



REPORT OF RECEIPTS AND DISBURSEMENTS  
2021 Municipal Election



Name of Candidate Owen R. McNally  
 Address 20065 Commission Rd., Apt. C City/State/Zip Long Beach, MS 39560  
 Telephone (Work) 228-900-2500 (Home) 228-365-2500 (Fax) 601-385-3064  
 Contact Name Owen McNally Email Address owen@omcnallylaw.com  
 Office Sought Alderman 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 \$ | 3,681.45 | + | \$ 455.00    | \$ 4,136.00 | \$ 4,136.00           |
| Total amount of disbursements \$ | 2,910.92 | + | \$ 0.00      | \$ 2,910.92 | \$ 2,910.92           |
| Total amount of cash on hand     |          |   |              | \$ 1,207.42 |                       |

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

[Signature]  
Signature of Candidate

03/31/2021  
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).

\*\$18.00 discrepancy on

Name of Candidate or Committee Owen McNallyReporting period 02/01/2021 through 03/30/2021

## ITEMIZED RECEIPTS

| A. Source: Corporation PAC Individual <input checked="" type="radio"/> Loan<br>Other (please specify) _____   | Date<br>(Mo., Day, Year)  | Amount of each<br>receipt<br>this period |
|---|---------------------------|--|
| Full name <u>Owen McNally</u>   | <u>02/08/21</u>           | \$ <u>500.00</u>                         |
| Mailing Address <u>4011 Beatline Rd. Ste. 10</u>  | <u>02/09/21</u>           | \$ <u>481.45</u>                         |
| City, State, Zip Code <u>Long Beach, MS 39560</u>   | <u>   /   /   </u>        | \$                                       |
| Name of Employer (Required) <u>McNally Law, PLLC</u>  | <u>   /   /   </u>        | \$                                       |
| Occupation (Required) <u>Lawyer</u>   | Aggregate<br>year-to-date | \$ <u>981.45</u>                         |
| B. Source: Corporation PAC <input checked="" type="radio"/> Individual Loan<br>Other (please specify) _____   | Date<br>(Mo., Day, Year)  | Amount of each<br>receipt<br>this period |
| Full name <u>Jerry Levens</u>   | <u>2/09/21</u>            | \$ <u>200.00</u>                         |
| Mailing Address <u>20059 Pineville Rd.</u>  | <u>   /   /   </u>        | \$                                       |
| City, State, Zip Code <u>Long Beach, MS 39560</u>   | <u>   /   /   </u>        | \$                                       |
| Name of Employer (Required) <u>Retired</u>  | <u>   /   /   </u>        | \$                                       |
| Occupation (Required) <u>Retired CPA</u>  | Aggregate<br>year-to-date | \$ <u>200.00</u>                         |
| C. Source: Corporation PAC <input checked="" type="radio"/> Individual Loan<br>Other (please specify) _____   | Date<br>(Mo., Day, Year)  | Amount of each<br>receipt<br>this period |
| Full name <u>Sarah &amp; Steven M. McNally</u>  | <u>02/09/21</u>           | \$ <u>1000.00</u>                        |
| Mailing Address <u>20073 Commission Rd.</u>   | <u>03/18/21</u>           | \$ <u>1000.00</u>                        |
| City, State, Zip Code <u>Long Beach, MS 39560</u>   | <u>   /   /   </u>        | \$                                       |
| Name of Employer (Required) <u>Retired</u>  | <u>   /   /   </u>        | \$                                       |
| Occupation (Required) <u>Owner BRMS, LLC &amp; VOMCK, LLC</u>   | Aggregate<br>year-to-date | \$ <u>2000.00</u>                        |
| D. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input checked="" type="radio"/> Individual <input type="radio"/> Loan<br>Other (please specify) _____ | Date<br>(Mo., Day, Year)  | Amount of each<br>receipt<br>this period |
| Full name <u>Dr. Eugene D. McNally</u>  | <u>2/16/21</u>            | \$ <u>200.00</u>                         |
| Mailing Address <u>2020 Bayou LaPorte Dr.</u>   | <u>   /   /   </u>        | \$                                       |
| City, State, Zip Code <u>Biloxi, MS 39531</u>   | <u>   /   /   </u>        | \$                                       |
| Name of Employer (Required) <u>Retired</u>  | <u>   /   /   </u>        | \$                                       |
| Occupation (Required) <u>Retired Doctor</u>   | Aggregate<br>year-to-date | \$ <u>200.00</u>                         |

Name of Candidate or Committee Owen McNally  
 Reporting period 02/01/2021 through 03/30/2021

## ITEMIZED RECEIPTS

| A. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input checked="" type="radio"/> Individual <input type="radio"/> Loan<br>Other (please specify) _____ | Date<br>(Mo., Day, Year)          | Amount of each receipt<br>this period |
|---|-----------------------------------|---------------------------------------|
| Full name <b>Micah Stephen McNally</b>  | <u>02</u> / <u>23</u> / <u>21</u> | \$ 300.00                             |
| Mailing Address <b>8440 Firetower Rd.</b>   | __ / __ / __                      | \$                                    |
| City, State, Zip Code <b>Pass Christian, MS 39571</b>   | __ / __ / __                      | \$                                    |
| Name of Employer (Required) <b>Beatline Road-Mini Storage, LLC</b>  | __ / __ / __                      | \$                                    |
| Occupation (Required) <b>Manager (part owner Summit Self Storage, LLC)</b>  | Aggregate<br>year-to-date         | \$ 300.00                             |
| B. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input checked="" type="radio"/> Individual <input type="radio"/> Loan<br>Other (please specify) _____ |                                   |                                       |
| Full name <b>Below Threshold</b>  | <u>02</u> / <u>18</u> / <u>21</u> | \$ 160.00                             |
| Mailing Address   | <u>03</u> / <u>05</u> / <u>21</u> | \$ 195.00                             |
| City, State, Zip Code   | <u>03</u> / <u>12</u> / <u>21</u> | \$ 100.00                             |
| Name of Employer (Required)   | __ / __ / __                      | \$                                    |
| Occupation (Required)   | Aggregate<br>year-to-date         | \$ 455.00                             |
| C. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan<br>Other (please specify) _____            |                                   |                                       |
| Full name   | __ / __ / __                      | \$                                    |
| Mailing Address   | __ / __ / __                      | \$                                    |
| City, State, Zip Code   | __ / __ / __                      | \$                                    |
| Name of Employer (Required)   | __ / __ / __                      | \$                                    |
| Occupation (Required)   | Aggregate<br>year-to-date         | \$                                    |
| D. Source: <input type="radio"/> Corporation <input type="radio"/> PAC <input type="radio"/> Individual <input type="radio"/> Loan<br>Other (please specify) _____            |                                   |                                       |
| Full name   | __ / __ / __                      | \$                                    |
| Mailing Address   | __ / __ / __                      | \$                                    |
| City, State, Zip Code   | __ / __ / __                      | \$                                    |
| Name of Employer (Required)   | __ / __ / __                      | \$                                    |
| Occupation (Required)   | Aggregate<br>year-to-date         | \$                                    |

Name of Candidate or Committee Owen McNallyReporting period 02/01/2021 through 03/30/2021**ITEMIZED DISBURSEMENTS**Disbursements from contributions accumulated  Prior to January 1, 2018 or  On or After January 1, 2018

| A. Full name  | Date<br>(Mo., Day, Year)  | Amount of each<br>disbursement this period |
|---|---------------------------|--|
| Name Cheap  |                           |  |
| Mailing Address<br>4600 East Washington Street, Suite 305                   | 02/08/21                  | \$ 15.94                                   |
| City, State, Zip Code<br>Phoenix, AZ 85034                                  | 03/10/21                  | \$ 7.88                                    |
| Purpose of Disbursement (Optional)<br>Website                               | Aggregate<br>Year-to-date | \$ 23.82                                   |
| B. Full name  | Date<br>(Mo., Day, Year)  | Amount of each<br>disbursement this period |
| The Gazebo Gazette  |                           |  |
| Mailing Address<br>300 Davis, Ave.  | 03/16/21                  | \$ 400.00                                  |
| City, State, Zip Code<br>Pass Christian, MS 39571                           | ___/___/___               | \$   |
| Purpose of Disbursement (Optional)<br>Newspaper Ad                          | Aggregate<br>Year-to-date | \$ 400.00                                  |
| C. Full name  | Date<br>(Mo., Day, Year)  | Amount of each<br>disbursement this period |
| Elite Screen Printing   |                           |  |
| Mailing Address<br>PO BOX 17077   | 03/10/21                  | \$ 345.61                                  |
| City, State, Zip Code<br>Hattiesburg, MS 39404                              | ___/___/___               | \$   |
| Purpose of Disbursement (Optional)<br>Debate Shirts                         | Aggregate<br>Year-to-date | \$ 345.61                                  |
| D. Full name  | Date<br>(Mo., Day, Year)  | Amount of each<br>disbursement this period |
| Fiver International Ltd.  |                           |  |
| Mailing Address<br>8 Eliezer Kaplan Street                                  | 02/10/21                  | \$ 282.97                                  |
| City, State, Zip Code<br>Tel Aviv, 6473409 Isreal                           | ___/___/___               | \$   |
| Purpose of Disbursement (Optional)<br>Graphic Design (post card and flyer)  | Aggregate<br>Year-to-date | \$ 282.97                                  |
| E. Full name  | Date<br>(Mo., Day, Year)  | Amount of each<br>disbursement this period |
| Vista Print   |                           |  |
| Mailing Address<br>1503 Ranch Road 620 N Apt C                              | 03/10/21                  | \$ 252.62                                  |
| City, State, Zip Code<br>Lakeway, TX 78734-3234                             | 03/16/21                  | \$ 390.12                                  |
| Purpose of Disbursement (Optional)<br>Flyer and Post Card including mailing | Aggregate<br>Year-to-date | \$ 642.74                                  |
| F. Full name  | Date<br>(Mo., Day, Year)  | Amount of each<br>disbursement this period |
| Circuit Clerk Harrison County   |                           |  |
| Mailing Address<br>1801 23rd Ave.   | 02/19/21                  | \$ 26.00                                   |
| City, State, Zip Code<br>Gulfport, MS 39501                                 | ___/___/___               | \$   |
| Purpose of Disbursement (Optional)<br>Voter Information                     | Aggregate<br>Year-to-date | \$ 26.00                                   |

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Reporting period 02/01/2021 through 03/30/2021

## ITEMIZED DISBURSEMENTS

Disbursements from contributions accumulated  Prior to January 1, 2018 or  On or After January 1, 2018

| A. Full name                                      | Date<br>(Mo., Day, Year)  | Amount of each<br>disbursement this period |
|---|---------------------------|--|
| All Signs, Inc.                                   | 02 / 09 / 21              | \$ 280.88                                  |
| Mailing Address<br>PO BOX 6265                    | 02 / 18 / 21              | \$ 280.87                                  |
| City, State, Zip Code<br>Gulfport, MS 39506-6265  | Aggregate<br>Year-to-date | \$ 561.75                                  |
| Purpose of Disbursement (Optional)<br>Yard Signs. |                           |  |
| B. Full name                                      | Date<br>(Mo., Day, Year)  | Amount of each<br>disbursement this period |
| Astro Clown Productions, LLC                      | 02 / 22 / 21              | \$ 400.00                                  |
| Mailing Address<br>1140 Old Spanish Trail         | _ / _ / _                 | \$   |
| City, State, Zip Code<br>Bay St. Louis, MS 39520  | Aggregate<br>Year-to-date | \$ 400.00                                  |
| Purpose of Disbursement (Optional)<br>Video       |                           |  |
| C. Full name                                      | Date<br>(Mo., Day, Year)  | Amount of each<br>disbursement this period |
| Facebook  | 03 / 22 / 21              | \$   |
| Mailing Address<br>1 Hacker Way                   | 03 / 29 / 21              | \$   |
| City, State, Zip Code<br>Menlo Park, CA 94025     | Aggregate<br>Year-to-date | \$ 155.00                                  |
| Purpose of Disbursement (Optional)<br>Ads         |                           |  |
| D. Full name                                      | Date<br>(Mo., Day, Year)  | Amount of each<br>disbursement this period |
| Mailing Address                                   | _ / _ / _                 | \$   |
| City, State, Zip Code                             | _ / _ / _                 | \$   |
| Purpose of Disbursement (Optional)                | Aggregate<br>Year-to-date | \$   |
| E. Full name                                      | Date<br>(Mo., Day, Year)  | Amount of each<br>disbursement this period |
| Mailing Address                                   | _ / _ / _                 | \$   |
| City, State, Zip Code                             | _ / _ / _                 | \$   |
| Purpose of Disbursement (Optional)                | Aggregate<br>Year-to-date | \$   |
| F. Full name                                      | Date<br>(Mo., Day, Year)  | Amount of each<br>disbursement this period |
| Mailing Address                                   | _ / _ / _                 | \$   |
| City, State, Zip Code                             | _ / _ / _                 | \$   |
| Purpose of Disbursement (Optional)                | Aggregate<br>Year-to-date | \$   |