RECEIVER: 2013 JUL 24 AM 11: 52 FEC MAIL CENTED

Committee Name:	COMAIL CENTER
We Are Kentucky	
If registered, FEC ID:	
Today's Date:	
July 23, 2013	

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

Re: Form 1, Statement of Organization-Unlimited Contributions

To Whom It May Concern:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Respectfully submitted,

Treasurer's Name:

William H. May

, Treasurer

STATEMENT OF

DECEMBE

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FORM 1	ORGANIZATION		2013 JUL 24mce AM bhi, 52		
NAME OF COMMITTEE (in	n full)		(Check if name is changed)	Example: If typing, type over the lines.	12FEGMAAIL CENTER
WE ARE K	ENTU	CKY			,
			<u> </u>		
		.127 W	Main Street		
ADDRESS (number a	nd street)	نـــــــــــــــــــــــــــــــــــــ			
(Check if a is changed		نيا			
·		Lexing	ton 		STATE A ZIP CODE A
COMMITTEE'S E-MA	AIL ADDRES	SS			
(Check if a		bmay	@hcm-law.com		
is changed	1)	Ontion:	al Second E-Mail Ado	tress	
is changed	1)				
2. DATE 0	7 23		2013		
3. FEC IDENTIFIC	CATION NU	MBER	▶ C.		
4. IS THIS STATEM	MENT 🔀	NE\	W (N) OR	AMENDED (A)	
I certify that I have e	examined thi	s Staten	nent and to the best	of my knowledge and belie	f it is true, correct and complete.
Type or Print Name	of Treasurer	Williar	n H. May		
Signature of Treasure	er <u></u>	11	e /m	<i>P</i>	Date Date
NOTE: Submission of				may subject the person signir	ng this Statement to the penalties of 2 U.S.C. §437g. O WITHIN 10 DAYS.
Office Use Only				For further information Federal Election Comm Toll Free 800-424-9530	ission FEC FURIVI I

5.

		COMMITTEE e 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 Cand		<u> </u>		
Cand Party	idate Affiliati	Office State Sought: House Senate President District		
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.		
Name Cand				
Part	y Con	mmittee:		
(d)		This committee is a (National, State (Democratic, Republican, etc.) Party.		
Poli	tical A	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)	\boxtimes	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.)		
Join	t Fund	draising 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 foderal 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		
	2.	FEC ID number		
	3.	FEC ID number C		
	4.	FEC ID number		

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	FEC FOILI I ((Revised 02/2009) Pag	e 3
Wr	ite or Type Commit	ittee Name	
٧	VE ARE K	KENTUCKY	
6.	Name of Any Con	nnected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC	Sponsor
NC NC	DNE 		
	Mailing Address		
		CITY STATE ZIP COD)E
l	Relationship:	Connected Organization Affiliated Committee Joint Fundraising Representative Leadership F	PAC Sponsor
	Custodian of Recobooks and records.	cords: Identify by name, address (phone number optional) and position of the person in possession cs.	of committee
		William H. May	1
	Full Name	,127 W. Main Street	
ı	Mailing Address		
		10507	لـــــا
		Lexington KY 40507	للللل
	Title or Position	CITY STATE ZIP COD	E
	Treasurer	Telephone number 559 - 254 -	0000
		e name and address (phone number optional) of the treasurer of the committee; and the name and a lent (e.g., assistant treasurer).	ddress of
	Full Name Vof Treasurer	William H. May	4
	Mailing Address	127 W. Main Street	
	-		
		Lexington KY 40507 - CITY STATE ZIP COD	E
] 	Fitle or Position Treasurer	Telephone number	0000

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Full Name of Designated Agent			
Mailing Address			
		ا ليا ليب	
	CITY	STATE	ZIP CODE
Title or Position			
		Telephone number	-
safety deposit boxes or ma Name of Bank, Depository,	etc. onal Bank 163 W Short Street #100 Lexington	KY 4 ⁰	
	CITY	STATE	ZIP CODE
Name of Bank, Depository,	etc.		
ليب			
Mailing Address			
		ا ليا ليب	لــــا-لــــا
	CITY	STATE	ZIP CODE

(7/2013)

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. Date of Receipt **Hand Delivered** Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail** Postmarked **USPS Express Mail** Postmark Illegible No Postmark Shipping Date 7/23/13 Fed Ex Overnight Delivery Service (Specify): Next Business Day Delivery **Date of Receipt** 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 or Postmarked Other (Specify): PREPARER DATE PREPARED