

KENNETH STEPP
CANDIDATE FOR U.S. HOUSE, KENTUCKY-05
P. O. BOX 1271

MANCHESTER, KENTUCKY 40962

Phone or Fax: (606) 596-0360

Email: kenneth_stepp@yahoo.com

web site: <http://www.steppforcongress.blogspot.com>

RECEIVED

2014 OCT 15 AM 11:56

FEC MAIL CENTER

10/13/2014

Federal Election Commission
999 E Street, N.W.
Washington, DC 20463

Re: Stepp Committee
Kenneth Stepp
U.S. House, Kentucky-05

Dear Federal Election Commission:

I am a candidate for the U.S. House, Kentucky-05 as a Democrat.

I have organized a committee, the Stepp Committee.

Please find enclosed my FEC forms. Please file them. Please stamp the copy of the first page of each form "filed" to show when and where the original was filed, and mail the copy of the first page of each form back to me in the enclosed envelope.

I understand that Kentucky has specifically waived having duplicate copies of FEC forms filed in the State or locally, and for that reason, yours is the only office where I will be filing FEC forms or copies of FEC forms.

Please phone me if you have any questions, or corrections, about my FEC forms and requirements.

Yours truly,

Kenneth S. Stepp

KENNETH STEPP

KSS/ks

Enclosures

14001 14001 14001

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

STEPP COMMITTEE

Report Covering the Period:

From:

07 01 2014

To:

09 30 2014

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
	1,459.93	1,459.93
(a) Total Contributions (other than loans) (from Line 11(e))	1,459.93	1,459.93
(b) Total Contribution Refunds (from Line 20(d))	0	0
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	1,459.93	1,459.93
7. Net Operating Expenditures		
	1,161.91	1,161.91
(a) Total Operating Expenditures (from Line 17)	1,161.91	1,161.91
(b) Total Offsets to Operating Expenditures (from Line 14)	0	0
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	1,161.91	1,161.91
8. Cash on Hand at Close of Reporting Period (from Line 27)	298.02	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

STEPP COMMITTEE

Report Covering the Period: From:

MM / DD / YYYY
07 / 01 / 2014

To:

MM / DD / YYYY
09 / 30 / 2014

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1,063.59	1,063.59
(ii) Unitemized.....	0	0
(iii) TOTAL of contributions from individuals ▶	1,063.59	1,063.59
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	2,500.00	2,500.00
(d) The Candidate.....	1,463.4	1,463.4
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	1,459.93	1,459.93
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0	0
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0	0
(b) All Other Loans.....	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0	0
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	0	0
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0	0
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	1,459.93	1,459.93

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	1 161.91	1 116 91
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0	0
(b) Of All Other Loans	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0	0
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs)	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0	0
21. OTHER DISBURSEMENTS	0	0
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	1 161.91	1 116 91

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	0
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	1 459 93
25. SUBTOTAL (add Line 23 and Line 24).....	1 459 93
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	1 161 91
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	298 02

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 5 OF 16

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
STEPP COMMITTEE

Full Name (Last, First, Middle Initial) A. STEPP, CARSON K		Date of Receipt M M / D D / Y Y Y Y 08 22 2014
Mailing Address 7750 NORTH HIGHWAY 421 City State Zip Code MANCHESTER KENTUCKY 40962		Amount of Each Receipt this Period \$821.93 IN KIND PAYMENT TO ALLEGRA PRINTING FOR CAMPAIGN SIGNS
FEC ID number of contributing federal political committee. C		
Name of Employer HEARTHSIDE FOOD SOLUTIONS	Occupation MACHINE OPERATOR	Amount of Each Receipt this Period \$156.00 IN KIND PAYMENT TO PRINTOPS PAYPAL FOR CAMPAIGN SIGN BRACKETS
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date \$821.93	
Full Name (Last, First, Middle Initial) B. STEPP, CARSON K.		Date of Receipt M M / D D / Y Y Y Y 09 22 2014
Mailing Address 7750 NORTH HIGHWAY 421 City State Zip Code MANCHESTER KENTUCKY 40962		Amount of Each Receipt this Period \$13.66 IN KIND PAYMENT TO SHELL OIL, BEATTYVILLE, KY FOR CAMPAIGN TRAVEL GASOLINE
FEC ID number of contributing federal political committee. C		
Name of Employer HEARTHSIDE FOOD SOLUTIONS	Occupation MACHINE OPERATOR	Amount of Each Receipt this Period \$991.59
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date \$977.93	
Full Name (Last, First, Middle Initial) C. STEPP, CARSON K.		Date of Receipt M M / D D / Y Y Y Y 10 03 2014
Mailing Address 7750 NORTH HIGHWAY 421 City State Zip Code MANCHESTER KENTUCKY 40962		Amount of Each Receipt this Period \$991.59
FEC ID number of contributing federal political committee. C		
Name of Employer HEARTHSIDE FOOD SOLUTIONS	Occupation MACHINE OPERATOR	Amount of Each Receipt this Period \$991.59
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date \$991.59	
SUBTOTAL of Receipts This Page (optional).....		\$991.59
TOTAL This Period (last page this line number only).....		\$991.59

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 16

<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
STEPP COMMITTEE

Full Name (Last, First, Middle Initial) A. STEPP, CARSON K		Date of Receipt M M / D D / Y Y Y Y 09 26 2014
Mailing Address 7750 NORTH HIGHWAY 421 City State Zip Code MANCHESTER KENTUCKY 40962		Amount of Each Receipt this Period \$10.35
FEC ID number of contributing federal political committee. C		
Name of Employer HEARTHSIDE FOOD SOLUTIONS	Occupation MACHINE OPERATOR	IN KIND PAYMENT TO LOWE'S FOR METAL POSTS FOR CAMPAIGN SIGNS
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date \$1,001.94	

Full Name (Last, First, Middle Initial) B. STEPP, CARSON K.		Date of Receipt M M / D D / Y Y Y Y 09 30 2014
Mailing Address 7750 NORTH HIGHWAY 421 City State Zip Code MANCHESTER KENTUCKY 40962		Amount of Each Receipt this Period \$42.70
FEC ID number of contributing federal political committee. C		
Name of Employer HEARTHSIDE FOOD SOLUTIONS	Occupation MACHINE OPERATOR	IN KIND PAYMENT TO SPEEDWAY CORBIN FOR CAMPAIGN TRAVEL GASOLINE
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date \$1,044.64	

Full Name (Last, First, Middle Initial) C. STEPP, CARSON K.		Date of Receipt M M / D D / Y Y Y Y 10 02 2014
Mailing Address 7750 NORTH HIGHWAY 421 City State Zip Code MANCHESTER KENTUCKY 40962		Amount of Each Receipt this Period \$18.95
FEC ID number of contributing federal political committee. C		
Name of Employer HEARTHSIDE FOOD SOLUTIONS	Occupation MACHINE OPERATOR	IN KIND PAYMENT TO LOWE'S SOMERSET, KY FOR METAL POSTS FOR CAMPAIGN SIGNS
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date \$1,063.59	

SUBTOTAL of Receipts This Page (optional).....	\$72.00
TOTAL This Period (last page this line number only).....	\$ 1,063.59

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 16	
	<input type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a	<input checked="" type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
STEPP COMMITTEE

Full Name (Last, First, Middle Initial) A. TEAMSTERS LOCAL UNION 651 D.R.I.V.E		Date of Receipt
Mailing Address 100 Blue Sky Parkway		09 22 2014
City Lexington	State Zip Code Kentucky 49509-9418	
FEC ID number of contributing federal political committee. C 00032979		Amount of Each Receipt this Period
Name of Employer	Occupation	\$ 250.00
Receipt For: Primary XXX General Other (specify)	Election Cycle-to-Date \$250.00	

Full Name (Last, First, Middle Initial) B.		Date of Receipt
Mailing Address		
City	State Zip Code	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: Primary General Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) C.		Date of Receipt
Mailing Address		
City	State Zip Code	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: Primary General Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	
TOTAL This Period (last page this line number only).....	\$ 250.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: (check only one)
 11a 11b 11c 11d 15
 12 13a 13b 14

8 16

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NAME OF COMMITTEE (In Full)
STAPP COMMITTEE

A. Full Name (Last, First, Middle Initial)
STAPP, KENNETH S.

Mailing Address
7750 NORTH HIGHWAY 421

City **MANCHESTER** State **KENTUCKY** Zip Code **40962**

FEC ID number of contributing federal political committee. **C**

Name of Employer **KENNETH S. STAPP, PSC** Occupation **ATTORNEY AT LAW**

Receipt For: **XX Primary XX General** Election Cycle-to-Date
Other (specify)

Date of Receipt
07 08 2014

Amount of Each Receipt this Period
\$19.99

IN KIND POSTAGE FOR FILING F.E.C. REPORT

B. Full Name (Last, First, Middle Initial)
STAPP, KENNETH S.

Mailing Address
7750 NORTH HIGHWAY 421

City **MANCHESTER** State **KENTUCKY** Zip Code **40962**

FEC ID number of contributing federal political committee. **C**

Name of Employer **KENNETH S. STAPP, PSC** Occupation **ATTORNEY AT LAW**

Receipt For: **Primary XXXX General** Election Cycle-to-Date
Other (specify)

Date of Receipt
07 16 2014

Amount of Each Receipt this Period
24.26

IN KIND LAMINATION SHEETS FOR POLITICAL POSTERS

C. Full Name (Last, First, Middle Initial)
STAPP, KENNETH S.

Mailing Address
7750 NORTH HIGHWAY 421

City **MANCHESTER** State **KENTUCKY** Zip Code **40962**

FEC ID number of contributing federal political committee. **C**

Name of Employer **KENNETH S. STAPP, PSC** Occupation **ATTORNEY AT LAW**

Receipt For: **Primary XXX General** Election Cycle-to-Date
Other (specify)

Date of Receipt
09 26 2014

Amount of Each Receipt this Period
3.58

IN KIND STAPLES FOR STAPLING CAMPAIGN POSTERS

SUBTOTAL of Receipts This Page (optional) **47.83**

TOTAL This Period (last page this line number only) **47.83**

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 16

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (in Full) STEPP COMMITTEE	
Full Name (Last, First, Middle Initial) STEPP, KENNETH S.	
A. Mailing Address 7750 NORTH HIGHWAY 421	Date of Receipt 09 28 2014
City MANCHESTER State KENTUCKY Zip Code 40962	Amount of Each Receipt this Period 48.51
FEC ID number of contributing federal political committee. C	IN KIND POSTER LAMINATION SHEETS FOR POLITICAL POSTERS
Name of Employer KENNETH S. STEPP, PSC Occupation ATTORNEY AT LAW	
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	
Election Cycle-to-Date 96.34	
Full Name (Last, First, Middle Initial) STEPP, KENNETH S.	
B. Mailing Address 7750 NORTH HIGHWAY 421	Date of Receipt 09 28 2014
City MANCHESTER State KENTUCKY Zip Code 40962	Amount of Each Receipt this Period \$ 50.00
FEC ID number of contributing federal political committee. C	
Name of Employer KENNETH S. STEPP, PSC Occupation ATTORNEY AT LAW	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	
Election Cycle-to-Date 146.34	
Full Name (Last, First, Middle Initial) STEPP, KENNETH S.	
C. Mailing Address 7750 NORTH HIGHWAY 421	Date of Receipt
City MANCHESTER State KENTUCKY Zip Code 40962	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. C	
Name of Employer KENNETH S. STEPP, PSC Occupation ATTORNEY AT LAW	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify)	
Election Cycle-to-Date	
SUBTOTAL of Receipts This Page (optional) \$98.51	
TOTAL This Period (last page this line number only) \$ 146.34	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

10 16

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE OF 16	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
STEPP COMMITTEE

Full Name (Last, First, Middle Initial) A. LOWE'S		Date of Disbursement 09 26 2014
Mailing Address 136 KEAVY ROAD		Amount of Each Disbursement this Period \$10.35 IN KIND CONTRIBUTION BY CARSON STEPP
City LONDON	State KY	
Zip Code 40744	Category/ Type 006	
Purpose of Disbursement METAL POSTS FOR CAMPAIGN SIGNS	Candidate Name KENNETH STEPP	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: KY	District: 05	

Full Name (Last, First, Middle Initial) B. SPEEDWAY		Date of Disbursement 09 30 2014
Mailing Address 1847 CUMBERLAND FALLS HIGHWAY		Amount of Each Disbursement this Period \$42.70 IN KIND CONTRIBUTION BY CARSON STEPP
City CORBIN	State KY	
Zip Code 40701	Category/ Type 002	
Purpose of Disbursement CAMPAIGN TRAVEL GASOLINE	Candidate Name KENNETH STEPP	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: KY	District: 05	

Full Name (Last, First, Middle Initial) C. LOWE'S		Date of Disbursement 10 02 2014
Mailing Address 2001 SOUTH HIGHWAY 27		Amount of Each Disbursement this Period \$18.95 IN KIND CONTRIBUTION BY CARSON STEPP
City SOMERSET	State KY	
Zip Code 42501	Category/ Type 006	
Purpose of Disbursement METAL POSTS FOR CAMPAIGN SIGNS	Candidate Name KENNETH STEPP	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: KY	District: 05	

SUBTOTAL of Disbursements This Page (optional).....	\$72.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE OF 11 16

17 18 19a 19b
 20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

STEPP COMMITTEE

Full Name (Last, First, Middle Initial)

A. POSTMASTER

Mailing Address

HIGHWAY 421

City MCKEE State KENTUCKY Zip Code 40447-9998

Purpose of Disbursement

IN KIND POSTAGE FOR F.E.C. REPORT

001

Candidate Name

KENNETH S. STEPP

Category/
Type

Office Sought: XX House
Senate
President

Disbursement For:
Primary XXX General
Other (specify)

State: KY District: FIFTH

Full Name (Last, First, Middle Initial)

Date of Disbursement

07 08 2014

Amount of Each Disbursement this Period

19.99

BY KENNETH S. STEPP

BY KENNETH S. STEPP

B. WALMART

Mailing Address

1854 HIGHWAY 192 W

City LONDON State KENTUCKY Zip Code 40741

Purpose of Disbursement

IN KIND LAMINATION SHEETS FOR POSTERS

006

Candidate Name

KENNETH S. STEPP

Category/
Type

Office Sought: XXX House
Senate
President

Disbursement For:
Primary XXXX General
Other (specify)

State: KY District: FIFTH

Full Name (Last, First, Middle Initial)

Date of Disbursement

07 16 2014

Amount of Each Disbursement this Period

24.26

by KENNETH S. STEPP

C. LOWE'S HOME CENTERS, LLC

Mailing Address

BY COMMERCE DRIVE

City HAZARD State KENTUCKY Zip Code 41701

Purpose of Disbursement

STAPLES FOR STAPLING CAMPAIGN POSTERS

006

Candidate Name

KENNETH S. STEPP

Category/
Type

Office Sought: XXX House
XXX Senate
President

Disbursement For:
Primary XXXX General
Other (specify)

State: KY District: FIFTH

Date of Disbursement

09 26 2014

Amount of Each Disbursement this Period

3.58

BY KENNETH S. STEPP

SUBTOTAL of Disbursements This Page (optional).....

47.83

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE OF 12 26

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
STEPP COMMITTEE

Full Name (Last, First, Middle Initial) A. ALLEGRA PRINTING		Date of Disbursement 08 22 2014
Mailing Address 1661 SOUTH MAIN STREET		Amount of Each Disbursement this Period \$821.93
City LONDON	State KY	
Zip Code 49741		IN KIND CONTRIBUTION BY CARSON STEPP
Purpose of Disbursement CAMPAIGN SIGNS	006	
Candidate Name KENNETH S. STEPP	Category/ Type	
Office Sought: XXX House Senate President	Disbursement For: Primary XXX General Other (specify)	
State: KY District: 05		

Full Name (Last, First, Middle Initial) B. PRINTOPS PAYPAL		Date of Disbursement 09 22 2014
Mailing Address 2211 NORTH FIRST STREET		Amount of Each Disbursement this Period \$156.00
City SAN JOSE	State CA	
Zip Code 95131		IN KIND CONTRIBUTION BY CARSON STEPP
Purpose of Disbursement CAMPAIGN SIGN BRACKETS	006	
Candidate Name KENNETH S. STEPP	Category/ Type	
Office Sought: XXX House Senate President	Disbursement For: Primary XXX General Other (specify)	
State: KY District: 05		

Full Name (Last, First, Middle Initial) C. SHELL OIL		Date of Disbursement 10 03 2014
Mailing Address		Amount of Each Disbursement this Period \$13.66
City BEATTYVILLE	State KY	
Zip Code		IN KIND CONTRIBUTION BY CARSON STEPP
Purpose of Disbursement CAMPAIGN TRAVEL GASOLINE	002	
Candidate Name KENNETH S. STEPP	Category/ Type	
Office Sought: XXX House Senate President	Disbursement For: Primary XXX General Other (specify)	
State: KY District: 05		

SUBTOTAL of Disbursements This Page (optional)..... \$991.59

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 OF 16

17
 18
 19a
 19b
 20a
 20b
 20c
 21

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NAME OF COMMITTEE (In Full)

STEPP COMMITTEE

Full Name (Last, First, Middle Initial)

A. WALMART

Date of Disbursement

Mailing Address 60 SOUTH STEWART ROAD

09 28 2014

City ~~60 SOUTH STEWART ROAD~~ State Zip Code
CORBIN KENTUCKY 40701

Amount of Each Disbursement this Period

48.51

Purpose of Disbursement
IN KIND LAMINATION SHEETS FOR POSTERS

006

Candidate Name
KENNETH S. STEPP

Category/
Type

BY KENNETH S. STEPP

Office Sought: ~~XXX~~ House
Senate
President
Disbursement For:
Primary ~~XXX~~ General
Other (specify)

State: KY District: FIFTH

Full Name (Last, First, Middle Initial)

B. ACTBLUE ACTBLUE FED (CITI CONDUIT)

Date of Disbursement

Mailing Address
P. O. BOX 441146

09 28 2014

City SOMERVILLE State Zip Code
MA 02144

Amount of Each Disbursement this Period

Purpose of Disbursement
campaign fundraising

006

Candidate Name
KENNETH S. STEPP

Category/
Type

\$ 1.98

Office Sought: ~~XXXX~~ House
Senate
President
Disbursement For:
Primary ~~XXXX~~ General
Other (specify)

State: KY District: 05

Full Name (Last, First, Middle Initial)

C. Date of Disbursement

Mailing Address

City State Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
Senate
President
Disbursement For:
Primary General
Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional).....

\$ 50.49

TOTAL This Period (last page this line number only).....

\$ 1,161.91

**SCHEDULE C (FEC Form 3)
LOANS**

Use separate schedule(s) for each category of the Detailed Summary Page
FOR LINE NUMBER: (check only one) 13a 13b

NAME OF COMMITTEE (In Full)
STEPP COMMITTEE

LOAN SOURCE Full Name (Last, First, Middle Initial)
Mailing Address
Election: Primary General Other (specify) ▼

City State ZIP Code

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period

TERMS
Date Incurred Date Due Interest Rate Secured:
M M / D D / Y Y Y Y M M / D D / Y Y Y Y % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)..... ▶ [] 0
TOTALS This Period (last page in this line only) ▶ [] 0

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE	OF	15	16
	FOR LINE NUMBER: (check only one)		<input type="checkbox"/>	9
			<input type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
 STEPP COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State Zip Code	
Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State Zip Code	
Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State Zip Code	
Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	▶	
2) TOTALS This Period (last page this line number only)	▶	0
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	▶	0
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	0

p. 16 of 16

SCHEDULE C-1 (FEC Form 3) LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for
Information found on
Page ___ of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (In Full) STEPP COMMITTEE		FEC IDENTIFICATION NUMBER C00556803
LENDING INSTITUTION (LENDER) Full Name	Amount of Loan	Interest Rate (APR)
Mailing Address	Date Incurred or Established	
City State Zip Code	Date Due	

A. Has loan been restructured? No Yes If yes, date originally incurred

B. If line of credit, Total Outstanding Balance:
Amount of this Draw:

C. Are other parties secondarily liable for the debt incurred?
No Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral?
No Yes If yes, specify: _____

What is the value of this collateral?
Does the lender have a perfected security interest in it? No Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? No Yes If yes, specify: _____

What is the estimated value?

A depository account must be established pursuant to 11 CFR 100.82(e)(2) and 100.142(e)(2).
Date account established: _____

Location of account: _____
Address: _____
City, State, Zip: _____

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.

G. COMMITTEE TREASURER Typed Name Signature	DATE
---	------

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:

- I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.
- II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.
- III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

AUTHORIZED REPRESENTATIVE Typed Name Signature		DATE
Title		

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R. S. STEPH
PHONE 006546-0360
P.O. BOX 1271
MANCHESTER, KY
40962

PAYMENT BY ACCOUNT (if applicable)

DELIVERY OPTIONS (Customer Use Only)

- SIGNATURE REQUIRED Note: The mailer must check the "Signature Required" box if the mailer: 1) Requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.
- No Saturday Delivery (delivered next business day)
- Sunday/Holiday Delivery Required (additional fee, where available)
- 10:30 AM Delivery Required (additional fee, where available)

TO: (PLEASE PRINT)
PHONE 006546-0520
FEDERAL ELECTION COMMISSION
999 E STREET, NW
WASHINGTON DC
20463

- For pickup or USPS Tracking™, visit USPS.com or call 800-222-1811.
- \$100.00 Insurance Included.

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<input type="checkbox"/> 1-Day	<input type="checkbox"/> 2-Day	PO ZIP Code	Scheduled Delivery Date (MM/DD/YY)
<input type="checkbox"/> Military	<input type="checkbox"/> DPO	40447	10-15-14
Postage	Insurance Fee	Date Accepted (MM/DD/YY)	Scheduled Delivery Time
\$ 19.99	\$	10-14-14	<input type="checkbox"/> 10:30 AM <input type="checkbox"/> 3:00 PM
Return Receipt Fee	Live Animal Transportation Fee	Time Accepted	10:30 AM Delivery Fee
\$	\$	12:00 PM	\$
Total Postage & Fees	Acceptance Employee Initials	Weight	Sunday/Holiday Premium Fee
\$ 19.99	BS	5 lbs.	\$
DELIVERY (POSTAL SERVICE USE ONLY)		Delivery Attempt (MM/DD/YY)	Employee Signature
Delivery Attempt (MM/DD/YY)	Time	<input type="checkbox"/> AM <input type="checkbox"/> PM	
		<input type="checkbox"/> AM <input type="checkbox"/> PM	
Delivery Attempt (MM/DD/YY)	Time	Employee Signature	

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LABEL MAY BE REQUIRED.

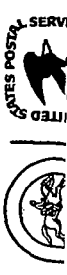


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Federal Election Commission
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USPS Priority Mail Express Postmarked
10/14/2014

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Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

JR 10/15/2014
 PREPARER DATE PREPARED

2014 OCT 15 10:00 AM