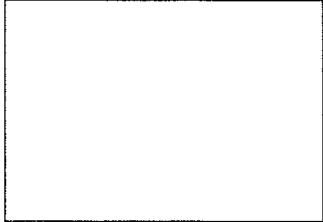


Candidate
REPORT OF RECEIPTS AND DISBURSEMENTS
2017 Municipal Election



Name of Candidate Ronnie Hammens, Jr.
 Address 631 W. Old Pass Rd. - Long Beach, ms. 39560
 Telephone (Work) 228-596-4447 (Home) NONE (Fax) NONE
 Contact Name Ronnie Email Address Ronaldhammens444@yahoo.com
 Office Sought Mayor 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
 _____ 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 \$	650. ⁰⁰	+ \$ 17.65. ⁰⁰	\$ 2,415. ⁰⁰	\$ 2,415. ⁰⁰
Total amount of disbursements \$	3,225.67	+ \$	\$	\$ 3,225.67
Total amount of cash on hand			\$ <u>0</u>	

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

Ronnie Hammens Jr.
Signature of Candidate

4-25-17
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).

RECEIVED APR 26 2017
Per
2:01 pm

Name of Candidate or Committee

Reporting period through

ITEMIZED RECEIPTS

A. Source: <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) <input type="text"/>	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Kerric Gibson</u>	<u>3/17/17</u>	\$ <u>400.00</u>
Mailing Address <u>118 Dennis Ln.</u>	<input type="text"/>	\$ <input type="text"/>
City, State, Zip Code <u>Long Beach, Ms. 39560</u>	<input type="text"/>	\$ <input type="text"/>
Name of Employer (Required) <u>Gibson Maintenance</u>	<input type="text"/>	\$ <input type="text"/>
Occupation (Required) <u>Contractor</u>	Aggregate year-to-date	\$ <u>400.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) <input type="text"/>	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>John Bissell</u>	<u>3/24/17</u>	\$ <u>250.00</u>
Mailing Address <u>3514 Louisa Pl.</u>	<input type="text"/>	\$ <input type="text"/>
City, State, Zip Code <u>Diamondhead, Ms. 39525</u>	<input type="text"/>	\$ <input type="text"/>
Name of Employer (Required) <u>Self</u>	<input type="text"/>	\$ <input type="text"/>
Occupation (Required) <u>Car Salesperson</u>	Aggregate year-to-date	\$ <u>250.00</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) <input type="text"/>	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	<input type="text"/>	\$ <input type="text"/>
Mailing Address	<input type="text"/>	\$ <input type="text"/>
City, State, Zip Code	<input type="text"/>	\$ <input type="text"/>
Name of Employer (Required)	<input type="text"/>	\$ <input type="text"/>
Occupation (Required)	Aggregate year-to-date	\$ <input type="text"/>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input type="checkbox"/> Other (please specify) <input type="text"/>	Date (Mo., Day, Year)	Amount of each receipt this period
Full name	<input type="text"/>	\$ <input type="text"/>
Mailing Address	<input type="text"/>	\$ <input type="text"/>
City, State, Zip Code	<input type="text"/>	\$ <input type="text"/>
Name of Employer (Required)	<input type="text"/>	\$ <input type="text"/>
Occupation (Required)	Aggregate year-to-date	\$ <input type="text"/>

Name of Candidate or Committee Ronnie Hammons Jr.
 Reporting period Jun 1, 2017 through April 22, 2017

ITEMIZED DISBURSEMENTS

A. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Southern Printing & Silkscreening Inc</u>	<u>2/16/17</u>	\$ <u>2,358.23</u>
Mailing Address <u>230 Davis Ave.</u>		
City, State, Zip Code <u>Pass Christian, ms. 39571</u>	<u>___/___/___</u>	\$
Purpose of Disbursement (Optional) <u>Sigars / Push Cards / Tickets</u>	Aggregate Year-to-date	\$ <u>2,358.23</u>
B. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Sam's Club</u>	<u>3/24/17</u>	\$ <u>337.61</u>
Mailing Address <u>10431 Old Hwy 49</u>		
City, State, Zip Code <u>Gulfport, ms. 39503</u>	<u>___/___/___</u>	\$
Purpose of Disbursement (Optional) <u>Food for Campaign Party</u>	Aggregate Year-to-date	\$ <u>337.61</u>
C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Long Beach Recreational Department</u>	<u>3/24/17</u>	\$ <u>180.00</u>
Mailing Address <u>20257 Daughtery Rd.</u>		
City, State, Zip Code <u>Long Beach, ms. 39560</u>	<u>___/___/___</u>	\$
Purpose of Disbursement (Optional) <u>Hall rental for Party</u>	Aggregate Year-to-date	\$ <u>180.00</u>
D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Bell</u>	<u>2/20/17</u>	\$ <u>349.83</u>
Mailing Address <u>15226 Crossroads Blvd.</u>		
City, State, Zip Code <u>Gulfport, ms. 39503</u>	<u>___/___/___</u>	\$
Purpose of Disbursement (Optional) <u>Campaign clothing/suits</u>	Aggregate Year-to-date	\$ <u>349.83</u>
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
	<u>___/___/___</u>	\$
Mailing Address		
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
	<u>___/___/___</u>	\$
Mailing Address		
City, State, Zip Code	<u>___/___/___</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$