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## **FEC FORM 2**

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)										
	Dr. Ed Holliday			0 Candid-1	o'o EEO L	ontification	Nlugab -	<u> </u>			
	(b) Address (number and street) 901 Garfield St.					2. Candidate's FEC Identification Number H6MS01206					
	c) City, State, and ZIP Code					3. Is This	- N	lew		Amended	
_	Tupelo	•				Statem	ent X (	N) OR		(A)	
4.	Party Affiliation	5. Office Soug	jht		6. State & Dist		ate				
	INDEPENDENT	House			MS	01					
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE											
7.	I hereby designate the following named political committee as my Principal Campaign Committee for the 2015 (year of election)										
	NOTE: This designation should be filed with the appropriate office listed in the instructions.										
	(a) Name of Committee (in full)  EDWARD TROY HOLLIDAY										
	(b) Address (number and street) 901 GARFIELD ST.										
	(c) City, State, and ZIP Code										
	TUPELO				MS	38801					
DESIGNATION OF OTHER AUTHORIZED COMMITTEES  (Including Joint Fundraising Representatives)  8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.											
NOTE: This designation should be filed with the principal campaign committee.											
	(a) Name of Committee (in full)										
(b) Address (number and street)											
(c) City, State, and ZIP Code											
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.											
Signature of Candidate							Date				
D	r. Edward Holliday	[Electronically Filed]				03/23/201	5				
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.											
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## : 97 'A = G7 9 @ G B9 CI G'H9 LH'F9 @ 5 H98 'HC'5 'F9 DCF HZ G7 < 98 I @ 'CF' + H9 A = N5 H= CB

Form/Schedule: F2N Transaction ID:

2015 Special Election.

Form/Schedule: Transaction ID: