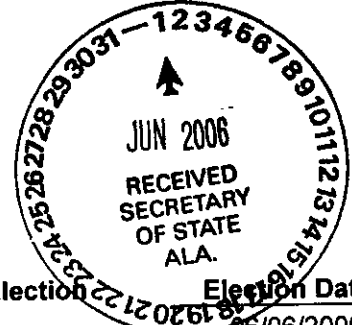


ALABAMA FAIR CAMPAIGN PRACTICES ACT CANDIDATE / ELECTED OFFICIAL PRE-ELECTION REPORT SUMMARY FORM 1



Please Print in Ink or Type

Name of Candidate or Elected Official Connie Hudson		Political Party/Ballot Affiliation Republican	
Office Sought or Held (include district or circuit number, if applicable) State Senate 34			
Address <input type="checkbox"/> Check box if reporting new address 2370 Hillcrest Rd. Ste, G #326			
City	State	ZIP Code	Telephone Number
Mobile	AL	36695-	251-343-1961

Type of Election (check one)

Primary Election

Primary Runoff

General Election

Special Election

Election Date
06/06/2006

Type of Report (check one)

10-5 Day Pre-Election Report

45 Day Pre-Election Report

Amended Pre-Election Report

CHECK ONE OF THE ABOVE BOXES TO INDICATE WHICH TYPE OF REPORT IS BEING AMENDED

Summary of activity since last filed report

1	Beginning balance (ending balance from previous filing)	1	77510.45
Cash Contributions			
2a	Itemized cash contributions (total from Form 2)	2a	21400.00
2b	Non-itemized cash contributions	2b	0.00
2c	Total cash contributions (add lines 2a and 2b)	2c	21400.00
In-Kind Contributions			
3a	Itemized in-kind contributions (total from Form 3)	3a	0.00
3b	Non-itemized in-kind contributions	3b	0.00
3c	Total in-kind contributions (add lines 3a and 3b)	3c	0.00
Receipts from Other Sources			
4	Total receipts from other sources (total from Form 4)	4	260.00
Expenditures			
5a	Itemized expenditures (Total from Form 5)	5a	72834.18
5b	Non-itemized expenditures	5b	0.00
5c	Total expenditures (add lines 5a and 5b)	5c	72834.18
6	Ending balance (add lines 1, 2c, & 4, then subtract line 5c)	6	26336.27

Sworn to and subscribed before me this 31st day of May of the year 2006. My commission expires the 30th day of July of the year 2008.

AS REQUIRED BY THE ALABAMA FAIR CAMPAIGN PRACTICES ACT, I HEREBY SWEAR, OR AFFIRM TO THE BEST OF MY KNOWLEDGE AND BELIEF, THAT THE ATTACHED REPORT(S) AND THE INFORMATION CONTAINED HEREIN ARE TRUE AND CORRECT, AND THAT THIS INFORMATION IS A FULL AND COMPLETE STATEMENT OF ALL CONTRIBUTIONS, EXPENDITURES, AND OTHER REQUIRED INFORMATION DURING THE APPLICABLE PERIOD OF TIME.

Dorothy J. Lankford
Signature of Notary Public
Dorothy J. Lankford
Print Notary's Name

Connie Hudson 5/31/06
SIGNATURE of Candidate or Elected Official Date