

Purchasing Department
Madison County Board of Supervisors
146 West Center Street
Canton, Mississippi 39046

601-855-5503
hardy@madison-co.com

16 July 2013

District 1 Supervisor John Bell Crosby
District 2 Supervisor Ronny Lott
District 3 Supervisor Gerald Steen
District 4 Supervisor Karl Banks
District 5 Supervisor Paul Griffin

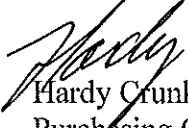
Subject: Place monthly credit card report on minutes

Gentlemen:

Per statutory requirements, please place the following monthly credit card report and accompanying documentation on the minutes:

General County M&F for period 10 June 2013 – 10 July 2013.

Thank you,


Hardy Crunk
Purchasing Clerk

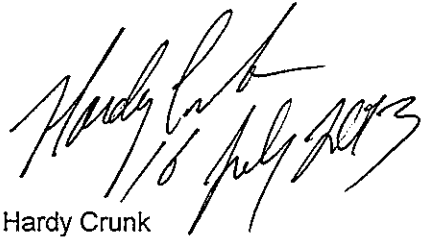
CREDIT CARD REPORT

CREDIT CARD: VISA M&F
 NUMBER: 547795007520XXXX
 PERIOD: 10 JUNE 2013 - 10 JULY 2013

CARD USER	PURPOSE	DATE OF USE	VENDOR NAME	AMOUNT	DESCRIPTION
JULIA HODGES	AIRFARE	12-Jun-13	DELTA	473.60	ELECTION CONFERENCE
PATRICIA TRUESDALE	AIRFARE	12-Jun-13	DELTA	473.60	ELECTION CONFERENCE
AZZIE JACKSON	AIRFARE	12-Jun-13	DELTA	473.60	ELECTION CONFERENCE
JULIA HODGES	LODGING	15-Jun-13	HYATT	180.67	ELECTIONS CONFERENCE
PATRICIA TRUESDALE	LODGING	15-Jun-13	HYATT	180.67	ELECTIONS CONFERENCE
AZZIE JACKSON	LODGING	16-Jun-13	HYATT	180.67	ELECTIONS CONFERENCE
LEROY LACEY	LODGING	16-Jun-13	HYATT	180.67	ELECTIONS CONFERENCE
TIMOTHY JENKINS	LODGING	25-Jun-13	HYATT	180.67	ELECTIONS CONFERENCE
GERALD STEEN	LODGING	20-Jun-13	BEAU RIVAGE	344.46	SUPS CONVENTION
MIKE ESPY	LODGING	20-Jun-13	BEAU RIVAGE	344.46	SUPS CONVENTION
SHELTON VANCE	LODGING	20-Jun-13	BEAU RIVAGE	344.46	SUPS CONVENTION
JOHN BELL CROSBY	LODGING	21-Jun-13	BEAU RIVAGE	344.46	SUPS CONVENTION
PAUL GRIFFIN	LODGING	25-Jun-13	BEAU RIVAGE	688.92	SUPS CONVENTION

TOTAL CHARGES \$4,390.91

AMOUNT TO PAY \$4,390.91



Hardy Crunk
 Purchase Clerk



MADISON BOARD SUPRVISRS1
Account Number: XXXX XXXX XXXX 7943

Billing Questions:
800-854-7642

Website:
www.24-7cardaccess.com

Send Billing Inquiries To:
P.O. Box 2988, Omaha, NE 68103

MERCHANTS & FARMERS BANK Credit Card Account Statement
June 10, 2013 to July 10, 2013

SUMMARY OF ACCOUNT ACTIVITY

Previous Balance	\$3,183.12
- Payments	\$834.50
- Other Credits	\$0.00
+ Purchases	\$4,390.91
+ Cash Advances	\$0.00
+ Fees Charged	\$0.00
+ Interest Charged	\$76.76
= New Balance	\$6,816.29
Account Number	XXXX XXXX XXXX 7943
Credit Limit	\$20,000.00
Available Credit	\$13,183.00
Statement Closing Date	July 10, 2013
Days in Billing Cycle	31

PAYMENT INFORMATION

New Balance:	\$6,816.29
Minimum Payment Due:	NONE
Payment Due Date:	August 4, 2013

MESSAGES

IMPORTANT: On August 1st, 2013 we will begin upgrading the www.24-7CardAccess.com website to a new and improved platform. What this means to you is that you will have access to several new features that will make it easier than ever for you to monitor, manage, and pay your credit card on-line. The website address (www.24-7CardAccess.com) will remain the same; however, the first time that you access the new site you will need to re-register. Please call us at the number on the back of your credit card if you have questions about the new website.

NOTICE: See reverse side of page 1 for important information.

5106 0001 BHH 001 7 5 130710 0 PAGE 1 of 3 10 1443 0000 BSI 01A85106 39344

MERCHANTS & FARMERS BANK
PO BOX 723847
ATLANTA GA 31139-0847



Account Number: XXXX XXXX XXXX 7943
New Balance: \$6,816.29
Payment Due Date: August 4, 2013

Please complete and enclose the bottom portion for proper credit.

Indicate name or address change on reverse side and check here.

Make Check Payable to:

BANKCARD CENTER
PO BOX 569200
DALLAS TX 75356



Amount Enclosed: \$

4390.91

Payments received at other than the address shown on the front of this statement may be subject to a delay in crediting of up to 5 days after the date of receipt.

MADISON BOARD SUPRVISRS1 P209
MADISON BOARD SUPERVISOR 39344
PO BOX 608
CANTON MS 39046-0608





MADISON BOARD SUPRVISRS1
Account Number: XXXX XXXX XXXX 7943

TRANSACTIONS

An amount followed by a minus sign (-) is a credit unless otherwise indicated.

Tran Date	Post Date	Reference Number	Transaction Description	Amount
07/05	07/05	85477955S5SZ5EPLM	PAYMENT - THANK YOU	\$834.50-
06/12	06/12	554173454TBRXS4NR	DELTA 00623330038855 DELTA.COM CA HODGES/JULIA	✓ \$473.60
		08/14/13 1	JACKSON ATLANTA	
		08/14/13 2	ATLANTA SAVANNAH	
		08/18/13 3	SAVANNAH ATLANTA	
		08/18/13 4	ATLANTA JA	
06/12	06/12	554173454TBRXS4N6	DELTA 00623330038844 DELTA.COM CA TRUESDALE/PATRI	✓ \$473.60
		08/14/13 1	JACKSON ATLANTA	
		08/14/13 2	ATLANTA SAVANNAH	
		08/18/13 3	SAVANNAH ATLANTA	
		08/18/13 4	ATLANTA JA	
06/12	06/12	554173454TBRXS4P0	DELTA 00623330038833 DELTA.COM CA JACKSON/AZZIE L	✓ \$473.60
		08/14/13 1	JACKSON ATLANTA	
		08/14/13 2	ATLANTA SAVANNAH	
		08/18/13 3	SAVANNAH ATLANTA	
		08/18/13 4	ATLANTA JA	
06/15	06/15	55541865703T5ML5W	HYATT HOTELS SAVANNAH SAVANNAH GA	✓ \$180.67
		CHECK-IN 06/15/13	FOLIO #000005477	
06/15	06/15	55541865703T5ML9Q	HYATT HOTELS SAVANNAH SAVANNAH GA	✓ \$180.67
		CHECK-IN 06/15/13	FOLIO #000005477	
06/16	06/16	55541865803TG98QE	HYATT HOTELS SAVANNAH SAVANNAH GA	✓ \$180.67
		CHECK-IN 06/16/13	FOLIO #000005477	
06/16	06/16	55541865803TG9893	HYATT HOTELS SAVANNAH SAVANNAH GA	✓ \$180.67
		CHECK-IN 06/16/13	FOLIO #000005477	
06/20	06/20	55541865Q03T5PQJX	BEAU RIVAGE HOTEL CASI BILOXI MS	✓ \$344.46 GS
		CHECK-IN 06/18/13	FOLIO #000005477	
06/20	06/20	55541865Q03T5PQJ3	BEAU RIVAGE HOTEL CASI BILOXI MS	✓ \$344.46 ME
		CHECK-IN 06/18/13	FOLIO #000005477	
06/20	06/20	55541865Q03T5PQKD	BEAU RIVAGE HOTEL CASI BILOXI MS	✓ \$344.46 GV
		CHECK-IN 06/18/13	FOLIO #000005477	
06/20	06/20	55541865Q03T5PQRV	BEAU RIVAGE HOTEL CASI BILOXI MS	✓ \$344.46 GB
		CHECK-IN 06/18/13	FOLIO #000005477	
06/21	06/21	55541865E03T2VW86	BEAU RIVAGE HOTEL CASI BILOXI MS	✓ \$688.92 PG
		CHECK-IN 06/17/13	FOLIO #000005477	
06/25	06/25	55541865H03TM1M7R	HYATT HOTELS SAVANNAH SAVANNAH GA	✓ \$180.67
		CHECK-IN 06/25/13	FOLIO #000005477	

INTEREST CHARGE CALCULATION

Your Annual Percentage Rate (APR) is the annual interest rate on your account

Type of Balance	Annual Percentage Rate (APR)	Balance Subject to Interest Rate	Days in Billing Cycle	Interest Charge
Purchases	14.49% (v)	\$6,355.11	31	\$76.76
Cash Advances	20.49% (v)	\$0.00	31	\$0.00

(v) - variable

NOTICE: See reverse side of page 1 for important information.

Hardy Crunk

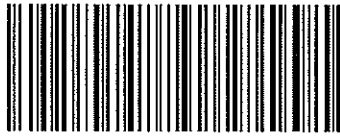
From: Delta Air Lines <DeltaAirLines@e.delta.com>
Sent: Wednesday, June 12, 2013 1:47 PM
To: hardy@madison-co.com
Subject: JULIA H JACKSON 14AUG13

[Comment/Complaint ?](#) | [Add to Address Book ?](#)



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YOUR ITINERARY AND RECEIPT



To access your boarding pass at the airport, print email now and scan at a Delta self-service kiosk.

Please review this information before your trip. If you need to contact Delta or check your flight information, go to [delta.com](#) or call 1-800-221-1212. For a complete list of world wide phone numbers, please visit [www.delta.com/contact_us](#).

You can exchange, reissue and refund eligible electronic tickets at [delta.com](#). Take control and make changes to your itineraries at [delta.com/itineraries](#).

You can check in for your flight up to 24 hours prior to departure time. Check in online by clicking the link below or download the Fly Delta app here. You can also use the app to change seats, track your bag, view your flight status and so much more.

Thanks for choosing Delta.

Flight Confirmation #: **GEKF3N** | Ticket #: **00623330038855**

[CHECK IN ONLINE >](#)

Your Flight Information

Wed 14AUG				
LV 7:49am	JACKSON	AR 10:15am	ATLANTA	DELTA 2156 ECONOMY (V)
LV 11:09am	ATLANTA	AR 12:14pm	SAVANNAH	DELTA 1752 ECONOMY (V)
Sun 18AUG				
LV 9:05am	SAVANNAH	AR 10:15am	ATLANTA	DELTA 1920 ECONOMY (V)
LV 12:10pm	ATLANTA	AR 12:22pm	JACKSON	DELTA 2081 ECONOMY (V)

Your Flight Details [Manage Trip >](#)

Passenger Details	Flights	Seats
JULIA HODGES	DELTA 2156	20A
>Add SkyMiles #	DELTA 1752	19A
>Join SkyMiles	DELTA 1920	27A
	DELTA 2081	10F

***Visit delta.com or use the Fly Delta app to view, select or change your seat

Receipt Information		
Billing Details		
Passenger: JULIA HODGES	Payment Method: CA*****7943	Ticket Number: 00623330038855
FARE:	400.00 USD	
Taxes/Carrier-imposed Fees:	73.60	
Total:	473.60 USD	
NONREF/PENALTY/APPLIES		
<p>This ticket is non-refundable unless issued at a fully refundable fare. Some fares may not allow changes. If allowed, any change to your itinerary may require payment of a change fee and increased fare. Failure to appear for any flight without notice to Delta will result in cancellation of your remaining reservation.</p> <p>Note: When using certain vouchers to purchase tickets, remaining credits may not be refunded. Additional charges and/or credits may apply and are displayed in the sections below.</p>		

Details - Taxes/Carrier-Imposed Fees	
Total:	73.60
Itemized:	10.00 AY 18.00 XF 15.60 ZP 30.00 US

Fare Details
JAN DL X/ATL DL SAV200.00VA14A0SZ DL X/ATL DL JAN200.00VA14A0SZ USD400.00END ZP JANATLSAVATL XF JAN4.5ATL4.5SAV4.5ATL4.5

Ticketing Details				
Passenger:	Ticket #:	Place of Issue:	Issue Date:	Expiration Date:
JULIA HODGES	00623330038855	LAXWEB	12JUN13	12JUN14

Baggage Fees

Hardy Crunk

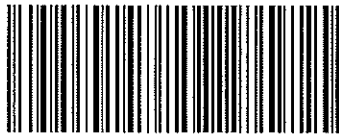
From: Delta Air Lines <DeltaAirLines@e.delta.com>
Sent: Wednesday, June 12, 2013 1:47 PM
To: hardy@madison-co.com
Subject: AZZIE L JACKSON 14AUG13

[Comment/Complaint ?](#) | [Add to Address Book ?](#)



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YOUR ITINERARY AND RECEIPT



To access your boarding pass at the airport, print email now and scan at a Delta self-service kiosk.

Please review this information before your trip. If you need to contact Delta or check your flight information, go to [delta.com](#) or call 1-800-221-1212. For a complete list of world wide phone numbers, please visit [www.delta.com/contact_us](#).

You can exchange, reissue and refund eligible electronic tickets at [delta.com](#). Take control and make changes to your itineraries at [delta.com/itineraries](#).

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Thanks for choosing Delta.

Flight Confirmation #: **GEKF3N** | Ticket #: **00623330038833**

CHECK IN ONLINE >

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Sun 18AUG				
LV 9:05am	SAVANNAH	AR 10:15am	ATLANTA	DELTA 1920 ECONOMY (V)
LV 12:10pm	ATLANTA	AR 12:22pm	JACKSON	DELTA 2081 ECONOMY (V)

Your Flight Details [Manage Trip >](#)

Passenger Details	Flights	Seats
AZZIE LEE JACKSON	DELTA 2156	20C
>Add SkyMiles #	DELTA 1752	19C
>Join SkyMiles	DELTA 1920	27C
	DELTA 2081	10D

***Visit delta.com or use the Fly Delta app to view, select or change your seat

Receipt Information		
Billing Details		
Passenger: AZZIE LEE JACKSON	Payment Method: CA*****7943	Ticket Number: 00623330038833
FARE:	400.00 USD	
Taxes/Carrier-imposed Fees:	73.60	
Total:	473.60 USD	
NONREF/PENALTY/APPLIES		
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Details - Taxes/Carrier-imposed Fees	
Total:	73.60
Itemized:	10.00 AY 18.00 XF 15.60 ZP 30.00 US

Fare Details
JAN DL X/ATL DL SAV200.00VA14A0SZ DL X/ATL DL JAN200.00VA14A0SZ USD400.00END ZP JANATLSAVATL XF JAN4.5ATL4.5SAV4.5ATL4.5

Ticketing Details				
Passenger:	Ticket #:	Place of Issue:	Issue Date:	Expiration Date:
AZZIE LEE JACKSON	00623330038833	LAXWEB	12JUN13	12JUN14

Baggage Fees

Hardy Crunk

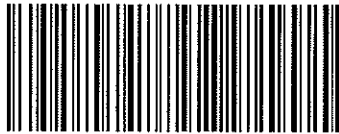
From: Delta Air Lines <DeltaAirLines@e.delta.com>
Sent: Wednesday, June 12, 2013 1:47 PM
To: hardy@madison-co.com
Subject: PATRICIA B JACKSON 14AUG13

[Comment/Complaint ?](#) | [Add to Address Book ?](#)



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Thanks for choosing Delta.

Flight Confirmation #: **GEKF3N** | Ticket #: **00623330038844**

CHECK IN ONLINE >

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LV 7:49am	JACKSON	AR 10:15am	ATLANTA	DELTA 2156 ECONOMY (V)
LV 11:09am	ATLANTA	AR 12:14pm	SAVANNAH	DELTA 1752 ECONOMY (V)
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LV 12:10pm	ATLANTA	AR 12:22pm	JACKSON	DELTA 2081 ECONOMY (V)

Your Flight Details [Manage Trip >](#)

Passenger Details	Flights	Seats
PATRICIA B TRUESDALE	DELTA 2156	20B
>Add SkyMiles #	DELTA 1752	19B
>Join SkyMiles	DELTA 1920	27B
	DELTA 2081	10E

***Visit delta.com or use the Fly Delta app to view, select or change your seat

Receipt Information		
Billing Details		
Passenger: PATRICIA B TRUESDALE	Payment Method: CA*****7943	Ticket Number: 00623330038844
FARE:	400.00 USD	
Taxes/Carrier-imposed Fees:	73.60	
Total:	473.60 USD	
NONREF/PENALTY/APPLIES		
<p>This ticket is non-refundable unless issued at a fully refundable fare. Some fares may not allow changes. If allowed, any change to your itinerary may require payment of a change fee and increased fare. Failure to appear for any flight without notice to Delta will result in cancellation of your remaining reservation.</p> <p>Note: When using certain vouchers to purchase tickets, remaining credits may not be refunded. Additional charges and/or credits may apply and are displayed in the sections below.</p>		

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Total:	73.60
Itemized:	10.00 AY 18.00 XF 15.60 ZP 30.00 US

Fare Details
JAN DL X/ATL DL SAV200.00VA14A0SZ DL X/ATL DL JAN200.00VA14A0SZ USD400.00END ZP JANATLSAVATL XF JAN4.5ATL4.5SAV4.5ATL4.5

Ticketing Details				
Passenger:	Ticket #:	Place of Issue:	Issue Date:	Expiration Date:
PATRICIA B TRUESDALE	00623330038844	LAXWEB	12JUN13	12JUN14

Baggage Fees

1) Madison County
2) 601 859 5875

Date/Time: Jun. 14. 2013 7:01AM

File No. Mode Destination

Page Not Sent
Pg(s) Result

0925 Memory TX 919129443641

P. 5 OK

Reason for error or line fail
E:1} Hang up or line fail
E:3} No answer
E:5} Exceeded max. E-mail size

E:2} Busy
E:4} No facsimile connection

**THE ELECTION CENTER'S
29th ANNUAL NATIONAL CONFERENCE**
Savannah, Georgia
August 16 - August 19, 2013
REGISTRATION FORM

(Please use a separate form for each person registering)

NAME: Julia Hodges
OFFICE ADDRESS: P.O. Box 608
(Name and office phone number/number will be printed on this address. All addresses in bold/italic print.)
CITY/STATE/ZIP: CARTON, MS 39046
TELEPHONE: OFFICE: 601-859-0312 Home: 601-906-9780
FAX: 601-859-0312 (FOR EMERGENCIES)

CONFERENCE REGISTRATION FEES
Registration and check received by the Conference Office no later than July 30, 2013
Gold, Silver, Blue and Associate: \$649
Non-Members: \$649

Registration and check received after July 30, 2013 or at the Conference: \$449
Early register all attendees to wear Election Center name badges to enter for meeting rooms and exhibit area. If you choose to register at the conference you may be relieved up to two hours in order to receive your registration. Sorry, we cannot make exceptions.
Gold, Silver, Blue and Associate: \$549
Non-Members: \$749

Registration fee enclosed: \$ 449
To register and pay by credit card, go to: <http://www.electioncenter.org>
Membership Number: 5100

Are you a CERA graduate? Yes No If Yes, what year? _____

CANCELLATION POLICY: Written cancellation stating reason for same must be received by the conference office no later than July 30, 2013 in order to receive full credit toward a class, workshop or conference to be used during the next calendar year, less a \$50 processing fee. There will be no credit given for cancellations received on or after July 31, 2013.
Checks return completed form and your check in order to reach the Conference Office by July 30, 2013 in order to avoid the additional fee to:
The Election Center
Conference Center
P.O. Box 968
Elk Grove, California 95759

MAIL THAT REQUIRES A SIGNATURE FOR DELIVERY CANNOT BE ACCEPTED

For additional information, please call Pat Hawkins at (915) 686-7920.
The Election Center's Federal I.D. Number is 54-1578960

HYATT REGENCY (912) 944-3844

Hyatt Regency Savannah - 2 West Bay Street - Savannah, Georgia
Phone: (912) 238-1234 Toll Free: (888) 421-1442 Reservations Fax: (912) 3641
THE ELECTION CENTER ANNUAL NATIONAL CONFERENCE AUGUST 11-19, 2013

Name: Julia Hodges Company: Election
Address: P.O. Box 608 City: CARTON
State: MS Zip: 39046 Phone: 601-859-0312 Fax: 601-859-0312
Special Requests: NON-SMOKING Gold Passport #:
Arrival Date: 8-14-13 at 3:00 (Arrival check-in time is 3:00pm)
Accommodations prior to that time will be handled on an individual basis
Departure Date: 8-18-13 at 12:00 (midnight) Check-out time is 12:00 noon

Number of Adults over 18 Years: 1
Name(s) of additional person(s) sharing room (over 18 years of age):
Name: _____ Email: _____ Exp. Date: _____
Name: _____ Email: _____ Exp. Date: _____
Name: _____ Email: _____ Exp. Date: _____

Please check the type of accommodation desired.
All accommodations are subject to availability at check-in.

No. of Rooms	Type of Accommodation	Rate
	SINGLE: One (1) Person	\$390.00
	DOUBLE: Two (2) Persons, One (1) Bed	\$156.00
<u>1</u>	DOUBLE: Two (2) Persons, Two (2) Beds	<u>\$198.00</u>
	TRIPLE/QUAD: Three (3) or Four (4) Persons	not available

For TRIPLE and QUAD reservations, please list all names above. Suite rates are available upon request. Please confirm reservations at 601-233-1234.
Reservations must be received by August 1, 2013 by midnight.
After the above date, rooms will be confirmed on a space and rate available basis only.
Accommodations for the Disabled:
The Hyatt Regency Savannah, in compliance with the American Disabilities Act, has equipment and services available. Please inform us of your needs prior to arrival.
You must provide a credit card when making a reservation.
Are you using a Credit Card? Fill in American Express, Diners Club, VISA/Master Card or Discover Card Information below:
Card Type: Master Card
Credit Number: 5477-9500-7520-7945 Expiry Date: 11/15
Name of Card Holder: Madison Board Supervisor S

Advance Deposit: Please include one night's room plus 10% tax and 31 city occupancy tax.
Deposits are not refundable.

**THE ELECTION CENTER'S
29th ANNUAL NATIONAL CONFERENCE**

Savannah, Georgia
August 15 – August 16, 2013
REGISTRATION FORM

(Please use a separate form for each person registering)

NAME: Julia Hodges
OFFICE ADDRESS P.O. Box 608
(Address and office phone number provided will be printed on the attendee list distributed to conference participants)
CITY/STATE/ZIP: CANTON, MS 39046
TELEPHONE: Office: 601-859-0312 Home: 601-906-9780
FAX: 601-859-0312 (FOR EMERGENCIES)

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no later than July 30, 2013

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The Election Center
Conference Center
P.O. Box 965
Elk Grove, California 95759

MAIL THAT REQUIRES A SIGNATURE FOR DELIVERY CANNOT BE ACCEPTED

For additional information, please call Pat Hawkins at (916) 686-7928.
The Election Center's Federal I.D. Number is 54-1578880



(912) 944-3641

Hyatt Regency Savannah • 2 West Bay Street • Savannah, Georgia

Phone: (912) 238-1234 Toll Free: (888) 421-1442 Reservations Fax: (912) 3641
THE ELECTION CENTER ANNUAL NATIONAL CONFERENCE AUGUST 11-19, 2013

Name: Julia Hodges Company: Election

Address: P.O. Box 608 City: CANTON

State MS Zip 39046 Phone: 601-859-0312 Fax#: 601-859-0312

Special Requests: NON-Smoking Gold Passport #: _____

Arrival Date 8-14-13 at 3:00 (am/pm) Check-in time is 3:00pm
Accommodations prior to that time will be handled on an individual basis

Departure Date 8-18-13 at 12:N (am/pm) Check-out time is 12:00 noon

Number of Adults over 18 Years 1

Name(s) of additional person(s) sharing rooms (over 18 years of age):

Name: _____ Credit Card #: _____ Exp. Date: _____

Name: _____ Credit Card #: _____ Exp. Date: _____

Name: _____ Credit Card #: _____ Exp. Date: _____

Please check the type of accomodation desired.
All accomodations are subject to availability at check-in.

No. of Rooms	Type of Accomodation	Rate
	SINGLE: One (1) Person	\$159.00
	DOUBLE: Two (2) Persons, One (1) Bed	\$159.00
<u>1</u>	DOUBLE: Two (2) Persons, Two (1) Beds	<u>\$159.00</u>
	RIVERVIEW ROOM (upon availability)	add'l \$64.00

For TRIPLE and QUAD reservations, please list all names above. Suite rates are available upon request. Please contact reservations at 800-233-1234.

Reservations must be received by **August 1, 2013 by midnight.**

After the above date, rooms will be confirmed on a space and rate available basis only.

Accommodations for the Disabled:

The Hyatt Regency Savannah, in compliance with the American Disabilities Act, has equipment and services available. Please inform us of your needs prior to arrival.

You must provide a credit card when making a reservation.

Assured by Credit Card: Fill In American Express, Diners Club, VISA MasterCard or Discover Card Information below:

Card Type: Master Card

Credit Number: 5477-9500-7520-7943 Expire Date: 11/15

Name of Card Holder: Madison Board SUPERVISORS

Advance Deposit: Please include one night's room plus 13% tax and \$1 city occupancy tax. Deposits are not refundable.

**THE ELECTION CENTER'S
29th ANNUAL NATIONAL CONFERENCE**

Savannah, Georgia
August 15 – August 16, 2013
REGISTRATION FORM

(Please use a separate form for each person registering)
NAME: Patricia B. Truesdale
OFFICE ADDRESS P.O. Box 608
(Address and office phone number provided will be printed on the attendee list distributed to conference participants)
CITY/STATE/ZIP: CANTON, MS 39046
TELEPHONE: Office: 601-859-0312 Home: 601-856-7884
FAX: 601-859-0312 (FOR EMERGENCIES)

CONFERENCE REGISTRATION FEES

Registration and check received by the Conference Office
no later than July 30, 2013

Gold, Silver, Blue and Associate..... \$449
Non-Members..... \$649

Registration and check received **after July 30, 2013 or at the Conference:**
**Security requires all attendees to wear Election Center name badges to enter the meeting rooms and exhibit area. If you choose to register at the conference you may be delayed up to two hours in order to process your registration. Sorry, we cannot invoice.*

Gold, Silver, Blue and Associate..... \$549
Non-Members..... \$749

Registration fee enclosed: \$ 449
To register and pay by credit card, go to: <http://www.electioncenter.org>
Membership Number: 4187

Are you a CERA graduate? Yes ___ No If Yes, what year? _____

CANCELLATION POLICY: Written cancellation stating reason for same must be received by the conference office **no later than July 30, 2013** in order to receive full credit toward a class, workshop or conference to be used during the next calendar year less a \$50 processing fee. There will be no credit given for cancellations received on or after July 31, 2013.

Please return completed form and your check in order to reach the Conference Office by **July 30, 2013** in order to avoid the additional fee to:

The Election Center
Conference Center
P.O. Box 965
Elk Grove, California 95759

MAIL THAT REQUIRES A SIGNATURE FOR DELIVERY CANNOT BE ACCEPTED

For additional information, please call Pat Hawkins at (916) 686-7928.
The Election Center's Federal I.D. Number is 54-1578880



Hyatt Regency Savannah • 2 West Bay Street • Savannah, Georgia
Phone: (912) 238-1234 Toll Free: (888) 421-1442 Reservations Fax: (912) 3641
THE ELECTION CENTER ANNUAL NATIONAL CONFERENCE AUGUST 11-19, 2013
Name: Patricia B. Truesdale Company: Elections

Address: P.O. Box 608 City: Canton
State MS Zip 39046 Phone: 601-859-0312 Fax#: 601-857-0312
Special Requests: NON-Smoking Gold Passport #: _____
Arrival Date 8-14-13 at 3:00 (am/pm) Check-in time is 3:00pm
Accommodations prior to that time will be handled on an individual basis
Departure Date 8-18-13 at 12:00 (am/pm) Check-out time is 12:00 noon

Number of Adults over 18 Years 2
Name(s) of additional person(s) sharing rooms (over 18 years of age):
Name: LINDA WATKINS Credit Card #: _____ Exp. Date _____
Name: _____ Credit Card #: _____ Exp. Date _____
Name: _____ Credit Card #: _____ Exp. Date _____

Please check the type of accomodation desired.
All accomodations are subject to availability at check-in.

No. of Rooms	Type of Accomodation	Rate
	SINGLE: One (1) Person	\$159.00
	DOUBLE: Two (2) Persons, One (1) Bed	\$159.00
<u>1</u>	DOUBLE: Two (2) Persons, Two (1) Beds	<u>\$159.00</u>
	RIVERVIEW ROOM (upon availability)	add'l \$64.00

For TRIPLE and QUAD reservations, please list all names above. Suite rates are available upon request. Please contact reservations at 800-233-1234.

Reservations must be received by **August 1, 2013 by midnight.**

After the above date, rooms will be confirmed on a space and rate available basis only.

Accommodations for the Disabled:

The Hyatt Regency Savannah, in compliance with the American Disabilities Act, has equipment and services available. Please inform us of your needs prior to arrival.

You must provide a credit card when making a reservation.

Assured by Credit Card: Fill in American Express, Diners Club, VISA MasterCard or Discover Card information below:

Card Type: Master Card
Credit Number: 5477-9500-7520-7943 Expire Date: 11/15
Name of Card Holder: Madison Board Supervisors

Advance Deposit: Please include one night's room plus 13% tax and \$1 city occupancy tax. Deposits are not refundable.

**THE ELECTION CENTER'S
29th ANNUAL NATIONAL CONFERENCE**

Savannah, Georgia
August 15 – August 16, 2013
REGISTRATION FORM

(Please use a separate form for each person registering)

NAME: Azzie L. Jackson Adams

OFFICE ADDRESS P.O. Box 608
(Address and office phone number provided will be printed on the attendee list distributed to conference participants)

CITY/STATE/ZIP: Canton, MS 39046

TELEPHONE: Office: 601-859-0312 Home: 601-859-2415
FAX: 601-859-0312 (FOR EMERGENCIES)

CONFERENCE REGISTRATION FEES

Registration and check received by the Conference Office
no later than July 30, 2013

Gold, Silver, Blue and Associate..... \$449
Non-Members..... \$649

Registration and check received **after July 30, 2013 or at the Conference:**
**Security requires all attendees to wear Election Center name badges to enter the meeting rooms and exhibit area. If you choose to register at the conference you may be delayed up to two hours in order to process your registration. Sorry, we cannot invoice.*

Gold, Silver, Blue and Associate..... \$549
Non-Members..... \$749

Registration fee enclosed: \$ _____
To register and pay by credit card, go to: <http://www.electioncenter.org>
Membership Number: 2329

Are you a CERA graduate? Yes ___ No If Yes, what year? _____

CANCELLATION POLICY: Written cancellation stating reason for same must be received by the conference office **no later than July 30, 2013** in order to receive full credit toward a class, workshop or conference to be used during the next calendar year less a \$50 processing fee. There will be no credit given for cancellations received on or after July 31, 2013.
Please return completed form and your check in order to reach the Conference Office by **July 30, 2013** in order to avoid the additional fee to:

The Election Center
Conference Center
P.O. Box 965
Elk Grove, California 95759

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For additional information, please call Pat Hawkins at (916) 686-7928.
The Election Center's Federal I.D. Number is 54-1578880



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Phone: (912) 238-1234 Toll Free: (888) 421-1442 Reservations Fax: (912) 3641

THE ELECTION CENTER ANNUAL NATIONAL CONFERENCE AUGUST 11-19, 2013

Name: Azzie L. Jackson Adams Company: Elections

Address: P.O. Box 608 City: Canton

State MS Zip 39046 Phone: 601-859-0312 Fax#: 601-859-0312

Special Requests: Non-smoking Gold Passport #: _____

Arrival Date 8-14-13 at 3:00 (am/pm) Check-in time is 3:00pm
Accommodations prior to that time will be handled on an individual basis

Departure Date 8-18-13 at 12:00 (am/pm) Check-out time is 12:00 noon

Number of Adults over 18 Years 1
Name(s) of additional person(s) sharing rooms (over 18 years of age):

Name: _____ Credit Card #: _____ Exp. Date _____
Name: _____ Credit Card #: _____ Exp. Date _____
Name: _____ Credit Card #: _____ Exp. Date _____

Please check the type of accomodation desired.
All accomodations are subject to availability at check-in.

No. of Rooms	Type of Accomodation	Rate
	SINGLE: One (1) Person	\$159.00
	DOUBLE: Two (2) Persons, One (1) Bed	\$159.00
<u>1</u>	DOUBLE: Two (2) Persons, Two (1) Beds	<u>\$159.00</u>
	RIVERVIEW ROOM (upon availability)	add'l \$64.00

For TRIPLE and QUAD reservations, please list all names above. Suite rates are available upon request. Please contact reservations at 800-233-1234.

Reservations must be received by **August 1, 2013 by midnight.**

After the above date, rooms will be confirmed on a space and rate available basis only.

Accommodations for the Disabled:

The Hyatt Regency Savannah, in compliance with the American Disabilities Act, has equipment and services available. Please inform us of your needs prior to arrival.

You must provide a credit card when making a reservation.

Assured by Credit Card: Fill in American Express, Diners Club, VISA MasterCard or Discover Card information below:

Card Type: Master Card

Credit Number: 5477-9500-7520-7943 Expire Date: 11/15

Name of Card Holder: Madison Board SUPERVISOR

Advance Deposit: Please include one night's room plus 13% tax and \$1 city occupancy tax. Deposits are not refundable.

**THE ELECTION CENTER'S
29th ANNUAL NATIONAL CONFERENCE**

Savannah, Georgia
August 15 - August 16, 2013
REGISTRATION FORM

(Please use a separate form for each person registering)

NAME: Leroy Lacy

OFFICE ADDRESS: P.O. Box 608
(Address and office phone number provided will be printed on the attendee list distributed to conference participants)

CITY/STATE/ZIP: CANTON, MS 39046

TELEPHONE: Office: 601-859-0312 Home: 601-941-5895
FAX: 601-859-0312 (FOR EMERGENCIES)

CONFERENCE REGISTRATION FEES

Registration and check received by the Conference Office
no later than July 30, 2013

Gold, Silver, Blue and Associate..... \$449
Non-Members..... \$649

Registration and check received **after July 30, 2013 or at the Conference:**
**Security requires all attendees to wear Election Center name badges to enter the meeting rooms and exhibit area. If you choose to register at the conference you may be delayed up to two hours in order to process your registration. Sorry, we cannot invoice.*

Gold, Silver, Blue and Associate..... \$549
Non-Members..... \$749

Registration fee enclosed: \$ _____

To register and pay by credit card, go to: <http://www.electioncenter.org>

Membership Number: 3095

Are you a CERA graduate? Yes ___ No If Yes, what year? _____

CANCELLATION POLICY: Written cancellation stating reason for same must be received by the conference office **no later than July 30, 2013** in order to receive full credit toward a class, workshop or conference to be used during the next calendar year less a \$50 processing fee. There will be no credit given for cancellations received on or after July 31, 2013.

Please return completed form and your check in order to reach the Conference Office by **July 30, 2013** in order to avoid the additional fee to:

The Election Center
Conference Center
P.O. Box 965
Elk Grove, California 95759

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For additional information, please call Pat Hawkins at (916) 686-7928.
The Election Center's Federal I.D. Number is 54-1578880

601-613-7203 Pat



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Phone: (912) 238-1234 Toll Free: (888) 421-1442 Reservations Fax: (912) 3641

THE ELECTION CENTER ANNUAL NATIONAL CONFERENCE AUGUST 11-19, 2013

Name: Leroy Lacy Company: Elections

Address: P.O. Box 608 City: CANTON

State MS Zip 39046 Phone: 601-859-0312 Fax#: 601-859-0312

Special Requests: NON-smoking Gold Passport #: _____

Arrival Date 8-14-13 at 3:00 (am/pm) Check-in time is 3:00pm
Accommodations prior to that time will be handled on an individual basis

Departure Date 8-17-13 at 12:06 (am/pm) Check-out time is 12:00 noon

Number of Adults over 18 Years 2

Name(s) of additional person(s) sharing rooms (over 18 years of age): _____

Name: _____ Credit Card #: _____ Exp. Date _____

Name: _____ Credit Card #: _____ Exp. Date _____

Name: _____ Credit Card #: _____ Exp. Date _____

Please check the type of accommodation desired.
All accommodations are subject to availability at check-in.

No. of Rooms	Type of Accommodation	Rate
	SINGLE: One (1) Person	\$159.00
	DOUBLE: Two (2) Persons, One (1) Bed	\$159.00
	DOUBLE: Two (2) Persons, Two (1) Beds	\$159.00
	RIVERVIEW ROOM (upon availability)	add'l \$64.00

For TRIPLE and QUAD reservations, please list all names above. Suite rates are available upon request. Please contact reservations at 800-233-1234.

Reservations must be received by August 1, 2013 by midnight.

After the above date, rooms will be confirmed on a space and rate available basis only.

Accommodations for the Disabled:

The Hyatt Regency Savannah, in compliance with the American Disabilities Act, has equipment and services available. Please inform us of your needs prior to arrival.

You must provide a credit card when making a reservation.

Assured by Credit Card: Fill in American Express, Diners Club, VISA MasterCard or Discover Card information below:

Card Type: Master Card

Credit Number: 5477-9500-7520-7943 Expire Date: 11/15

Name of Card Holder: Madison Board SUPERVISORS

Advance Deposit: Please include one night's room plus 13% tax and \$1 city occupancy tax. Deposits are not refundable.

**THE ELECTION CENTER'S
29th ANNUAL NATIONAL CONFERENCE**

Savannah, Georgia
August 15 - August 16, 2013
REGISTRATION FORM

(Please use a separate form for each person registering)

NAME: TIMOTHY N. JENKINS

OFFICE ADDRESS P.O. Box 608
(Address and office phone number provided will be printed on the attendee list distributed to conference participants)

CITY/STATE/ZIP: CANTON, MS 39046

TELEPHONE: Office: 601-859-0312 Home: 601-260-5856
FAX: 601-859-0312 (FOR EMERGENCIES)

CONFERENCE REGISTRATION FEES

Registration and check received by the Conference Office
no later than July 30, 2013

Gold, Silver, Blue and Associate..... \$449
Non-Members..... \$649

Registration and check received **after July 30, 2013 or at the Conference:**
**Security requires all attendees to wear Election Center name badges to enter the meeting rooms and exhibit area. If you choose to register at the conference you may be delayed up to two hours in order to process your registration. Sorry, we cannot invoice.*

Gold, Silver, Blue and Associate..... \$549
Non-Members..... \$749

Registration fee enclosed: \$ _____
To register and pay by credit card, go to: <http://www.electioncenter.org>
Membership Number: 4513

Are you a CERA graduate? Yes ___ No If Yes, what year? _____

CANCELLATION POLICY: Written cancellation stating reason for same must be received by the conference office **no later than July 30, 2013** in order to receive full credit toward a class, workshop or conference to be used during the next calendar year less a \$50 processing fee. There will be no credit given for cancellations received on or after July 31, 2013.

Please return completed form and your check in order to reach the Conference Office by **July 30, 2013** in order to avoid the additional fee to:

The Election Center
Conference Center
P.O. Box 965
Elk Grove, California 95759

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For additional information, please call Pat Hawkins at (916) 686-7928.
The Election Center's Federal I.D. Number is 54-1578880



Hyatt Regency Savannah • 2 West Bay Street • Savannah, Georgia

Phone: (912) 238-1234 Toll Free: (888) 421-1442 Reservations Fax: (912) 3641

THE ELECTION CENTER ANNUAL NATIONAL CONFERENCE AUGUST 11-19, 2013

Name: TIMOTHY N. JENKINS Company: ELECTIONS

Address: P.O. Box 608 City: CANTON

State MS Zip 39046 Phone: 601-859-0312 Fax#: 601-859-0312

Special Requests: NON-SMOKING Gold Passport #: _____

Arrival Date 8-14-13 at 3:00 (am/pm) Check-in time is 3:00pm
Accommodations prior to that time will be handled on an individual basis

Departure Date 8-18-13 at 12:N (am/pm) Check-out time is 12:00 noon

Number of Adults over 18 Years 2
Name(s) of additional person(s) sharing rooms (over 18 years of age):

Name: _____ Credit Card #: _____ Exp. Date _____

Name: _____ Credit Card #: _____ Exp. Date _____

Name: _____ Credit Card #: _____ Exp. Date _____

Please check the type of accomodation desired.
All accomodations are subject to availability at check-in.

No. of Rooms	Type of Accomodation	Rate
	SINGLE: One (1) Person	\$159.00
<u>1</u>	DOUBLE: Two (2) Persons, One (1) Bed	<u>\$159.00</u>
	DOUBLE: Two (2) Persons, Two (1) Beds	\$159.00
	RIVERVIEW ROOM (upon availability)	add'l \$64.00

For TRIPLE and QUAD reservations, please list all names above. Suite rates are available upon request. Please contact reservations at 800-233-1234.

Reservations must be received by **August 1, 2013** by midnight.

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Accommodations for the Disabled:

The Hyatt Regency Savannah, in compliance with the American Disabilities Act, has equipment and services available. Please inform us of your needs prior to arrival.

You must provide a credit card when making a reservation.

Assured by Credit Card: Fill in American Express, Diners Club, VISA MasterCard or Discover Card information below:

Card Type: Master Card

Credit Number: 5477-9500-7520-7943 Expire Date: 11/15

Name of Card Holder: Madison Board SUPERVISORS

Advance Deposit: Please include one night's room plus 13% tax and \$1 city occupancy tax. Deposits are not refundable.

Beau Rivage

RESORT & CASINO

Gerald Steen
 Po Box 608
 Canton, MS 39046

ROOM # : 05061
 CONF # : 486588265
 ARRIVAL : 06/18/13
 DEPARTURE : 06/20/13

Page 1 of 1

DATE	DESCRIPTION	CHARGES	CREDITS
06/18/13	BR Room	149.00	
06/18/13	BR Room Tax - 12%	17.88	
06/18/13	BR Resort Fee	5.00	
06/18/13	BR Resort Fee Tax	0.35	
06/19/13	BR Room	149.00	
06/19/13	BR Room Tax - 12%	17.88	
06/19/13	BR Resort Fee	5.00	
06/19/13	BR Resort Fee Tax	0.35	
06/20/13	Mastercard XXXXXXXXXXXX7943 XX/XX		344.46
Total		344.46	344.46
Balance		0.00	

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 beaurivage.com • 1.888.567.6667

Beau Rivage
RESORT & CASINO

Mike Espy
Po Box 608
Canton, MS 39046

ROOM # : 09025
CONF # : 486588784
ARRIVAL : 06/18/13
DEPARTURE : 06/20/13

Page 1 of 1

DATE	DESCRIPTION	CHARGES	CREDITS
06/18/13	BR Room	149.00	
06/18/13	BR Room Tax - 12%	17.88	
06/18/13	BR Resort Fee	5.00	
06/18/13	BR Resort Fee Tax	0.35	
06/19/13	BR Room	149.00	
06/19/13	BR Room Tax - 12%	17.88	
06/19/13	BR Resort Fee	5.00	
06/19/13	BR Resort Fee Tax	0.35	
06/20/13	Mastercard XXXXXXXXXXXX7943 XX/XX		344.46
Total		344.46	344.46
Balance		0.00	

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Beau Rivage
RESORT & CASINO

Shelton Vance
Po Box 608
Canton, MS 39046

ROOM # : 19016
CONF # : 486588448
ARRIVAL : 06/18/13
DEPARTURE : 06/20/13

Page 1 of 1

DATE	DESCRIPTION	CHARGES	CREDITS
06/18/13	BR Room	149.00	
06/18/13	BR Room Tax - 12%	17.88	
06/18/13	BR Resort Fee	5.00	
06/18/13	BR Resort Fee Tax	0.35	
06/19/13	BR Room	149.00	
06/19/13	BR Room Tax - 12%	17.88	
06/19/13	BR Resort Fee	5.00	
06/19/13	BR Resort Fee Tax	0.35	
06/20/13	Mastercard XXXXXXXXXXXX7943 XX/XX		344.46
Total		344.46	344.46
Balance		0.00	

Beau Rivage
RESORT & CASINO

John Crosby
Po Box 608
Canton, MS 39046

ROOM # : 10003
CONF # : 488698567
ARRIVAL : 06/18/13
DEPARTURE : 06/20/13

Page 1 of 1

DATE	DESCRIPTION	CHARGES	CREDITS
06/18/13	BR Room	149.00	
06/18/13	BR Room Tax - 12%	17.88	
06/18/13	BR Resort Fee	5.00	
06/18/13	BR Resort Fee Tax	0.35	
06/19/13	BR Room	149.00	
06/19/13	BR Room Tax - 12%	17.88	
06/19/13	BR Resort Fee	5.00	
06/19/13	BR Resort Fee Tax	0.35	
06/20/13	Mastercard XXXXXXXXXXXX7943 XX/XX		344.46
Total		344.46	344.46
Balance		0.00	

Beau Rivage

RESORT & CASINO

Mr. Paul Griffin
 Po Box 892
 Canton, MS 39046

ROOM # : 07076
 CONF # : 488696685
 ARRIVAL : 06/17/13
 DEPARTURE : 06/21/13

DATE	DESCRIPTION	CHARGES	CREDITS
06/17/13	BR Room	149.00	
06/17/13	BR Room Tax - 12%	17.88	
06/17/13	BR Resort Fee	5.00	
06/17/13	BR Resort Fee Tax	0.35	
06/18/13	BR Room	149.00	
06/18/13	BR Room Tax - 12%	17.88	
06/18/13	BR Resort Fee	5.00	
06/18/13	BR Resort Fee Tax	0.35	
06/19/13	BR Room	149.00	
06/19/13	BR Room Tax - 12%	17.88	
06/19/13	BR Resort Fee	5.00	
06/19/13	BR Resort Fee Tax	0.35	
06/20/13	BR Room	149.00	
06/20/13	BR Room Tax - 12%	17.88	
06/20/13	BR Resort Fee	5.00	
06/20/13	BR Resort Fee Tax	0.35	
06/21/13	Mastercard		688.92
	XXXXXXXXXXXX7943 XX/XX		
Total		688.92	688.92
Balance		0.00	