2010 ELECTION CYCLE

Delbert Hosemann
SECRETARY OF STATE

RECEIVED
JAN 10 2011
Campaign Finance
Secretary of State
DATE STAMP

Judicial Candidate
REPORT OF RECEIPTS AND DISBURSEMENTS
2010 Judicial Election

Name of Candidate Committee to Re-Elect Richard A. Smith

Address P. O. Box 286, Greenwood, MS 38935-0286 County Leflore

Telephone Work 662-453-8016 Home 662-453-2625 Fax 662-453-0145

Contact Name Floyd M. Melton, Jr. Email Address fmmiii@bellsouth.net

Office Sought Circuit Judge 4-1

☐ Check here if above is different from previous report

_____ May 10, 2010 Periodic Report (January 1, 2010, through April 30, 2010).....Mandatory

_____ June 10, 2010 Periodic Report (May 1, 2010, through May 31, 2010).....Mandatory

_____ July 9, 2010 Periodic Report (June 1, 2010, through June 30, 2010)..... Mandatory

_____ October 10, 2009 Periodic Report (July 1, 2010, through September 30, 2010).....Mandatory

_____ October 26, 2010 Pre-Election Report (October 1, 2010, through October 23, 2010).....Mandatory

_____ November 16, 2010 Pre-Runoff Report (October 24, 2010, through November 13, 2010).....Runoff Candidates

X January 10, 2011 Periodic Report (October 1, 2010, through December 31, 2010).....Mandatory

_____ 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) 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 DISBURSEMENTS

	Itemized + Non-itemized =	This Period	Calendar Year-To-Date
Total amount of contributions	$ 650.00 +$	$ 650.00	$10,525.00
Total amount of disbursements	$ 4,667.15+$	$4,667.15	$ 6,433.08
Total amount of cash on hand		$ 4,217.42	

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

Signature of ~~Candidate~~ Committee Chairman

Date 1/7/11

Authority: Refer to Miss. Code Ann. §23-15-801 (1972) et. seq. for statutory requirements.
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. §§ 23-15-811 and 813 (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 or 601-576-2619.
2. Candidates for countywide and county district offices should return forms to their county Circuit Clerk.

SOS 01-10

Name of Candidate or Committee Committee to Re- Elect Richard A. Smith

Reporting period October 1, 2010 through December 31, 2010

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Dr. Michael H. Carter, Jr.	10 /06 / 2010	$ 200.00
Mailing Address P. O. Box 9969	__/__/__	$
City, State, Zip Code Greenwood, MS 38930	__/__/__	$
Name of Employer (Required) Self-Employed	__/__/__	$
Occupation (Required) Doctor	Aggregate year-to-date	$ 200.00
B. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name James S. Robbins, III	10 /06 / 2010	$ 200.00
Mailing Address 205 Eighth Street	__/__/__	$
City, State, Zip Code Greenwood, MS 38930	__/__/__	$
Name of Employer (Required) Self-Employed	__/__/__	$
Occupation (Required) Doctor	Aggregate year-to-date	$ 200.00
C. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Thomas M. Flanagan	10 /19/ 2010	$ 100.00
Mailing Address 308 East Barton Avenue	__/__/__	$
City, State, Zip Code Greenwood, MS 38930	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 100.00
D. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Whitman D. Mounger	10/26/2010	$ 100.00
Mailing Address 122 Riverside Drive	__/__/__	$
City, State, Zip Code Greenwood, MS 38930	__/__/__	$
Name of Employer (Required) Self-Employed	__/__/__	$
Occupation (Required) Attorney	Aggregate year-to-date	$ 100.00

Name of Candidate or Committee Committee to Re- Elect Richard A. Smith

Reporting period October 1, 2010 through December 31, 2010

ITEMIZED RECEIPTS

A. Source: ☐ Corporation ☐ PAC ☒ Individual ☐ Loan ☐ Other (please specify)	Date (Mo., Day, Year)	Amount of each receipt this period
Full name Wanda H. Clark	11 /05/ 2010	$ 50.00
Mailing Address 303 W. Adams	__/__/__	$
City, State, Zip Code Greenwood, MS 38930	__/__/__	$
Name of Employer (Required)	__/__/__	$
Occupation (Required)	Aggregate year-to-date	$ 50.00
B. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ 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	$
C. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ 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	$
D. Source: ☐ Corporation ☐ PAC ☐ Individual ☐ 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 Committee to Re-Elect Richard A. Smith

Reporting period October 1, 2010 **through** December 31, 2010

ITEMIZED DISBURSEMENTS

A. Full name The T-Shirt Co.	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 112 E. Washington Street	10/ 12 / 2010	$ 321.00
City, State, Zip Code Greenwood, MS 38930		$
Purpose of Disbursement (Optional) T-Shirts	Aggregate Year-to-date	$ 321.00
B. Full name Hammons & Associates	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address P. O. Box 1999	10/ 15 / 2010	$ 1,395.00
City, State, Zip Code Greenwood, MS 38935-1999	11/8/2010	$ 997.00
Purpose of Disbursement (Optional) Candidate Listing	Aggregate Year-to-date	$ 2,392.00
C. Full name The Greenwood Commonwealth	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 329 Hwy 82 W	10/26/2010	$ 633.60
City, State, Zip Code Greenwood, MS 38930	10/29/2010	$ 475.20
Purpose of Disbursement (Optional) Candidate Listing	Aggregate Year-to-date	$ 1,108.80
D. Full name Gray Evans	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 306 E. Adams Avenue	10/29/2010	$ 300.00
City, State, Zip Code Greenwood, MS 38930	11/9/2010	$ 300.00
Purpose of Disbursement (Optional) Reimbursement for Campaign Expenses	Aggregate Year-to-date	$ 600.00
E. Full name Dorothy Ward	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	10/29/2010	$ 50.00
City, State, Zip Code		$
Purpose of Disbursement (Optional) Poll Worker	Aggregate Year-to-date	$ 50.00
F. Full name Bertare Billingsley	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	10/29/2010	$ 50.00
City, State, Zip Code		$
Purpose of Disbursement (Optional) Poll Worker	Aggregate Year-to-date	$ 50.00

Name of Candidate or Committee Committee to Re-Elect Richard A. Smith

Reporting period October 1, 2010 through December 31, 2010

ITEMIZED DISBURSEMENTS

A. Full name What's Cooking	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 309 W. Park Avenue	11/2/ 2010	$ 48.15
City, State, Zip Code Greenwood, MS 38930		$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 48.15
B. Full name KK's Delicatessen	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address 109 Grand Blvd.	11/2/2010	$ 97.20
City, State, Zip Code Greenwood, MS 38930		$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$ 97.20
C. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		$
City, State, Zip Code		$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$
D. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		$
City, State, Zip Code		$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		$
City, State, Zip Code		$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$
F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address		$
City, State, Zip Code		$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	$