



Candidate  
**REPORT OF RECEIPTS AND DISBURSEMENTS**  
 2021 Municipal Election



Name of Candidate Allen D. Holder, Jr.  
 Address 102 Sea Pine City/State/Zip Long Beach, MS 39868  
 Telephone (Work) NA (Home) 228-323-7466 (Fax) NA  
 Contact Name Allen Holder Email Address aholderjr@icloud.com  
 Office Sought Alderman @ Large Political Party (if any) Republican

Check here if above information is different from previous report

**TYPE OF REPORT**

- Tuesday, March 30, 2021** (January 1, 2021 through March 27, 2021)..... **Primary Pre-Election Report**
- Tuesday, April 20, 2021** (March 28, 2021 through April 17, 2021)..... **Primary Pre-Runoff Election Report**
- Tuesday, June 1, 2021** (January 1, 2021 through May 29, 2021\*)..... **General Pre-Election Report**
- Monday, January 31, 2022** (January 1, 2021 through December 31, 2021)..... **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, June 1, 2021 is March 28, 2021 through May 29, 2021.
- (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. Unopposed candidates are not required to file Pre-Election Reports.
- (3) Annual Reports are mandatory, unless a candidate has filed a Termination Report prior to December 31, 2021.
- (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 \$		+\$		\$ 5450.00	\$
Total amount of disbursements \$	6505.02	+\$	-	\$ 6505.02	\$
Total amount of cash on hand				\$ 1055.02	

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

Allen D. Holder, Jr.  
 Signature of Candidate

3/26/2021  
 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 Allen D. Holder, Jr

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
<u>Lil Ray's Rest.</u>	<u>2/27/21</u>	\$ <u>80.53</u>
Mailing Address <u>124 Jeff Davis Ave</u>		
City, State, Zip Code <u>Long Beach, Ms - 39560</u>	<u>__/__/__</u>	\$
Purpose of Disbursement (Optional) <u>Food for Campaign workers</u>	Aggregate Year-to-date	\$
B. Full name <u>Walker Rent All-Hardware</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>19079 Pineville Rd</u>	<u>2/26/21</u>	\$ <u>9.62</u>
City, State, Zip Code <u>Long Beach - Ms 39560</u>	<u>3/4/21</u>	\$ <u>11.14</u>
Purpose of Disbursement (Optional) <u>Campaign Supplies - Screws, Nails, Etc</u>	Aggregate Year-to-date	\$ <u>20.76</u>
C. Full name <u>Connie Lardner - Circuit Clerk</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>Harrison County Courthouse</u>	<u>3/1/21</u>	\$ <u>53.00</u>
City, State, Zip Code <u>Gulfport, Ms 39501</u>	<u>__/__/__</u>	\$
Purpose of Disbursement (Optional) <u>Mailer - List</u>	Aggregate Year-to-date	\$
D. Full name <u>City of Long Beach</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>201 Jeff Davis Ave</u>	<u>1/29/21</u>	\$ <u>10.00</u>
City, State, Zip Code <u>Long Beach, Ms 39560</u>	<u>__/__/__</u>	\$
Purpose of Disbursement (Optional) <u>Qualifying Fee</u>	Aggregate Year-to-date	\$ <u>10.00</u>
E. Full name <u>Southern Printing</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>230 Davis Ave</u>	<u>2-4-21</u> <u>2-12-21</u> <u>2-15-21</u> <u>2-19-21</u> <u>3-12-21</u> <u>3-18-21</u>	\$ <u>5884.96</u>
City, State, Zip Code <u>Pass Christian, Ms 39571</u>		\$
Purpose of Disbursement (Optional) <u>Political Signs -</u>	Aggregate Year-to-date	\$ <u>5884.96</u>
F. Full name <u>Southern Printing</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>230 Davis Ave</u>	<u>3/16/21</u>	\$ <u>321.75</u>
City, State, Zip Code <u>Pass Christian Ms.</u>	<u>3/2/21</u>	\$ <u>134.02</u>
Purpose of Disbursement (Optional) <u>Magnetic Signs - Mailer Post Cards</u>	Aggregate Year-to-date	\$ <u>455.77</u>

Name of Candidate or Committee

Allen D. Holder, Jr

Reporting period

Jan 1

through

March 30th 2021

## ITEMIZED RECEIPTS

A. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input checked="" type="radio"/> Individual <input type="radio"/> Loan Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name	Phil Kres	2/19/21	\$ 500. <sup>00</sup>
Mailing Address	709 Daywood Dr.	3/15/21	\$ 500. <sup>00</sup>
City, State, Zip Code	Long Beach, Ms.	3/20/21	\$ 500. <sup>00</sup>
Name of Employer (Required)	Retired Coast Guard Captain	—/—/—	\$
Occupation (Required)	NA Retired	Aggregate year-to-date	\$ 1500. <sup>00</sup>
B. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input checked="" type="radio"/> Individual <input type="radio"/> Loan Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name	Ryan Lowery	2/28/21	\$ 500. <sup>00</sup>
Mailing Address	707 Daywood Dr	—/—/—	\$
City, State, Zip Code	Long Beach, Ms 39560	—/—/—	\$
Name of Employer (Required)	Car Dealer	—/—/—	\$
Occupation (Required)	Car Dealer	Aggregate year-to-date	\$ 500. <sup>00</sup>
C. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input checked="" type="radio"/> Individual <input type="radio"/> Loan Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name	Bobby Kresal	3/1/21	\$ 600. <sup>00</sup>
Mailing Address	404 Kohler St	—/—/—	\$
City, State, Zip Code	Long Beach, Ms.	—/—/—	\$
Name of Employer (Required)	President of Utility Partners	—/—/—	\$
Occupation (Required)	Engineer	Aggregate year-to-date	\$ 600. <sup>00</sup>
D. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input checked="" type="radio"/> Individual <input type="radio"/> Loan Other (please specify) _____		Date (Mo., Day, Year)	Amount of each receipt this period
Full name	Melvin Brisdara	2/28/21	\$ 500. <sup>00</sup>
Mailing Address	3166 Mitchell Rd	—/—/—	\$
City, State, Zip Code	Long Beach, Ms	—/—/—	\$
Name of Employer (Required)	Retired	—/—/—	\$
Occupation (Required)	Sheriff of Harrison County	Aggregate year-to-date	\$ 500. <sup>00</sup>

Reporting period

through

March 30th 2021

## ITEMIZED RECEIPTS

A. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input checked="" type="radio"/> Individual <input type="radio"/> Loan		Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)			
Full name David Fryard		2/15/21	\$ 250. <sup>00</sup>
Mailing Address 2400 34th St		__/__/__	\$
City, State, Zip Code Gulfport, MS 39501		__/__/__	\$
Name of Employer (Required) Ace Moving		__/__/__	\$
Occupation (Required) President		Aggregate year-to-date	\$ 250. <sup>00</sup>
B. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input checked="" type="radio"/> Individual <input type="radio"/> Loan		Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)			
Full name Charlie Fay Webb		2/15/21	\$ 300. <sup>00</sup>
Mailing Address 19009 Red Bud Dr		__/__/__	\$
City, State, Zip Code Long Beach, MS 39560		__/__/__	\$
Name of Employer (Required) Retired / Retired		__/__/__	\$
Occupation (Required) Air Guard / School Teacher		Aggregate year-to-date	\$ 300. <sup>00</sup>
C. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input checked="" type="radio"/> Individual <input type="radio"/> Loan		Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)			
Full name David Larusa		2/16/21	\$ 300. <sup>00</sup>
Mailing Address 5004 Oak Cr.		__/__/__	\$
City, State, Zip Code Long Beach, MS 39560		__/__/__	\$
Name of Employer (Required) Retired		__/__/__	\$
Occupation (Required) Harrison County Tax Collector		Aggregate year-to-date	\$ 300. <sup>00</sup>
D. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input checked="" type="radio"/> Individual <input type="radio"/> Loan		Date (Mo., Day, Year)	Amount of each receipt this period
Other (please specify)			
Full name Blane Marie		2/10/21	\$ 500. <sup>00</sup>
Mailing Address 118 Charleswood Dr		__/__/__	\$
City, State, Zip Code Long Beach, MS 39560		__/__/__	\$
Name of Employer (Required) Marie Pharmacy		__/__/__	\$
Occupation (Required) Pres.		Aggregate year-to-date	\$ 500. <sup>00</sup>

Name of Candidate or Committee Allen D. Holder Jr.  
 Reporting period Jan 1 through March 30th

# ITEMIZED RECEIPTS

A. 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 <u>Alice Mandal</u>	<u>2/25/21</u>	\$ <u>500.00</u>
Mailing Address <u>504 Ward Lane</u>	__/__/__	\$
City, State, Zip Code <u>Biloxi, MS 39531</u>	__/__/__	\$
Name of Employer (Required) <u>Housewife</u>	__/__/__	\$
Occupation (Required) <u>Housewife</u>	Aggregate year-to-date	\$ <u>500.00</u>
B. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input checked="" type="radio"/> Individual <input type="radio"/> Loan Other (please specify) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Herman Ray Ncaise</u>	__/__/__	\$ <u>500.00</u>
Mailing Address <u>21040 Coastal Pkwy -</u>	__/__/__	\$
City, State, Zip Code <u>Gulfport MS 39503</u>	__/__/__	\$
Name of Employer (Required) <u>Ncaise Bros Cont</u>	__/__/__	\$
Occupation (Required) <u>Retired / President</u>	Aggregate year-to-date	\$ <u>500.00</u>
C. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input checked="" 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	\$