

Candidate
REPORT OF RECEIPTS AND DISBURSEMENTS
 2025 Municipal Election



Name of Candidate Erika Long
 Address 106 Edmund Drive City/State/Zip Long Beach, MS 39560
 Telephone (Work) _____ (Home) 757 839 7551 (Fax) _____
 Contact Name Erika Long Email Address erika.gonyon@gmail.com
 Office Sought Alderman Political Party (if any) Republican

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 \$	\$ 1245 ⁰⁰	+	Ø	\$ 1245 ⁰⁰	\$ 1245 ⁰⁰
Total amount of disbursements \$	\$ 1647. ¹³	+	Ø	\$ 1647. ¹³	\$ 1647. ¹³
Total amount of cash on hand				\$ -402.13	

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

Signature of Candidate Erika Long

Date 03/24/25

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 Erika Long
 Reporting period 01/01/25 through 03/23/25

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 <u>Charolett Acosta</u>	<u>01/31/25</u>	\$ <u>600⁰⁰</u>
Mailing Address <u>118 Galloway St</u>	<u>__/__/__</u>	\$
City, State, Zip Code <u>Long Beach, ms 39560</u>	<u>__/__/__</u>	\$
Name of Employer (Required) <u>_____</u>	<u>__/__/__</u>	\$
Occupation (Required) <u>Homemaker</u>	Aggregate year-to-date	\$ <u>600⁰⁰</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>Teresa Bennett Green</u>	<u>01/31/25</u>	\$ <u>100⁰⁰</u>
Mailing Address <u>200 Jeff Davis Ave #7</u>	<u>02/28/25</u>	\$ <u>100⁰⁰</u>
City, State, Zip Code <u>Long Beach ms 39560</u>	<u>__/__/__</u>	\$
Name of Employer (Required) <u>Waste Management</u>	<u>__/__/__</u>	\$
Occupation (Required) <u>Account Executive</u>	Aggregate year-to-date	\$ <u>200⁰⁰</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 <u>Rachel Meredith</u>	<u>02/08/25</u>	\$ <u>100⁰⁰</u>
Mailing Address <u>13731 Churchwood Drive</u>	<u>__/__/__</u>	\$
City, State, Zip Code <u>Gulfport, ms 39503</u>	<u>__/__/__</u>	\$
Name of Employer (Required) <u>Self</u>	<u>__/__/__</u>	\$
Occupation (Required) <u>LCSW</u>	Aggregate year-to-date	\$ <u>100⁰⁰</u>
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 <u>Michael Harper</u>	<u>02/17/25</u>	\$ <u>200⁰⁰</u>
Mailing Address <u>2358 Riverside Ave Apt 503</u>	<u>__/__/__</u>	\$
City, State, Zip Code <u>Jacksonville, FL 32204</u>	<u>__/__/__</u>	\$
Name of Employer (Required) <u>Retired</u>	<u>__/__/__</u>	\$
Occupation (Required) <u>Retired</u>	Aggregate year-to-date	\$ <u>200⁰⁰</u>

Name of Candidate or Committee Erika LongReporting period 01/01/25 through 03/23/25

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 <u>Mary Heidingsfelder</u>	<u>02/24/25</u>	\$ <u>100⁰⁰</u>
Mailing Address <u>211 East 3rd St.</u>	___/___/___	\$
City, State, Zip Code <u>Long Beach, MS 39560</u>	___/___/___	\$
Name of Employer (Required) <u>Gulf Breeze Getaways</u>	___/___/___	\$
Occupation (Required) <u>owner</u>	Aggregate year-to-date	\$ <u>100⁰⁰</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>Aleah Landry</u>	<u>03/22/25</u>	\$ <u>25⁰⁰</u>
Mailing Address <u>Allen Road</u>	___/___/___	\$
City, State, Zip Code <u>Long Beach, MS 39560</u>	___/___/___	\$
Name of Employer (Required) <u>Aleart</u>	___/___/___	\$
Occupation (Required) <u>owner</u>	Aggregate year-to-date	\$ <u>25⁰⁰</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 <u>Ron Ostrander</u>	<u>03/22/25</u>	\$ <u>20⁰⁰</u>
Mailing Address <u>P.O. Box 723</u>	___/___/___	\$
City, State, Zip Code <u>Long Beach, MS 39560</u>	___/___/___	\$
Name of Employer (Required) <u>Retired</u>	___/___/___	\$
Occupation (Required) <u>Retired</u>	Aggregate year-to-date	\$ <u>20⁰⁰</u>
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 Erika LongReporting period 01/01/25 through 03/23/25

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'Adnier</u>	<u>01/31/25</u>	\$ <u>219⁰⁰</u>
Mailing Address <u>13000 Perigal Road</u>	<u>02/17/25</u>	\$ <u>495⁰⁰</u>
City, State, Zip Code <u>Vanderve, MS 39545</u>		
Purpose of Disbursement (Optional) <u>Political Signs</u>	Aggregate Year-to-date	\$ <u>714⁰⁰</u>
B. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Magnolia Printing</u>	<u>02/18/25</u>	\$ <u>260⁰⁰</u>
Mailing Address <u>1829 25th Ave</u>	<u>03/17/25</u>	\$ <u>92.⁶⁶</u>
City, State, Zip Code <u>Gulfport, MS 39501</u>		
Purpose of Disbursement (Optional) <u>Push Cards / Stickers</u>	Aggregate Year-to-date	\$ <u>352.⁶⁶</u>
C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Walmart</u>	<u>___/___/___</u>	\$ <u>175⁶⁴</u>
Mailing Address <u>1617 E. Beach Blvd</u>	<u>___/___/___</u>	\$
City, State, Zip Code <u>Pass Christian, MS 39571</u>		
Purpose of Disbursement (Optional) <u>Supplies/Food for Meet & Greet</u>	Aggregate Year-to-date	\$ <u>175.⁶⁴</u>
D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Badish</u>	<u>02/24/25</u>	\$ <u>150⁰⁰</u>
Mailing Address <u>200 Jeff Davis Ave #1</u>	<u>___/___/___</u>	\$
City, State, Zip Code <u>Long Beach, MS 39560</u>		
Purpose of Disbursement (Optional) <u>Meet & Greet</u>	Aggregate Year-to-date	\$ <u>150⁰⁰</u>
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Long Beach Chamber of commerce</u>	<u>03/10/25</u>	\$ <u>100⁰⁰</u>
Mailing Address <u>11975 Seaway Rd Ste B120</u>	<u>___/___/___</u>	\$
City, State, Zip Code <u>Gulfport MS 39503</u>		
Purpose of Disbursement (Optional) <u>Sponsorship</u>	Aggregate Year-to-date	\$ <u>100⁰⁰</u>
F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
<u>Office Depot</u>	<u>03/17/25</u>	\$ <u>12.⁸³</u>
Mailing Address <u>15212 Crossroads Pkwy</u>	<u>___/___/___</u>	\$
City, State, Zip Code <u>Gulfport, MS 39503</u>		
Purpose of Disbursement (Optional) <u>Cards</u>	Aggregate Year-to-date	\$ <u>12.⁸³</u>

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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>Dolce Bakeshop</u>	<u>03/22/25</u>	\$ <u>120⁰⁰</u>
Mailing Address <u>200 Jeff Davis Ave # 2</u>	<u>03/22/25</u>	\$ <u>120⁰⁰</u>
City, State, Zip Code <u>Long Beach, MS 39560</u>	<u>__/__/__</u>	\$
Purpose of Disbursement (Optional) <u>Meet & Greet</u>	Aggregate Year-to-date	\$ <u>120⁰⁰</u>
B. Full name <u>Harrison County Circuit Clerk</u>	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address <u>P.O. Box 998</u>	<u>01/27/25</u>	\$ <u>22⁰⁰</u>
City, State, Zip Code <u>Gulfport, MS 39502</u>	<u>__/__/__</u>	\$
Purpose of Disbursement (Optional) <u>Ward 3 voter rolls</u>	Aggregate Year-to-date	\$ <u>22⁰⁰</u>
C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u>__/__/__</u>	\$
City, State, Zip Code	<u>__/__/__</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u>__/__/__</u>	\$
City, State, Zip Code	<u>__/__/__</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u>__/__/__</u>	\$
City, State, Zip Code	<u>__/__/__</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u>__/__/__</u>	\$
City, State, Zip Code	<u>__/__/__</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$