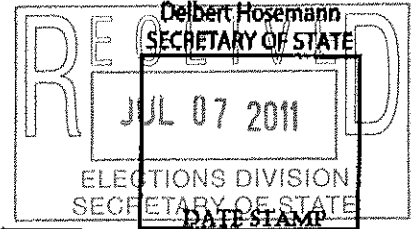


2011 ELECTION CYCLE



Name of Candidate Hudson Holliday  
 Address 1729 South Main St. County Pan River  
 Telephone 601-795-9371 Fax 601-795-9396  
 Office Sought Governor Political Party Republican  
 Email Address Hudson@HudsonHolliday.com

Check here if above is different from previous report

- May 10, 2011 Periodic Report** (January 1, 2011, through April 30, 2011) \_\_\_\_\_ Mandatory
- June 10, 2011 Periodic Report** (May 1, 2011, through May 31, 2011) \_\_\_\_\_ Mandatory
- July 8, 2011 Periodic Report** (June 1, 2011, through June 30, 2011) \_\_\_\_\_ Mandatory
- July 26, 2011 Pre-Election Report** (July 1, 2011, through July 23, 2011) \_\_\_\_\_ Primary Candidates
- August 16, 2011 Pre-Election Report** (July 24, 2011, through August 13, 2011) \_\_\_\_\_ Runoff Candidates Only
- October 10, 2011 Periodic Report** (July 24, 2011, through September 30, 2011) \_\_\_\_\_ Mandatory
- November 1, 2011 Pre-Election Report** (October 1, 2011, through October 29, 2011) \_\_\_\_\_ Mandatory
- November 22, 2011 Pre-Election Report** (October 30, 2011, through November 19, 2011) \_\_\_\_\_ Runoff Candidates Only
- January 10, 2012 Periodic Report** (October 30, 2011, through December 31, 2011) \_\_\_\_\_ Mandatory
- Termination Report** (Candidate will no longer accept contributions or make Campaign expenditures and has no outstanding campaign debt obligation)

**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**

	Itemized + Non-Itemized =	This Period	Calendar Year-To-Date
Total amount of contributions	\$ 2,1050. <sup>00</sup> + \$ 00	\$ 2,1050. <sup>00</sup>	\$ 552,425. <sup>00</sup>
Total amount of disbursements	\$ 31,1005. <sup>02</sup> + \$ 00	\$ 31,1005. <sup>02</sup>	\$ 100,0103. <sup>91</sup>
Total amount of cash on hand		\$ 492,784. <sup>02</sup>	

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

Hudson Holliday  
 Signature of Candidate

7-7-11  
 Date

Authority: Refer to Miss. Code Ann. §23-15-801 (1972) et. seq. for statutory requirement.  
 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. §§ 23-15-8-11 (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 601-359-1499.  
 2. Candidates for county wide and county district offices should return forms to their county Circuit Clerk.

Name of Candidate or Committee Hudson Holliday  
 Reporting period June 1, 2011 through June 30, 2011

# ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" 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>6/1/11</u>	\$ <u>1,000.00</u>
Mailing Address		___/___/___	\$
City, State, Zip Code		___/___/___	\$
Name of Employer (Required)		___/___/___	\$
Occupation (Required)		Aggregate year-to-date	\$ <u>1,000.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" 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>6/1/11</u>	\$ <u>500.00</u>
Mailing Address		___/___/___	\$
City, State, Zip Code		___/___/___	\$
Name of Employer (Required)		___/___/___	\$
Occupation (Required)		Aggregate year-to-date	\$ <u>500.00</u>
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" 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>6/1/11</u>	\$ <u>150.00</u>
Mailing Address		___/___/___	\$
City, State, Zip Code		___/___/___	\$
Name of Employer (Required)		___/___/___	\$
Occupation (Required)		Aggregate year-to-date	\$ <u>150.00</u>
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" 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>6/1/11</u>	\$ <u>500.00</u>
Mailing Address		___/___/___	\$
City, State, Zip Code		___/___/___	\$
Name of Employer (Required)		___/___/___	\$
Occupation (Required)		Aggregate year-to-date	\$ <u>500.00</u>

Name of Candidate or Committee Hudson Holliday  
 Reporting period June 1, 2011 through June 30, 2011

# ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" 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>Wallace or Judy Strickland</u>	<u>6/17/11</u>	\$ <u>500.00</u>
Mailing Address <u>8219 Sweetmore Creek Dr.</u>	___/___/___	\$
City, State, Zip Code <u>Meridian, MS 39305</u>	___/___/___	\$
Name of Employer (Required)	___/___/___	\$
Occupation (Required)	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 Hudson Holliday  
 Reporting period June 1, 2011 through June 30, 2011

## ITEMIZED DISBURSEMENTS

A. Full name <u>PAPA</u>	Date (Mo., Day, Year) <u>6/11/11</u>	Amount of each disbursement this period \$ <u>250.00</u>
Mailing Address <u>P.O. Box 93</u>		\$
City, State, Zip Code <u>Poplarville, MS 39470</u>	<u>___/___/___</u>	\$
Purpose of Disbursement (Optional) <u>Advertise during Blueberry Jubilee</u>	Aggregate Year-to-date	\$ <u>250.00</u>
B. Full name <u>Nordan Smith</u>	Date (Mo., Day, Year) <u>6/12/11</u>	Amount of each disbursement this period \$ <u>145.79</u>
Mailing Address <u>P.O. Box 1937</u>	<u>6/12/11</u>	\$ <u>74.90</u>
City, State, Zip Code <u>Hattiesburg, MS 39403-1937</u>	<u>6/12/11</u>	\$
Purpose of Disbursement (Optional) <u>Helium Tanks &amp; Refills</u>	Aggregate Year-to-date	\$ <u>220.09</u>
C. Full name <u>Cash</u>	Date (Mo., Day, Year) <u>6/14/11</u>	Amount of each disbursement this period \$ <u>75.00</u>
Mailing Address <u>GreenThumb Lawn Care</u>	<u>6/14/11</u>	\$
City, State, Zip Code <u>Poplarville, MS 39470</u>	<u>6/12/11</u>	\$ <u>75.00</u>
Purpose of Disbursement (Optional) <u>Campaign office yard</u>	Aggregate Year-to-date	\$ <u>150.00</u>
D. Full name <u>Chase Card Services</u>	Date (Mo., Day, Year) <u>6/16/11</u>	Amount of each disbursement this period \$ <u>10,104.80</u>
Mailing Address <u>P.O. Box 94014</u>	<u>6/16/11</u>	\$
City, State, Zip Code <u>Palatka, FL 32909-4014</u>	<u>6/30/11</u>	\$ <u>5,730.19</u>
Purpose of Disbursement (Optional) <u>Re-imburement campaign Expenses</u>	Aggregate Year-to-date	\$ <u>15,835.05</u>
E. Full name <u>Unice : Program</u>	Date (Mo., Day, Year) <u>6/17/11</u>	Amount of each disbursement this period \$ <u>200.00</u>
Mailing Address <u>116 College Dr.</u>	<u>___/___/___</u>	\$
City, State, Zip Code <u>Hattiesburg, MS 39406-5007</u>	<u>___/___/___</u>	\$
Purpose of Disbursement (Optional) <u>Rental of Hall</u>	Aggregate Year-to-date	\$ <u>200.00</u>
F. Full name <u>WEMM FM</u>	Date (Mo., Day, Year) <u>6/17/11</u>	Amount of each disbursement this period \$ <u>250.00</u>
Mailing Address <u>5216 Old Hwy 11, Suite 120</u>	<u>6/17/11</u>	\$
City, State, Zip Code <u>Hattiesburg, MS 39402</u>	<u>6/28/11</u>	\$ <u>300.00</u>
Purpose of Disbursement (Optional) <u>Booth Space &amp; Speaking time</u>	Aggregate Year-to-date	\$ <u>550.00</u>

Name of Candidate or Committee Hudson Holliday  
 Reporting period June 1, 2011 through June 30, 2011

## ITEMIZED DISBURSEMENTS

A. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Elaine Jones	6/8/11	\$ 200.00
Mailing Address 1403 South Main St. Suite B-1		
City, State, Zip Code Poplarville, MS 39470	___/___/___	\$
Purpose of Disbursement (Optional) Reimbursement for Jubilee Supplies	Aggregate Year-to-date	\$ 200.00
B. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Y.L.T.V. - Stag TV	6/9/11	\$ 10,000.00
Mailing Address 1010 Crossing Park Dr.		
City, State, Zip Code Pearl, MS 39208	6/30/11	\$ 3,000.00
Purpose of Disbursement (Optional) TV Ads	Aggregate Year-to-date	\$ 9,000.00
C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Nordan Smith	6/10/11	\$ 3666.48
Mailing Address P.O. Box 1937		
City, State, Zip Code Hattiesburg, MS 39403-1937	___/___/___	\$
Purpose of Disbursement (Optional) Helium bottles & Refills	Aggregate Year-to-date	\$ 3666.48
D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Heather Holliday	6/10/11	\$ 500.00
Mailing Address 1729 South Main St		
City, State, Zip Code Poplarville, MS 39470	6/17/11	\$ 500.00
Purpose of Disbursement (Optional) Office Support	Aggregate Year-to-date	\$ 1,000.00
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Supertalk MS 102.1 FM	6/13/11	\$ 250.00
Mailing Address 110 West Monticello St.		
City, State, Zip Code Brookhaven, MS 39601	___/___/___	\$
Purpose of Disbursement (Optional) Booth Space	Aggregate Year-to-date	\$ 250.00
F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Crystal Springs Chamber of Commerce	6/17/11	\$ 100.00
Mailing Address P.O. Box 519		
City, State, Zip Code Crystal Springs, MS 39059	___/___/___	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ 100.00

Name of Candidate or Committee Hudson Holliday  
 Reporting period June 1, 2011 through June 30, 2011

## ITEMIZED DISBURSEMENTS

A. Full name <u>Neshoba Democrat</u>		
Mailing Address <u>P.O. Box 30</u>	Date (Mo., Day, Year) <u>6/17/11</u>	Amount of each disbursement this period \$ <u>550.00</u>
City, State, Zip Code <u>Philadelphia, MS 39350</u>	<u>__/__/__</u>	\$
Purpose of Disbursement (Optional) <u>Ad.</u>	Aggregate Year-to-date	\$ <u>550.00</u>
B. Full name <u>Heather Holliday</u>		
Mailing Address <u>1729 South Main St.</u>	Date (Mo., Day, Year) <u>6/24/11</u>	Amount of each disbursement this period \$ <u>300.00</u>
City, State, Zip Code <u>Poplarville, MS</u>	<u>__/__/__</u>	\$
Purpose of Disbursement (Optional) <u>Office Support</u>	Aggregate Year-to-date	\$ <u>300.00</u>
C. Full name <u>USPS</u>		
Mailing Address <u>301 South Main St.</u>	Date (Mo., Day, Year) <u>6/27/11</u>	Amount of each disbursement this period \$ <u>88.00</u>
City, State, Zip Code <u>Poplarville, MS 39470</u>	<u>__/__/__</u>	\$
Purpose of Disbursement (Optional) <u>Stamps</u>	Aggregate Year-to-date	\$ <u>88.00</u>
D. Full name <u>Dollar General</u>		
Mailing Address <u>1405 South Main St.</u>	Date (Mo., Day, Year) <u>6/28/11</u>	Amount of each disbursement this period \$ <u>39.80</u>
City, State, Zip Code <u>Poplarville, MS 39470</u>	<u>__/__/__</u>	\$
Purpose of Disbursement (Optional) <u>Office Supplies</u>	Aggregate Year-to-date	\$ <u>39.80</u>
E. Full name <u>VLTV - Stag TV</u>		
Mailing Address <u>1016 Crossing Park Dr.</u>	Date (Mo., Day, Year) <u>6/30/11</u>	Amount of each disbursement this period \$ <u>7,515.00</u>
City, State, Zip Code <u>Pearl, MS 39208</u>	<u>__/__/__</u>	\$
Purpose of Disbursement (Optional) <u>Media - Tr Ads</u>	Aggregate Year-to-date	\$ <u>7,515.00</u>
F. Full name <u>Bruce Sawmill Festival</u>		
Mailing Address <u>P.O. Box 1013</u>	Date (Mo., Day, Year) <u>6/30/11</u>	Amount of each disbursement this period \$ <u>30.00</u>
City, State, Zip Code <u>Bruce, MS 39015</u>	<u>__/__/__</u>	\$
Purpose of Disbursement (Optional) <u>Booth Space</u>	Aggregate Year-to-date	\$ <u>30.00</u>