

Candidate
REPORT OF RECEIPTS AND DISBURSEMENTS
2017 Municipal Election

17 APR 25 AM 11:58

RECEIVED
CITY CLERK
JACKSON, MS.

Name of Candidate Patrick G. Edmund
 Address 345 Daniel Lake Blvd, Jackson, MS, 39212
 Telephone (Work) 601-906-0831 (Home) _____ (Fax) _____
 Contact Name Patrick G. Edmund Email Address pedmond34@outlook.com
 Office Sought Council Member Political Party (if any) Democratic Party
 Ward 7



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 \$	1,250.00	+	\$ 417.00	\$	1,667.00	\$	1,667.00
Total amount of disbursements \$	1,951.27	+	\$ 0	\$	1,951.27	\$	1,951.27
Total amount of cash on hand				\$	0		

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

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 Patrick Edmund
 Reporting period January 1, 2017 through April 22, 2017

ITEMIZED DISBURSEMENTS

A. Full name	<u>A2Z Printing</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u>2125 TV Road</u>	<u>02/23/17</u>	\$ <u>475.20</u>
City, State, Zip Code	<u>Jackson, ms, 39204</u>	<u>04/04/17</u>	\$ <u>479.52</u>
Purpose of Disbursement (Optional)	<u>yard signs & car magnets</u>	Aggregate Year-to-date	\$ <u>954.72</u>
B. Full name	<u>J Ward Designs Studio</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u>601-790-0362</u>	<u>03/23/17</u>	\$ <u>326.55</u>
City, State, Zip Code	<u>Ridgeland, MS</u>	<u>04/19/17</u>	\$ <u>360.00</u>
Purpose of Disbursement (Optional)	<u>design, pushcards & flyers, literacy</u>	Aggregate Year-to-date	\$ <u>686.55</u>
C. Full name	<u>Courtney's Creative Gifts & Designs</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u>223 Hilliard Court</u>	<u>03/17/17</u>	\$ <u>115⁰⁰</u>
City, State, Zip Code	<u>Jackson, ms, 39212</u>	<u>04/21/17</u>	\$ <u>195⁰⁰</u>
Purpose of Disbursement (Optional)	<u>Campaign T-shirts</u>	Aggregate Year-to-date	\$ <u>310.00</u>
D. Full name		Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		<u> </u> / <u> </u> / <u> </u>	\$
City, State, Zip Code		<u> </u> / <u> </u> / <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> / <u> </u> / <u> </u>	\$
City, State, Zip Code		<u> </u> / <u> </u> / <u> </u>	\$
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$
F. Full name	<u>JACKSON, MS CITY CLERK</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u>RECEIVED</u>	<u> </u> / <u> </u> / <u> </u>	\$
City, State, Zip Code	<u>17 APR 25 11:11 AM</u>	<u> </u> / <u> </u> / <u> </u>	\$
Purpose of Disbursement (Optional)		Aggregate Year-to-date	\$

\$1,951.27

Name of Candidate or Committee Patrick EdmondReporting period Jan 1, 2017 through April 28, 2017

ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input checked="" 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>Dollhouse Dance Factory</u>	<u>01</u> / <u>30</u> / <u>17</u>	\$ <u>500⁰⁰</u>
Mailing Address <u>1410 Ellis Ave</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Jackson, MS, 39204</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>Diana M. Williams</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>Owner / CEO</u>	Aggregate year-to-date	\$ <u>500⁰⁰</u>
B. Source: <input checked="" 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>LMS (Integrated Management Services)</u>	<u>14</u> / <u>11</u> / <u>17</u>	\$ <u>500⁰⁰</u>
Mailing Address <u>126 E Amite Street</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Jackson, MS, 39201</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>John D. Calhoun</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>CEO</u>	Aggregate year-to-date	\$ <u>500⁰⁰</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan <input checked="" type="checkbox"/> Other (please specify) <u>Church</u>	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Holy Covenant of Jehovah Jireh</u>	<u>02</u> / <u>15</u> / <u>17</u>	\$ <u>250⁰⁰</u>
Mailing Address <u>3355 Jayne Ave</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u>Jackson, MS, 39209</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u>Ruthy & Dell Cutts</u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u>Pastor</u>	Aggregate year-to-date	\$ <u>250⁰⁰</u>
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 <u> </u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Mailing Address <u> </u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
City, State, Zip Code <u> </u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Name of Employer (Required) <u> </u>	<u> </u> / <u> </u> / <u> </u>	\$ <u> </u>
Occupation (Required) <u> </u>	Aggregate year-to-date	\$ <u> </u>

1,250⁰⁰