Fax) _____
 Contact Name Philip Kies Email Address phil.kies@att.net
 Office Sought Mayor, Long Beach, MS Political Party (if any) Republican

Check here if above information is different from previous report

TYPE OF REPORT

- _____ Tuesday, April 25, 2017 (January 1, 2017, through April 22, 2017) Primary Pre-Election Report
 _____ Tuesday, May 9, 2017 (April 23, 2017, through May 6, 2017) Primary Pre-Runoff Election Report
 X _____ Tuesday, May 30, 2017 (January 1, 2017, through May 27, 2017*) Pre-Election Report
 _____ Wednesday, January 31, 2018 (January 1, 2017, through December 31, 2017) 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

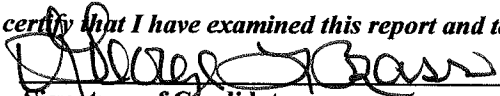
IMPORTANT

- (1) *For candidates who filed the Primary Pre-Election Report, the reporting period for the Pre-Election Report due Tuesday, May 30, 2017 is April 23, 2017, through May 6, 2017.
- (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.
- (3) Annual Reports are mandatory, unless a candidate has filed a Termination Report prior to December 31, 2017.
- (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	\$ 14678.00 + \$ 7716.19	\$ 600.00	\$ 22394.19
Total amount of disbursements	\$ 20708.84 + \$ 0	\$ 1490.59	\$ 22199.43
Total amount of cash on hand		\$ 194.76	

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


Signature of Candidate

MAY 30, 2017
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

GEORGE BASS

Reporting period SUNDAY MAY 7, 2017

through TUESDAY MAY 30, 2017

ITEMIZED DISBURSEMENTS

A. Full name MILNER RENTAL	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 940 PASS ROAD	05 / 07 / 17	\$ 221.49
City, State, Zip Code GULFPORT, MS. 39501	___ / ___ / ___	\$
Purpose of Disbursement (Optional) CHAIRS AND TABLES FOR FISH FRY EVENT	Aggregate Year-to-date	\$ 510.39
B. Full name LOWES HOME IMPROVEMENT	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 2151 JOHN HILLBLVD	05 / 07 / 17	\$ 700.00
City, State, Zip Code GULFPORT, MS 39507	___ / ___ / ___	\$
Purpose of Disbursement (Optional) LUMBER FOR SIGNS	Aggregate Year-to-date	\$ 725.53
C. Full name WEB SITE AND SOCIAL MEDIA	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address N.A.	05 / 07 / 17	\$ 499.10
City, State, Zip Code N.A.	___ / ___ / ___	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 499.10
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	\$