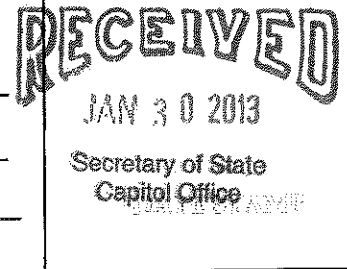


Candidate
REPORT OF RECEIPTS AND DISBURSEMENTS
2012 Annual Report



Name of Candidate Nickey Browning
 Address 162 W. Oxford St. Pontotoc Ms - 38863
 Telephone 662-489-5979 Fax _____
 Office Sought State Senator Email _____

Check here if above is different from previous report

TYPE OF REPORT

X January 31, 2013 Annual Report (January 1, 2012 through December 31, 2012).....Mandatory
 _____ 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	\$ 4200.00 + \$ 200.00	\$ 4400.00	\$ 4400.00
Total amount of disbursements	\$ 4902.80 + \$ 2865.86	\$ 7168.66	\$ 7168.66
Total amount of cash on hand		\$ 17938.58	

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

Nickey Browning
Signature of Candidate

1-30-13
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, multi-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.

Name of Candidate or Committee Nickey Browning
 Reporting period JAN. 1 2012 through Dec 31. 2012

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)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>ALFA Mutual Insurance Co.</u>	<u>5/11/12</u>	\$ <u>1,000.00</u>
Mailing Address <u>2108 East South Blvd.</u>	__/__/__	\$
City, State, Zip Code <u>Montgomery AL 36116</u>	__/__/__	\$
Name of Employer (Required) <u>ALFA</u>	__/__/__	\$
Occupation (Required) <u>Insurance</u>	Aggregate year-to-date	\$ <u>1,000.00</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>Tellus Operating Group LLC</u>	<u>11/21/12</u>	\$ <u>500.00</u>
Mailing Address <u>602 Crescent Place Suite 100</u>	__/__/__	\$
City, State, Zip Code <u>Ridgeland MS 39157</u>	__/__/__	\$
Name of Employer (Required) <u>Tellus Operating Group</u>	__/__/__	\$
Occupation (Required) <u>Oil</u>	Aggregate year-to-date	\$ <u>500.00</u>
C. 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>Gulf States Toyota Inc.</u>	<u>11/21/12</u>	\$ <u>250.00</u>
Mailing Address <u>1375 Enclave Parkway</u>	__/__/__	\$
City, State, Zip Code <u>Houston Texas 77047</u>	__/__/__	\$
Name of Employer (Required) <u>Toyota Inc.</u>	__/__/__	\$
Occupation (Required) <u>Car Parts</u>	Aggregate year-to-date	\$ <u>250.00</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>BNSF Railway Company</u>	<u>11/21/12</u>	\$ <u>250.00</u>
Mailing Address <u>2500 Lou Menk Drive AOB-3</u>	__/__/__	\$
City, State, Zip Code <u>Fort Worth Tx 76131</u>	__/__/__	\$
Name of Employer (Required) <u>BNSF</u>	__/__/__	\$
Occupation (Required) <u>Railway</u>	Aggregate year-to-date	\$ <u>250.00</u>

Name of Candidate or Committee Nickey Browning
 Reporting period Jan. 1 2012 through Dec 31 2012

ITEMIZED RECEIPTS

A. 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>Advance America</u>	<u>11/21/12</u>	\$ <u>500.00</u>
Mailing Address <u>135 N. Church St.</u>	<u>__1__1__</u>	\$
City, State, Zip Code <u>Spartan SC. 29306</u>	<u>__1__1__</u>	\$
Name of Employer (Required) <u>Advance America</u>	<u>__1__1__</u>	\$
Occupation (Required) <u>Consumer Finance</u>	Aggregate year-to-date	\$ <u>500.00</u>
B. 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>AT & T Mississippi Political Action Comm.</u>	<u>11/21/12</u>	\$ <u>400.00</u>
Mailing Address <u>175 E. Capital St.</u>	<u>__1__1__</u>	\$
City, State, Zip Code <u>Jackson Ms. 39201</u>	<u>__1__1__</u>	\$
Name of Employer (Required) <u>AT&T</u>	<u>__1__1__</u>	\$
Occupation (Required) <u>Telephone</u>	Aggregate year-to-date	\$ <u>400.00</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) _____	Date (Mo., Day, Year)	Amount of each receipt this period
Full name <u>Chevron Policy & Public Affairs</u>	<u>11/21/12</u>	\$ <u>500.00</u>
Mailing Address <u>P.O. Box 9034</u>	<u>__1__1__</u>	\$
City, State, Zip Code <u>Concord Ca 94524</u>	<u>__1__1__</u>	\$
Name of Employer (Required) <u>Chevron</u>	<u>__1__1__</u>	\$
Occupation (Required) <u>Oil</u>	Aggregate year-to-date	\$ <u>500.00</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>Grand Truck Railroad Co.</u>	<u>11/21/12</u>	\$ <u>300.00</u>
Mailing Address <u>2800 Liver Suite 300 P.O. Box 5025</u>	<u>__1__1__</u>	\$
City, State, Zip Code <u>Troy Michigan 48007-5025</u>	<u>__1__1__</u>	\$
Name of Employer (Required) <u>Grand Truck Railroad</u>	<u>__1__1__</u>	\$
Occupation (Required) <u>Railroad</u>	Aggregate year-to-date	\$ <u>300.00</u>

Name of Candidate or Committee Nickey Browning
 Reporting period Jan. 1 2012 through Dec. 31 2012

ITEMIZED RECEIPTS

A. 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>Verison</u>	<u>12/20/12</u>	\$ <u>500.00</u>
Mailing Address <u>P.O. Box 2200</u>	__/__/__	\$
City, State, Zip Code <u>Folsom Ca 95763 - 2200</u>	__/__/__	\$
Name of Employer (Required) <u>Verison</u>	__/__/__	\$
Occupation (Required) <u>telephon</u>	Aggregate year-to-date	\$ <u>500.00</u>
B. 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	__/__/__	\$
Mailing Address	__/__/__	\$
City, State, Zip Code	__/__/__	\$
Name of Employer (Required)	__/__/__	\$
Occupation (Required)	Aggregate year-to-date	\$
C. 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	__/__/__	\$
Mailing Address	__/__/__	\$
City, State, Zip Code	__/__/__	\$
Name of Employer (Required)	__/__/__	\$
Occupation (Required)	Aggregate year-to-date	\$
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	__/__/__	\$
Mailing Address	__/__/__	\$
City, State, Zip Code	__/__/__	\$
Name of Employer (Required)	__/__/__	\$
Occupation (Required)	Aggregate year-to-date	\$

Name of Candidate or Committee Nickey Browning
 Reporting period Jan 1 2012 through Dec 31 2012

ITEMIZED DISBURSEMENTS

A. Full name <u>C Spire</u>	Date (Mo., Day, Year) <u>1 30 12</u>	Amount of each disbursement this period \$ <u>142.56</u>
Mailing Address <u>1018 Highland Colony Parkway</u>		
City, State, Zip Code <u>Ridgeland Ms 39157</u>	<u>2 20 12</u>	\$ <u>143.34</u>
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
B. Full name <u>C Spire</u>	Date (Mo., Day, Year) <u>3 23 12</u>	Amount of each disbursement this period \$ <u>138.00</u>
Mailing Address		
City, State, Zip Code	<u>4 14 12</u>	\$ <u>250.35</u>
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
C. Full name <u>C Spire</u>	Date (Mo., Day, Year) <u>4 22 12</u>	Amount of each disbursement this period \$ <u>141.87</u>
Mailing Address		
City, State, Zip Code	<u>5 12 12</u>	\$ <u>141.87</u>
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
D. Full name <u>C Spire</u>	Date (Mo., Day, Year) <u>7 2 12</u>	Amount of each disbursement this period \$ <u>143.40</u>
Mailing Address		
City, State, Zip Code	<u>7 16 12</u>	\$ <u>148.81</u>
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
E. Full name <u>C Spire</u>	Date (Mo., Day, Year) <u>8 19 12</u>	Amount of each disbursement this period \$ <u>138.81</u>
Mailing Address		
City, State, Zip Code	<u>11 14 12</u>	\$ <u>149.92</u>
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
F. Full name <u>C Spire</u>	Date (Mo., Day, Year) <u>12 11 12</u>	Amount of each disbursement this period \$ <u>149.44</u>
Mailing Address		
City, State, Zip Code	<u>12 21 12</u>	\$ <u>149.44</u>
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>1835.80</u>

Name of Candidate or Committee Nickey Browning
 Reporting period Jan. 1 2012 through Dec 31 2012

ITEMIZED DISBURSEMENTS

A. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Gift Shop</u>	<u>8 9 12</u>	\$ <u>125.16</u>
Mailing Address <u>Main St.</u>		
City, State, Zip Code <u>Pontotoc Ms. 38863</u>	<u>11 9 12</u>	\$ <u>54.54</u>
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
B. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Gift Shop</u>	<u>2 8 12</u>	\$ <u>54.51</u>
Mailing Address <u>Main st</u>		
City, State, Zip Code <u>Pontotoc Ms. 38863</u>	<u>1 1 1</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>234.21</u>
C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Wal Mart</u>	<u>5 16 12</u>	\$ <u>28.89</u>
Mailing Address <u>Hwy. 15 N</u>		
City, State, Zip Code <u>Pontotoc Ms. 38863</u>	<u>12 21 12</u>	\$ <u>424.95</u>
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Wal Mart</u>	<u>12 13 12</u>	\$ <u>144.45</u>
Mailing Address <u>Hwy 15 N</u>		
City, State, Zip Code <u>Pontotoc Ms. 38863</u>	<u>1 1 1</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>598.27</u>
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Nickey Browning</u>	<u>Severely</u>	\$ <u>1634.52</u>
Mailing Address <u>162 W. Oxford St</u>	<u>Defest</u>	
City, State, Zip Code <u>Pontotoc Ms. 38863</u>	<u>1 1 1</u>	\$
Purpose of Disbursement (Optional) <u>Personal expenses</u>	Aggregate Year-to-date	\$ <u>1634.52</u>
F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
	<u>1 1 1</u>	\$
Mailing Address		
City, State, Zip Code	<u>1 1 1</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$