

**Candidate**  
**REPORT OF RECEIPTS AND DISBURSEMENTS**  
**2025 Municipal Election**



Name of Candidate JOEY GIUFFRIA  
 Address 118 W. AZALEA DR. City/State/Zip LONG BEACH MS 39560  
 Telephone (Work) \_\_\_\_\_ (Home) 228 596 6200 (Fax) \_\_\_\_\_  
 Contact Name JOEY GIUFFRIA Email Address JGIUFFRIA@AOL.COM  
 Office Sought ALDERMAN - WARD 3 Political Party (if any) REPUBLICAN  
LONG BEACH, MS  
 Check here if above information is different from previous report

**TYPE OF REPORT**

- Tuesday, March 25, 2025 (January 1, 2025 through March 23, 2025)..... **Primary Pre-Election Report**  
 \_\_\_\_\_ Tuesday, April 15, 2025 (March 24, 2025 through April 13, 2025)..... **Primary Pre-Runoff Election Report**  
 \_\_\_\_\_ Tuesday, May 27, 2025 (January 1, 2025 through May 25, 2025)..... **General Pre-Election Report**  
 \_\_\_\_\_ Friday, January 30, 2026 (January 1, 2025 through December 31, 2025)..... **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 General Pre-Election Report due Tuesday May 27, 2025 is March 24, 2025 through May 25, 2025.  
 (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, 2025.  
 (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 \$	450	+\$		\$ 450	\$ 450
Total amount of disbursements \$	2392	+\$		\$ 2392	\$ 2392
Total amount of cash on hand				\$ 0	

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

Joey Giuffria  
 Signature of Candidate

3/24/2025  
 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 Joey Giuffria

Reporting period 1/1/2025 through 3/23/2025

## ITEMIZED CONTRIBUTIONS

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 <b>Tommy Dulin</b>	<u>03</u> / <u>05</u> / <u>25</u>	\$250
Mailing Address <b>3404 Riverside Dr.</b>	_ / _ / _	\$
City, State, Zip Code <b>Norfolk, AR, 72658</b>	_ / _ / _	\$
Name of Employer (Required) <b>Dulin &amp; Dulin LLC</b>	_ / _ / _	\$
Occupation (Required) <b>Attorney</b>	Aggregate year-to-date	\$250
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 <b>David Illich</b>	<u>03</u> / <u>02</u> / <u>25</u>	\$100
Mailing Address <b>1745 Tierra Libertia Dr.</b>	_ / _ / _	\$
City, State, Zip Code <b>Escondido, CA, 92026</b>	_ / _ / _	\$
Name of Employer (Required) <b>Retired</b>	_ / _ / _	\$
Occupation (Required) <b>Retired</b>	Aggregate year-to-date	\$100
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 <b>Jamie Waid</b>	<u>02</u> / <u>15</u> / <u>25</u>	\$100
Mailing Address <b>121 W. Azalea Dr.</b>	_ / _ / _	\$
City, State, Zip Code <b>Long Beach, MS 39560</b>	_ / _ / _	\$
Name of Employer (Required) <b>Retired</b>	_ / _ / _	\$
Occupation (Required) <b>Retired</b>	Aggregate year-to-date	\$100
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	\$

Name of Candidate or Committee JOEY GIUFFRIA  
 Reporting period 1/1/2025 through 3/23/2025

## 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>KEVIN L'ADNIEP POLITICAL SIGNS</u>	<u>2/7/25</u>	\$ <u>575</u>
Mailing Address <u>13000 PERIGAL RD</u>		
City, State, Zip Code <u>VAN CLEAVE, MS 39565</u>	<u>3/1/25</u>	\$ <u>300</u>
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>875</u>
<b>B. Full name</b> <u>MAGNOLIA PRINTING</u>	<b>Date</b> (Mo., Day, Year)	<b>Amount of each</b> <b>disbursement this period</b>
Mailing Address <u>1829 25TH AVE</u>	<u>3/13/25</u>	\$ <u>754</u>
City, State, Zip Code <u>GULFPORT MS 39501</u>	<u>1/1</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>754</u>
<b>C. Full name</b> <u>SOUTHERN PRINTING</u>	<b>Date</b> (Mo., Day, Year)	<b>Amount of each</b> <b>disbursement this period</b>
Mailing Address <u>230 DAVIS AVE</u>	<u>2/14/25</u>	\$ <u>209</u>
City, State, Zip Code <u>PASS CHRISTIAN, MS 39571</u>	<u>1/1</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>209</u>
<b>D. Full name</b> <u>OFFICE DEPOT</u>	<b>Date</b> (Mo., Day, Year)	<b>Amount of each</b> <b>disbursement this period</b>
Mailing Address <u>1512 CROSSROADS PKWY</u>	<u>2/14/25</u>	\$ <u>201</u>
City, State, Zip Code <u>GULFPORT, MS 39502</u>	<u>1/1</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>201</u>
<b>E. Full name</b> <u>LONG BEACH BREEZE, LLC</u>	<b>Date</b> (Mo., Day, Year)	<b>Amount of each</b> <b>disbursement this period</b>
Mailing Address <u>105 E. MAIN</u>	<u>3/1/25</u>	\$ <u>269</u>
City, State, Zip Code <u>CLINTON, MS 39056</u>	<u>1/1</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>269</u>
<b>F. Full name</b> <u>U-PRINT</u>	<b>Date</b> (Mo., Day, Year)	<b>Amount of each</b> <b>disbursement this period</b>
Mailing Address <u>ONLINE</u>	<u>2/21</u>	\$ <u>84</u>
City, State, Zip Code <u>ONLINE</u>	<u>1/1</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>84</u>