

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED

2012 FEB -9 AM 10:10

Office Use Only

FEC MAIL CENTER

12FE4M5

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines.

Expose Nunnalee . COM

ADDRESS (number and street)

2900 Bluecutt Rd. Ste. 1 / P.O. Box 8070

(Check if address is changed)

Columbus

MS

39705

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

HOLLIMAN.DENNIS@YAHOO.COM

(Check if address is changed)

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address is changed)

2. DATE

02 / 06 / 2012

3. FEC IDENTIFICATION NUMBER

C

4. IS THIS STATEMENT



NEW (N)

OR



AMENDED (A)

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

Type or Print Name of Treasurer

DENNIS HOLLIMAN

Signature of Treasurer

Dennis Holliman

Date

02 / 06 / 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office Use Only

For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100

FEC FORM 1 (Revised 02/2009)

12030740351

5. TYPE OF COMMITTEE

Candidate Committee:

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate _____

Candidate Party Affiliation Office Sought: House Senate President State District

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
 - Corporation Corporation w/o Capital Stock Labor Organization
 - Membership Organization Trade Association Cooperative
 - In addition, this committee is a Lobbyist/Registrant PAC.
- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
 - In addition, this committee is a Lobbyist/Registrant PAC.
 - In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

| | | | |
|----|-------|---------------|--------------------------|
| 1. | _____ | FEC ID number | <input type="checkbox"/> |
| 2. | _____ | FEC ID number | <input type="checkbox"/> |
| 3. | _____ | FEC ID number | <input type="checkbox"/> |
| 4. | _____ | FEC ID number | <input type="checkbox"/> |

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Write or Type Committee Name

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for mailing address]

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

12030740353

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

DENNIS EDWARD HOLLIMAN

Mailing Address

P.O. Box 8070 / 2900 Bluecutt Rd Ste. 1

COLUMBUS

MS

39705

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

662-327-4607

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer

DENNIS EDWARD HOLLIMAN

Mailing Address

P.O. Box 8070 / 2900 Bluecutt Rd Ste. 1

COLUMBUS

MS

39705

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number

662-327-4607

Full Name of Designated Agent

Mailing Address

Title or Position

Telephone number

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

BANKFIRST

Mailing Address

900 MAIN STREET

COLUMBUS

MS

39701

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

12030740354

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

12030740355

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| <input type="checkbox"/> Hand Delivered | Date of Receipt |
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|--|------------|
| <input type="checkbox"/> USPS First Class Mail | Postmarked |
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| <input type="checkbox"/> USPS Registered/Certified | Postmarked (R/C) |
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| <input type="checkbox"/> USPS Priority Mail | Postmarked |
| Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/> | |

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| <input type="checkbox"/> USPS Express Mail | Postmarked |
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| <input type="checkbox"/> Postmark Illegible | |
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| <input type="checkbox"/> No Postmark | |
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| <input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>Fed. Exp</i> | Shipping Date <i>2/8/12</i> |
| Next Business Day Delivery <input checked="" type="checkbox"/> | |

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| <input type="checkbox"/> Received from House Records & Registration Office | Date of Receipt |
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| <input type="checkbox"/> Received from Senate Public Records Office | Date of Receipt |
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| <input type="checkbox"/> Received from Electronic Filing Office | Date of Receipt |
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| <input type="checkbox"/> Other (Specify): | Date of Receipt or Postmarked |
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| <i>Chen</i> PREPARER | <i>2/9/12</i> DATE PREPARED |
|-------------------------|--------------------------------|