RECEIVED MAY 28 2013

2013 ELECTION CYCLE

Delbert Hosemann
SECRETARY OF STATE

DATE STAMP

# Municipal Candidate
# REPORT OF RECEIPTS AND DISBURSEMENTS
# 2013 Election

Name Leonard Carrubba

Address 105 Summer Lane Long Beach, MS County Harrison

Telephone 228-863-4919 Fax

Office Sought Alderman At Large Email Address

☐ Check here if above is different from previous report

____ **April 30, 2013 Primary Pre-Election Report** (January 1, 2013, through April 27, 2013) ..... **Mandatory**
*Primary Candidates Only*

____ **May 14, 2013 Primary Pre-Runoff Report** (April 28, 2013, through May 11, 2013)..... **Mandatory**
*Primary Runoff Candidates Only*

X **May 28, 2013 General Pre-Election Report** ..... **Mandatory**
(Primary Election Winners report April 28, 2013, through May 25, 2013)
(Independent Candidates report January 1, 2013, through May 25, 2013)
*All Candidates must report*

____ **January 31, 2014 Annual Report** (January 1, 2013 through December 31, 2013)..... **Mandatory**
*All Candidates must report unless terminated*

____ **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 receiving authority 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 | $ Ø | +$ 379.00 | $ 379.00 | $ 4014.94 |
| Total amount of disbursements | $ 735.80 | +$ Ø | $ 735.80 | $ 3871.44 |
| Total amount of cash on hand | | | $ | |

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

Leonard Carrubba
Signature of Candidate

May 28, 2013
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, Mutil-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 their Municipal Clerk.*

Name of Candidate or Committee LEONARD CARRUBBA

Reporting period April 28th 2013 through May 24, 2013

# ITEMIZED DISBURSEMENTS

| A. Full name | Date (Mo., Day, Year) | Amount of each disbursement this period |
|---|---|---|
| Magnolia Printing | 4/30/13 | $ 465.45 |
| Mailing Address 1829 25th | | |
| City, State, Zip Code Gulfport, MS 39501 | __/__/__ | $ |
| Purpose of Disbursement (Optional) Printing | Aggregate Year-to-date | $ 1202.15 |
| **B. Full name** Data Mail Services | **Date (Mo., Day, Year)** | **Amount of each disbursement this period** |
| Mailing Address 815 Gulfview | 5/24/2013 | $ 735.80 |
| City, State, Zip Code Long Beach MS 39560 | __/__/__ | $ |
| Purpose of Disbursement (Optional) MAIL OUT | Aggregate Year-to-date | $ 735.80 |
| **C. 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 | $ |
| **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 | $ |