10/04/2006 15:56

Image# 26930418115

### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines Kentucky Medical Associaton PAC (Kentucky Educational Medical PAC - KEMPAC) Suite 2000 ADDRESS (number and street) 4965 US Highway 42 Check if different than previously Louisville ΚY 40222 reported. (ACC) FEC IDENTIFICATION NUMBER STATE. CITY A ZIPCODE A IS THIS **AMENDED** NEW C00016444 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: Termination Report (TER) in the Election on State of 07 0 1 2006 09 30 2006 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Mary-Stuart Reichard Type or Print Name of Treasurer Electronically Filed by Mary-Stuart Reichard 10 04 2006 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 02/2003) Only

### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

R	eport Covering the Period: From:	01 2006	To: 0 9 3 0 2 0 0 6
	_	COLUMN A This Period	COLUMN B Calendar Year-to-Date
i.	(a) Cash on Hand  January 1  Y2006  Y2006		110462.09
	(b) Cash on Hand at Begining of Reporting Period	86501.75	
	(c) Total Receipts (from Line 19)	17097.01	71678.50
	(d) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	103598.76	182140.59
<b>'</b> .	Total Disbursements (from Line 31)	36153.51	114695.34
	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	67445.25	67445.25
١.	Debts and Obligations owed TO		
	the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
0.	Debts and Obligations owed BY		
	the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
	X This Committee has qualified as a multicandidate	e committee. (see FEC FORM 1M)	

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 3X (Rev. 02/2003) Page 3

2006

3<sup>D</sup>0

2006

0.00

0.00

71678.50

71678.50

м м 0 9

To:

0 1

Write or Type Committee Name

Report Covering the Period:

(b) Levin Funds (from Schedule H5) ......

(c) Total Transfer (add 18(a) and 18(b)).

12, 13, 14, 15, 16, 17, and 18(c)) .....

(subtract Line 18(c) from Line 19) .....

19. Total Receipts (add Lines 11(d),

20. Total Federal Receipts

Kentucky Medical Associaton PAC (Kentucky Educational Medical PAC - KEMPAC)

м м 0 7

From:

**COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 5900.00 16900.00 (i) Itemized (use Schedule A) .......... 10630.00 53430.00 (ii) Unitemized ..... (iii) TOTAL (add 16530.00 70330.00 Lines 11(a)(i) and (ii) ...... 0.00 0.00 (b) Political Party Committees ..... Other Political Committees 0.00 0.00 (such as PACs) ..... Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 16530.00 70330.00 Totals to Line 33, page 5) ..... 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees ..... 0.00 0.00 13. All Loans Received ..... 0.00 0.00 14. Loan Repayments Received ..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) ..... 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees ..... 17. Other Federal Receipts 567.01 1348.50 (Dividends, Interest, etc.) ..... 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) .....

0.00

0.00

17097.01

17097.01

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4

	I. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	ating Expenditures: Shared Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
(	(i) Federal Share	0.00	0.00
(	(ii) Non-Federal Share	0.00	0.00
` '	Other Federal Operating  Expenditures	6013.51	31005.34
	Total Operating Expenditures	2010 51	04005.04
	(add 21(a)(i), (a)(ii) and (b))	6013.51	31005.34
	nitteesibutions to	4140.00	18690.00
Feder	ral Candidates/Committees Other Political Committees	0.00	0.00
. Indep	endent Expenditure	0.00	0.00
<ul> <li>Coord</li> </ul>	Schedule E)		
(use S	nittees (2 U.S.C. 441a(d)) Schedule F)	0.00	0.00
. Loan	Repayments Made	0.00	0.00
	s Made	0.00	0.00
(a) I	Refunds of Contributions To:  (a) Individuals/Persons Other Than Political Committees	0.00	1000.00
		0.00	0.00
` '	Political Party Committees Other Political Committees	0.00	0.00
,	(such as PACs)	0.00	0.00
` '	Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	1000.00
Other	Disbursements	26000.00	64000.00
). Fede	ral Election Activity (2 U.S.C 431(20))		
(a) S	Shared Federal Election Activity		
,	from Schedule H6) (i) Federal Share	0.00	0.00
·	•	0.00	0.00
	(ii) "Levin" Share Federal Election Activity Paid Entirely		
` '	Vith Federal Funds	0.00	0.00
	Fotal Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
. Total	Disbursements (add Lines 21(c), 22,	20150 51	4440000
23, 2	24, 25, 26, 27, 28(d), 29 and 30(c))	36153.51	114695.34
2. Tota	l Federal Disbursements		
•	tract Line 21(a)(ii) from Line 30(a)(ii)	36153.51	114695.34
irom	Line 31)	30133.31	114095.32

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Opera Expenditures	ating COLUMN A  Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loar from Line 11(d), page 3)	'	70330.00
34. Total Contribution Refunds (from Line 28(d))	0.00	1000.00
<ol> <li>Net Contributions (other than loans (subtract Line 34 from Line 33)</li> </ol>	10500.00	69330.00
<ol> <li>Total Federal Operating Expenditure (add Line 21(a)(i) and Line 21(b))</li> </ol>	6013 51	31005.34
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	6013.51	31005.34

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 33 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
An or i	y information copied from such Reports and Sta or commercial purposes, other than using the n	tements may ame and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
$\overline{\rangle}$	NAME OF COMMITTEE (In Full) Kentucky Medical Associaton PAC (Ken	tucky Educ	cational Medical PAC - KEM	PAC)
Α.	Full Name (Last, First, Middle Initial) Keith J. Alexander, MD  Mailing Address 3633 Winding Wood Ln  City Lexington  FEC ID number of contributing federal political committee.  Name of Employer Kentucky Ear, Nose & Throat  Receipt For: Primary General Other (specify)   Full Name (Last, First, Middle Initial)	State KY  C  Occupation Physician Aggregate		Date of Receipt  M M M / 20 / 2006  Transaction ID: R7563  Amount of Each Receipt this Period  150.00  Check
3.	Full Name (Last, First, Middle Initial)  Jeffrey T. Dardinger, MD  Mailing Address 500 Thomas More Pkwy  City  Crestview Hills  FEC ID number of contributing federal political committee.  Name of Employer Radiology Associates of Northern KY  Receipt For:  Primary General  Other (specify)	State KY  C Occupation Physician		Date of Receipt  M M M / 22 / 2006  Transaction ID: R7582  Amount of Each Receipt this Period  300.00  Check
C.	Full Name (Last, First, Middle Initial) Patricia M. Elliott-Williams, MD  Mailing Address 1111 Medical Center Dr  City Mayfield  FEC ID number of contributing federal political committee.  Name of Employer Morgan-Haugh Clinic  Receipt For:  Primary General Other (specify)	State KY  C  Occupation Physician Aggregate		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SI	JBTOTAL of Receipts This Page (optional)		<b>_</b>	950.00
T	OTAL This Period (last page this line number or	nly)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 7/33
	EMIZED RECEIPTS		or each category of the	(check only one)
•••			Detailed Summary Page	X   11a   11b   11c   12   13   14   15   16   17
Δr	y information copied from such Reports and Sta	Itaments may	not be sold or used by any person	
or	for commercial purposes, other than using the n	ame and add	lress of any political committee to	o solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full)			
	Kentucky Medical Associaton PAC (Ken	tucky Educ	cational Medical PAC - KEM	PAC)
A.	Full Name (Last, First, Middle Initial) Christopher J. Frost, MD			Date of Receipt
	Mailing Address 488 Leaf Ln			08 22 2006
	City	State	Zip Code	Transaction ID: R7607
	Somerset	KY	42503-4662	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1000.00
	Name of Employer Dermatology Centr of Lake Cumberland	Occupation Self-empl	loyed physician	— Check
	Receipt For:		Year-to-Date ▼	
	Primary General	<u> </u>	1000.00	1
	Other (specify)	0 0	1000:00	
В.	Full Name (Last, First, Middle Initial) Sandra K. Frost			Date of Receipt
	Mailing Address 488 Leaf Ln			08 / 22 / Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R7608
	Somerset	KY	42501	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1000.00
	Name of Employer	Occupation Homema		— Check
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		1000.00	1
	Other (specify)	0 0	1000.00	
C.	Full Name (Last, First, Middle Initial) Citizens for Affordable Healthcare			Date of Receipt
Ο.	Mailing Address 500 Thomas More Pkwy	Ste 5		M M / D D / Y Y Y Y
				08 31 2006
	City	State	Zip Code	Transaction ID: R7622
	Crestview Hills	KY	41017	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Mr. C. Chad Wiggins, Trea- surer	Occupation Health Ca	are PAC	Check
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		1500.00	
	IIPTOTAL of December This December (anticed)			2500.00
$\vdash$	UBTOTAL of Receipts This Page (optional)			
Т.	OTAL This Period (last page this line number or	nly)		

SCHEDULE A (FEC Form 3X)  Lise separate schedule(s)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 8/33	
	EMIZED RECEIPTS		or each category of the	(check only one)
••	LIMIZED REOLII 10		Detailed Summary Page	X 11a 11b 11c 12
Δ	wintermention coming from a contract to the			13 14 15 16 17
or	y information copied from such Reports and Sta for commercial purposes, other than using the n	ame and add	frict be sold of used by any perso dress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$\rangle$	Kentucky Medical Association PAC (Ken	tucky Educ	cational Medical PAC - KEMI	PAC)
	Full Name (Last, First, Middle Initial)			
A.	David J. Lubbers, MD			Date of Receipt
	Mailing Address 808 Windgate Ct			08 22 2006
	City	State	Zip Code	Transaction ID: R7593
	Villa Hills	KY	41017-1311	Amount of Each Receipt this Period
	FEC ID number of contributing		1 1 1 1 1 1	
	federal political committee.	C		150.00
	Name of Employer Radiology Associates of	Occupation	1	Check
	Northern KY	Physician		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	' '	300.00	
	Other (specify)	0 0		
— В.	Full Name (Last, First, Middle Initial) William B. Monnig, MD			Date of Receipt
	Mailing Address 111 Crystal Ln			M M / D D / Y Y Y Y
				09 21 2006
	City	State	Zip Code	Transaction ID: R7653
	Covington	KY	41015-9537	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer	Occupation	`	Check
	Name of Employer Monnig, Elicker, Creevy,		loyed physician	
	Schwartz Receipt For:		Year-to-Date ▼	
	Primary General			1
	Other (specify)	0 0	500.00	
<u>с.</u>	Full Name (Last, First, Middle Initial) Eric W. Neils, MD			Date of Receipt
	Mailing Address 904 Squire Oaks Dr			M M / D D / Y Y Y Y
	-		7. 0 .	08 22 2006
	City	State	Zip Code	Transaction ID: R7598
	Villa Hills	KY	41017-1371	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		150.00
	Name of Employer	Occupation	1	Check
	Radiology Associates of Northern KY	Physician	1	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		300.00	
	Other (specify) ▼	0 0	1 1 1 1 1 1 1	
	UBTOTAL of Receipts This Page (optional)			800.00
$\vdash$				
T	OTAL This Period (last page this line number or	nly)	<b>&gt;</b>	

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE N		PAGE 9/33
	EMIZED RECEIPTS		or each category of the	(check only or	,   —	I 🗖
••	EMIZED REGENT TO		Detailed Summary Page	X 11a 13	11b	11c   12 15   16   17
Ar	ny information copied from such Reports and Statemer	nts may	not be sold or used by any perso			
or	for commercial purposes, other than using the name a	and add	dress of any political committee to	solicit contributi	ons from s	uch committee.
$\setminus$	NAME OF COMMITTEE (In Full)					
	Kentucky Medical Associaton PAC (Kentucky	/ Educ	cational Medical PAC - KEM	PAC)		
^	Full Name (Last, First, Middle Initial)			Data of Br	a oint	
Α.	Gary M. Schmitt, MD  Mailing Address 1355 Custer Ave			Date of Re	ceipt	/ Y Y Y Y Y
	Maining / Rodrocco 1555 Ouster Ave			0 8	22	2006
	City	ate	Zip Code	Transactio	on ID: R7	601
	<u>Cincinnati</u> O	<u>H</u>	45208-2556	Amount of	Each Red	eipt this Period
	FEC ID number of contributing federal political committee.					150.00
	Name of Employer Radiology Associates of Rhy	upation	1	Check		
	Radiology Associates of Northern KY	/siciar	1			
		gregate	Year-to-Date ▼			
	Primary General Other (specify) ▼		300.00			
	Other (specify)	0 0				
В.	Full Name (Last, First, Middle Initial) Orville J. Stein, MD			Date of Re	eceipt	
	Mailing Address 475 Goodin Rd			0 9	19	2006
	•	ate	Zip Code	Transactio	on ID: R7	641
	Somerset K	Υ	42503	Amount of	Each Red	eipt this Period
	FEC ID number of contributing federal political committee.					250.00
	Name of Employer Occ	upation	1	Credit Car	d	
			hysician			
	Receipt For: Age	gregate	Year-to-Date ▼	.		
	Other (specify)		250.00			
	_ said (spear)) V	0 0		1		
_	Full Name (Last, First, Middle Initial)			5. (5		
C.	Sean D. Wells, MD  Mailing Address 1723 Grandview Drive			Date of Re		
	Maining Address 1/23 Grandview Drive			0.8	22	2006
	City St	ate	Zip Code	Transactio	on ID: R7	606
	Hebron K	Υ	41048-7957	Amount of	Each Rec	eipt this Period
	FEC ID number of contributing federal political committee	Ι'		, ,		150.00
	federal political committee.					
	Padialogy Associatos of	upation		Check		
	Northern KY	/siciar				
	Receipt For: Agg	gregate	Year-to-Date ▼	.		
	Other (specify)		300.00			
	X-F 37 V	0 0		1		
	·					550.00
S	UBTOTAL of Receipts This Page (optional)		·····			330.00
_	OTAL This Period (last page this line number only)		<b>b</b>			
	(   E					

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

FOR LINE NUMBER: PAGE 10/33 Use separate schedule(s) (check only one) or each category of the 11a 11b 11c Detailed Summary Page 13 17 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) Kentucky Medical Associaton PAC (Kentucky Educational Medical PAC - KEMPAC) Full Name (Last, First, Middle Initial) John Robert White, MD Date of Receipt Mailing Address 1218 Summitt Dr 09 21 2006 City State Zip Code Transaction ID: R7658 Lexington KY 40502-2273 Amount of Each Receipt this Period FEC ID number of contributing C 1100.00 federal political committee. Check Name of Employer Occupation Self-employed physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1100.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)	<b>•</b>	1100.00
TOTAL This Period (last page this line number only)	<b>•</b>	5900.00

SCHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 11/33
TEMIZED RECEIPTS		or each category of the	(check only one)
<del>-</del>		Detailed Summary Page	13 14 15 16 X 17
Any information copied from such Reports and State or for commercial purposes, other than using the nar	ements may me and ado	r not be sold or used by any perso lress of any political committee to	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)			
Kentucky Medical Associaton PAC (Kentu	ucky Educ	cational Medical PAC - KEM	PAC)
Full Name (Last, First, Middle Initial) Kentucky Telco Federal Credit Union			Date of Receipt
Mailing Address 3740 Bardstown Road			07 01 7 2006
City Louisville	State KY	Zip Code 40218	Transaction ID: R7560
FEC ID number of contributing federal political committee.	C	40210	Amount of Each Receipt this Period  133.29
Name of Employer	Occupation	1	Check
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1348.50	
Full Name (Last, First, Middle Initial)  3. Kentucky Telco Federal Credit Union			Date of Receipt
Mailing Address 3740 Bardstown Road			07 31 2006
City	State	Zip Code	Transaction ID: R7580
Louisville	KY	40218	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		140.75
Name of Employer	Occupation	1	Cash
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		1348.50	
Full Name (Last, First, Middle Initial)  C. Kentucky Telco Federal Credit Union			Date of Receipt
Mailing Address 3740 Bardstown Road			08 31 7 2006
City	State	Zip Code	Transaction ID: R7623
Louisville	KY	40218	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		144.59
Name of Employer	Occupation	1	Cash
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	1348.50	
SUBTOTAL of Receipts This Page (optional)			418.63
TOTAL This Period (last page this line number only	y)	<b></b>	

### S

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 33 (check only one)  11a 11b 11c 12 13 14 15 16 17 17
	y information copied from such Reports and Stateme for commercial purposes, other than using the name		
$\rangle$	NAME OF COMMITTEE (In Full) Kentucky Medical Associaton PAC (Kentuck	ky Educational Medical PAC - KEMP	PAC)
•	Full Name (Last, First, Middle Initial) Kentucky Telco Federal Credit Union Mailing Address 3740 Bardstown Road		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	•	State Zip Code KY 40218	Transaction ID: R7662  Amount of Each Receipt this Period  148.38
	rederal political committee.	ccupation	- Cash
	Receipt For:  Primary  General  Other (specify)	ggregate Year-to-Date ▼ 1348.50	

SUBTOTAL of Receipts This Page (optional)	<b>•</b>	148.38
TOTAL This Period (last page this line number only)	<b>•</b>	567.01

	CHEDULE B (FEC FOIIII 3X)	Use seperate schedule(s)		FOR LINE (check only	NUMBER:	PAGE 13 / 33
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		X 21b 27	22 23 28a 28b	24 25 26 28c 29 30
	y Information copied from such Reports and State for commercial purposes, other than using the nan					
	NAME OF COMMITTEE (In Full)					
$\rangle$	Kentucky Medical Associaton PAC (Kentucky	ıcky Educational Medical	PAC	; - KEMPA	(C)	
Α.	Full Name (Last, First, Middle Initial)				Transaction ID	-
٠	Kentucky Medical Association				Date of Disburs	
	Mailing Address Suite 2000 4965 US Highway 42				0 7	3 1
	City Louisville	State Zip Code KY 40222			Amount of Each	n Disbursement this Period
	Purpose of Disbursement	K1 40222				1646.00
	7/06 Admin Fee (Rent, phone, mail,					
	Candidate Name		ı	ategory/ Type		
		sement For:	•		supplies)	
	Senate President	Primary General Other (specify) ▼				
	State: District:	_ Gallor (opposity) •				
_	Full Name (Last, First, Middle Initial)				Transaction ID	:: D1373
В.	Kentucky Medical Association				Date of Disburs	
	Mailing Address Suite 2000 4965 US Highway 42		$\begin{bmatrix} 0 & 7 & M & 1 & M & M & M & M & M & M & M & M$			
	City	State Zip Code			Amount of Each	n Disbursement this Period
	Louisville Purpose of Disbursement	KY 40222				226.12
	Reimburse for PAC mailing 108.42; PAC					
	Candidate Name		ı	ategory/ Type		
		sement For:			Supplies 117.	70 (Invoice
	Senate President	Primary General Other (specify) ▼			Supplies 117. #DL06094)	•
	State: District:	_ Carlor (opcomy) •				
C.	Full Name (Last, First, Middle Initial) Kentucky Medical Association				Transaction ID Date of Disburs	
	McCan Address O. D. 2000					3 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address Suite 2000 4965 US Highway 42					
	City Louisville	State Zip Code KY 40222			Amount of Each	n Disbursement this Period
	Purpose of Disbursement 08/06 Admin Fee (rent, phone, mail,					1646.00
	Candidate Name			ategory/ Type		
	Office Sought: House Disburs	sement For:	ļ		supplies)	
	Senate	Primary General			supplies)	
	President State: District:	Other (specify)				
						0540.40
s	UBTOTAL of Disbursements This Page (optional)	)		<u> </u>		3518.12
т	OTAL This Period (last page this line number only	/)		•		

	CHEDULE B (FEC FOIIII 3X)		rate schedule(s)		FOR LIN check or	E NUMB	ER:		P	AGE	14 / 3	33
ΙT	EMIZED DISBURSEMENTS		ategory of the Summary Page	_ I —	21b	22		23	24		25	26
۸n	y Information copied from such Reports and Statem	lonte may not	t bo cold or used	l by an	27	28a		28b	28c		29	30b
	for commercial purposes, other than using the name											•
$\rangle$	NAME OF COMMITTEE (In Full) Kentucky Medical Associaton PAC (Kentucky	ky Educati	onal Medical	PAC ·	- KEMF	PAC)						
۹.	Full Name (Last, First, Middle Initial) Kentucky Medical Association					Date	of D	isburs			V *	V
	Mailing Address Suite 2000 4965 US Highway 42					0 8	) ""	2	29 /	2	0 ŏ 6	
	•	State KY	Zip Code 40222			Amo	unt c	f Each	Disburs			-
	Purpose of Disbursement 09/06 Admin Fee (rent, phone, mail,									1	646.0	00
	Candidate Name				egory/ /pe							
	Office Sought: House Senate President State: District:	ment For: Primary Other (spec	General cify)			supp	olies)	1				
	Full Name (Last, First, Middle Initial)					Tran	sact	ion ID:	: D1430			
3.	Kentucky Medical Association					Date	of D	isburs	ement		Y	Υ
	Mailing Address Suite 2000 4965 US Highway 42					0.9	9	2	9 /	2	0 Ď 6	
	•	State KY	Zip Code 40222			Amo	unt c	f Each	Disburs	ement		-
	Purpose of Disbursement Reimburse for PAC Mail (\$11.50), PAC							•			18.5	06
	Candidate Name				egory/ ype							
	Office Sought:  Senate  President  State:  Disburse  Disburse	ment For: Primary Other (spec	General General Gify) ▼			Annı (\$7.0	ual N 06),	leetin Invoic	g Suppl e#DL06	ies 126		
). D.	Full Name (Last, First, Middle Initial) Kentucky Medical Association					1		ion ID:	: D1431			
	Mailing Address Suite 2000					0 9			9 /	Y Ž	0 ŏ 6	Y
	4965 US Highway 42	State	Zip Code			Δ		f Cook	Disburs		thia F	) oriod
	Louisville	KY	40222			Amo	uni c	i Each	Disburs		277.1	
	Purpose of Disbursement Reimburse for PAC Staff Travel Expenses									0	211.	0
	Candidate Name				egory/ ype							
	Office Sought:  Senate  President  State:  Disburse  Disburse	ment For: Primary Other (spec	General cify) ▼									
s	UBTOTAL of Disbursements This Page (optional) .				. •			-		19	941.6	66
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S	CHEDULE B (FEC Form 3X)	Use sepe	INE NUMBER: PAGE 15 / 33												
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	y Information copied from such Reports and Statem for commercial purposes, other than using the name										S				
$\left.\right\rangle$	NAME OF COMMITTEE (In Full) Kentucky Medical Associaton PAC (Kentuc						illoutions	Trom Such							
	Full Name (Last, First, Middle Initial)					Trans	saction I	<b>D</b> : D1376							
۹.	Kentucky Telco Federal Credit Union					Date of Disbursement									
	Mailing Address 3740 Bardstown Road					0 <sup>M</sup> 7	M / I	31	ž	οŏε	Y				
		State KY	Zip Code 40218			Amou	ınt of Ea	ch Disburse	ement		-				
	Purpose of Disbursement Credit Card Processing Fee					<u>L.</u>				3.	50				
	Candidate Name				ategory/ Type										
	Senate President	ment For: Primary Other (spe	General cify) ▼												
	State: District:														
3.	Full Name (Last, First, Middle Initial) Kentucky Telco Federal Credit Union						of Disbu								
	Mailing Address 3740 Bardstown Road	Chata Zin Coda					M / [	31 /	ž	οŏε	Y				
	•	State Zip Code KY 40218				Amou	unt of Ea	ch Disburse	ement		-				
	Purpose of Disbursement Credit Card Processing Fee					L.				12.4	12				
	Candidate Name				ategory/ Type										
	Senate President	ment For: Primary Other (spe	General cify) ▼												
 D.	State: District:  Full Name (Last, First, Middle Initial)  Kentucky Telco Federal Credit Union							<b>D</b> : D1435							
	Mailing Address 3740 Bardstown Road					0 9	of Disbu	3 0	y y 2	οŏε	Y				
		State	Zip Code			Amou	unt of Ea	ch Disburse							
	Louisville	KY	40218							22.8	21				
	Purpose of Disbursement Credit Card Processing Fee Candidate Name									22.0	,				
					ategory/ Type										
	Office Sought:  Senate  President  State:  Disburse  Disburse	ment For: Primary Other (spe	General cify) ▼												
2	UBTOTAL of Disbursements This Page (optional) .				▶					38.7	<b>'3</b>				
						-			$\Rightarrow$	-					
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	CHEDOLL B (I LOT OHII 3X)	Use seperate schedule(s)			s)   FOR LINE NUMBER: PAGE 16 / 33 (check only one)							33	
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	y Information copied from such Reports and Stater for commercial purposes, other than using the nam												ıs
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$ \rangle$	Kentucky Medical Associaton PAC (Kentu	cky Educati	onal Medical	PAC	) -	KEMP	AC)						
_	Full Name (Last, First, Middle Initial)						Trans	sact	ion ID	: D14	33		
Α.	Mrs. Jeanette M. Thompson								isburs			.,, .	
	Mailing Address 7604 Willow Bend Drive						0 <sup>M</sup> 9	М	/ D2	2 9	Y	ž 0 Ď (	3 <sup>Y</sup>
	City		Zip Code				Amou	unt c	f Each	Disb	urseme	nt this	Period
	Crestwood	KY	40014					-				215.	00
	Purpose of Disbursement Reimburse for travel expenses for PAC							-	-			210.	00
	Candidate Name				ateo Typ	gory/ be							
	Office Sought:    House   Disburs	ement For: Primary Other (spec	General <b>▼</b>										
_	Full Name (Last, First, Middle Initial)						<b>T</b>	•	ID	D40	75		
В.	Marshall E. White								ion ID isburs		i	ΥΥΥ	Y
	Mailing Address 1304 S. Sixth Street						0 7		3	3 1		žoó	5
	City Louisville	State KY	Zip Code 40206-2248				Amou	unt c	f Each	n Disb	urseme		
	Purpose of Disbursement 07/06 Political Consultant Fee						L.		•	-		100.	00
	Candidate Name				ateç Typ	gory/ pe							
	Senate President	ement For: Primary Other (spec	General <b>▼</b>										
	State: District:												
C.	Full Name (Last, First, Middle Initial)  Marshall E. White						Date	of D	ion ID isburs	ement	i		_
	Mailing Address 1304 S. Sixth Street						0 <sup>M</sup> 8	М	/ D3	3 1	Y	ž 0 Ď (	3 <sup>Y</sup>
	City Louisville	State KY	Zip Code 40206-2248				Amo	unt c	f Each	Disb	urseme	nt this	Period
	Purpose of Disbursement 08/06 Political Consultant Fee				•		] L.	_	•			100.	00
	Candidate Name				ateç Typ	gory/ e							
	Senate President	ement For: Primary Other (spec	General <b>▼</b>										
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s	UBTOTAL of Disbursements This Page (optional)					<u> </u>						415.	00
Т	OTAL This Period (last page this line number only	·)				•							

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50	CHEDULE B (FEC Form 3X)	Use seperate schedule(s)		INE NUMBER: PAGE 17/33									
ΙT	<b>EMIZED DISBURSEMENTS</b>	for each category of the	(check onl	y one)									
•		Detailed Summary Page	X 21b	22 23 24 25 26									
			27	28a 28b 28c 29 30b									
	y Information copied from such Reports and S	,		, ,									
Or	for commercial purposes, other than using the	e name and address of any political co	minilitiee to sc	sicil contributions from such committee									
	NAME OF COMMITTEE (In Full)												
/	Kentucky Medical Associaton PAC (K	entucky Educational Medical PA	C - KEMPA	₹C)									
	Full Name (Last, First, Middle Initial)			Transaction ID: D1434									
٩.	Marshall E. White			Date of Disbursement									
				09 / 29 / Y 2006									
	Mailing Address 1304 S. Sixth Stree	· ·		09 09 7 29 7 2006									
	City	State Zip Code		Amount of Each Disbursement this Period									
	Louisville	KY 40206-2248											
	Purpose of Disbursement			100.00									
	09/06 Political Consultant Fee												
	Candidate Name		Category/										
			Type										
	Office Sought: House Dis	bursement For:											
	Senate	Primary General											
	President	Other (specify) ▼											
	State: District:												

SUBTOTAL of Disbursements This Page (optional)	<b>•</b>	100.00
TOTAL This Period (last page this line number only)	<b>—</b>	6013.51

SCHEDULE B (FECFOIII 3X)	Use seperate schedule(s)	FOR LINE (check only		
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b	- '	7 26
		27	28a 28b 28c 29	30b
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NAME OF COMMITTEE (In Full)				
Kentucky Medical Associaton PAC (Kentu	cky Educational Medical P	AC - KEMPA	C)	
Full Name (Last, First, Middle Initial)			Transaction ID: D1371	
American Medical Association PAC			Date of Disbursement	
Mailing Address 1101 Vermont Avenue N	IW		077 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	
City Washington	State Zip Code DC 20005		Amount of Each Disbursement this Peri	od
Purpose of Disbursement	20003		800.00	
Transfer to Federal-Affiliated PAC				
Candidate Name		Category/ Type		
	ement For:			
Senate President	Primary General Other (specify) ▼			
State: District:	, , , , , , , , , , , , , , , , , , ,			
Full Name (Last, First, Middle Initial)			Transaction ID: D1377	
American Medical Association PAC			Date of Disbursement	I
Mailing Address 1101 Vermont Avenue N	IW		$\begin{bmatrix} \begin{smallmatrix} M & 8 & M \\ 0 & 8 & M \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & 3 & D \\ & 3 & 1 \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & 0 & 0 & 6 \\ & 2 & 0 & 0 & 6 & 4 \end{bmatrix}$	
City Washington	State Zip Code DC 20005		Amount of Each Disbursement this Peri	od
Purpose of Disbursement	20003		2000.00	
Transfer to federal affiliated PAC				
Candidate Name		Category/ Type		
Office Sought: House Disburs Senate	ement For:			
President	Primary General Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial)  American Medical Association PAC			Transaction ID: D1428 Date of Disbursement	
Mailing Address 1101 Vermont Avenue N	11.47		09 29 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 1101 Vermont Avenue N	IVV		20 200	I
City Washington	State Zip Code DC 20005		Amount of Each Disbursement this Peri	od
Purpose of Disbursement Transfer to Federal Affiliated PAC		•	1340.00	
Candidate Name	L	Category/ Type		
	ement For:			
Senate President	Primary General Other (specify) ▼			
State: District:	(-p-30)/ <b>V</b>			
SUBTOTAL of Disbursements This Page (optional)			4140.00	
			4440.00	
TOTAL This Period (last page this line number only	)		4140.00	

SCHEDOLL B (I LCI OIIII 3X)	Use seperate schedule(s)	(check onli	E NUMBER: PAGE 19/33					
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 28a	23 24 28b 28c	25 X 29	26 30b		
Any Information copied from such Reports and Statem						5		
or for commercial purposes, other than using the name	and address of any political co	mmillee to sc	olicit contributi	ions from Such	committee			
NAME OF COMMITTEE (In Full)  Kentucky Medical Associaton PAC (Kentuc	ky Educational Medical PA	AC - KEMPA	AC)					
Full Name (Last, First, Middle Initial)			Transacti	on ID: D1412				
A. Adam Koenig Campaign Fund				isbursement	V * V * V *	V		
Mailing Address 3346 Canterbury Ct.			0 9	<sup>2</sup> 29 <sup>2</sup>	žoó6			
	State Zip Code		Amount of	f Each Disburs	ement this F	eriod		
	KY 41018			• • •	500.0	00		
Purpose of Disbursement Non-Federal Adam Koenig (KY-69-R)					000.	, ,		
Candidate Name		Category/ Type						
Senate President	ment For: Primary General Other (specify)							
State: District:								
Full Name (Last, First, Middle Initial)  3. Alice Forgy Kerr Campaign Fund				on ID: D1386 isbursement	;			
			M M	29	Ý Ž 0 Ď 6	Υ		
Mailing Address PO Box 911188			0 9					
,	State Zip Code KY 40591-1188		Amount of	f Each Disburs	ement this F	eriod		
Purpose of Disbursement Non-Federal Alice Forgy Kerr (KY-12-R)	1990. 1.99	•			1000.0	00		
Candidate Name		Category/ Type						
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)							
Full Name (Last, First, Middle Initial)  Bill Farmer Campaign Fund				on ID: D1418	}			
Mailing Address 3361 Squire Oak Drive			0 9	<sup>2</sup> 2 9 /	<sup>°</sup> 2006	Y		
,	State Zip Code KY 40515		Amount of	f Each Disburs	ement this F	eriod		
Lexington  Purpose of Disbursement  Non-Federal William P. Farmer (KY-88-R)	KY 40515				500.0	00		
Candidate Name		Category/ Type						
Office Sought:  Senate  President  State:  Disburse	ment For: Primary General Other (specify)							
SUBTOTAL of Disbursements This Page (optional) .		<b>•</b>			2000.0	0		
TOTAL This Period (last page this line number only)								

SCHEDULE B (I LCI OIIII 3X)	Use seperate schedule(s)		LINE NUMBER: PAGE 20 / 3: k only one)						
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 28a	23 24 28b 28	25 c X 29	26 30b			
Any Information copied from such Reports and Statem						s			
or for commercial purposes, other than using the name	e and address of any political co	ommittee to s	SOLICIT CONTRIBL	itions from sucr	n committee				
NAME OF COMMITTEE (In Full)  Kentucky Medical Associaton PAC (Kentuc	ky Educational Medical PA	AC - KEMF	AC)						
Full Name (Last, First, Middle Initial)			Transac	tion ID: D140	5				
Bob DeWeese Campaign Fund				Disbursement					
Mailing Address 6206 Glen Hill Rd			0 9	29	žoó6	<b>5</b>			
	State Zip Code		Amount	of Each Disbur	sement this F	Period			
	KY 40222		-		1000.0	20			
Purpose of Disbursement Non-Federal Bob M. DeWeese (KY-48-R)					1000.0	30			
Candidate Name		Category/ Type							
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)								
Full Name (Last, First, Middle Initial)			_	ID D4404	<u> </u>				
Brad Montell Campaign Fund				tion ID: D1409 Disbursement		V			
Mailing Address 543 Main Street			0 9	29	ž 0 0 6	<b>S</b> '			
,	State Zip Code KY 40066		Amount	of Each Disbur		-			
Purpose of Disbursement Non-Federal Brad Montell (KY-58-R)					250.0	00			
Candidate Name		Category/ Type							
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼								
Full Name (Last, First, Middle Initial)			_	ID D444	•				
Brandon D. Smith Campaign Fund				tion ID: D1416 Disbursement		V			
Mailing Address 350 Kentucky Blvd.			0 9	29	ž 0 Ď 6	5			
,	State Zip Code KY 41701		Amount	of Each Disbur		-			
Purpose of Disbursement Non-Federal Brandon D. Smith (KY-84-R)					500.0	00			
Candidate Name		Category/ Type							
Office Sought:  Senate  President  State:  Disburse	ment For: Primary General Other (specify) ▼								
SUBTOTAL of Disbursements This Page (optional) .		<b>&gt;</b>			1750.0	00			
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S	CHEDULE B (FEC Form 3X)					INE NUMBER: PAGE 21 / 33							
IT	EMIZED DISBURSEMENTS	for each o	category of the Summary Page		(check on 21b 27	22 28a	23 28b	24 28c	25 X 29	26 30b			
	y Information copied from such Reports and Statem for commercial purposes, other than using the name												
$\left\langle \right\rangle$	NAME OF COMMITTEE (In Full) Kentucky Medical Associaton PAC (Kentuc							111 30011 0	Johnnie				
	Full Name (Last, First, Middle Initial)					Transa	ction ID:	D1397					
۹.	Brent Yonts Campaign Fund						Disburse						
	Mailing Address 232 Norman Circle					0 9	<sup>/</sup> <sup>D</sup> 2	9 / Y	žoč	6			
		State KY	Zip Code 42345-1824			Amount	of Each	Disburse					
	Purpose of Disbursement Non-Federal Brent Yonts (KY-15-D)					L.			500	0.00			
	Candidate Name				tegory/ Type								
	Senate President	ment For: Primary Other (spe	General cify) ▼										
	State: District:												
3.	Full Name (Last, First, Middle Initial) Carolyn Belcher Campaign Fund						ction ID: Disburse	ment					
	Mailing Address PO Box 44					0 9	2	9 / Y	žoč	) 6 <sup>Y</sup>			
	,	State KY	Zip Code 40366			Amount	of Each	Disburse	ment this	s Period			
	Purpose of Disbursement Non-Federal Carolyn R. Belcher (KY-72-D)					L.			500	0.00			
	Candidate Name				tegory/ Γype								
	Senate President	ment For: Primary Other (spe	General cify) ▼										
	State: District: Full Name (Last, First, Middle Initial)					Transa	ction ID:	D1410					
Э.	Charles R. Hoffman Campaign Fund					Date of	Disburse	ment	· · · · · · · · ·	Y			
	Mailing Address 406 Bourbon Street					0.9	<sup>/</sup> <sup>D</sup> 2	9	žoč	6			
		State KY	Zip Code 40324-1813			Amount	of Each	Disburse					
	Purpose of Disbursement Non-Federal Charles R. Hoffman (KY-62-D)					L.			500	0.00			
	Candidate Name				tegory/ Γype								
	Office Sought: House Senate President State: District:	ment For: Primary Other (spe	General cify) ▼										
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	MMITTEE (In Full)	arile and address of any pointo	ai com	millee to s	SOIICIL COIT	ıııbuıı	OHS H	JIII SUCII	JOHIII	iiillee		
\	edical Associaton PAC (Ken	tucky Educational Medica	I DAC	. KEME	PΛC)							
/ Rentucky Me	dicai Associatori i Ao (Neri	lucky Educational Medica	ai i AC	, - IXLIVII	AO)							
`	t, First, Middle Initial)				Tran	sacti	on ID:	D1388				
Charlie Bord	ers Campaign Fund				Date		sburse				_	
Mailing Addres	s PO Box Q				0,8	М	<sup>D</sup> 2	9 /	ž	0 Ď 6	Y	
City		State Zip Code			Amo	unt of	Each	Disburse	ement	t this F	eriod	
Russell		KY 41169			_	-			1	000.0	10	
Purpose of Dis	bursement Charlie Borders (KY-18-R)					-				000.0	,0	
Candidate Nam			Ca	ategory/								
	,			Туре								
Office Sought:		rsement For:										
	Senate President	Primary General Other (specify) ▼	l									
State:	District:	Other (specify)										
Full Name (Las	t, First, Middle Initial)				Tran	eacti	on ID:	D1384				
	Campaign Fund						sburse					
Mailing Address	2 740 Harrania d Drive					М	0	<b>9</b> /	Y Y	0 0 6	Υ	
Mailing Addres	s 740 Homewood Drive									000		
City		State Zip Code			Amo	unt of	Each	Disburse	ement	t this F	eriod	
Madisonville	L	KY 42431	_						1	000.0	00	
Purpose of Dis Non-Federal D	bursement Jan McGary (KY-R-6)									000.0	,0	
Candidate Nam			Ca	ategory/								
				Туре								
Office Sought:		rsement For:	ı									
	Senate President	Primary General Other (specify) ▼	ı									
State:	District:	Care (epocary) V										
Full Name (Las	t, First, Middle Initial)				Tran	sacti	on ID:	D1389				
Dan Seum C	ampaign Fund				Date	of Di	sburse	ement				
Mailing Addres	s 1107 Holly Avenue				o <sup>M</sup> S	М	2	9 /	2	0 0 6	Y	
City Fairdale		State Zip Code KY 40118			Amo	unt of	Each	Disburse	ement	t this F	eriod	
Purpose of Dis	bursement	1(1 40110	Τ=		$+$ $\Gamma$				1	000.0	00	
	Paniel Seum (KY-38-R)											
Candidate Nam	ne			tegory/								
Office Sought:	House Disbu	rsement For:		Туре	_							
Office Sought.	Senate	Primary Genera	I									
	President	Other (specify) ▼										
State:	District:											
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	y Information copied from such Reports and Stater														s
or	for commercial purposes, other than using the nam  NAME OF COMMITTEE (In Full)	e and address	s or any political	COIT	ırrı	ittee to	SOIIC	it conti	ribut	ions II	rom s	sucn c	omm	iittee	
$\rangle$	Kentucky Medical Associaton PAC (Kentu	cky Educati	onal Medical	PAC	) -	KEN	1PAC	<b>C</b> )							
_	Full Name (Last, First, Middle Initial)							Trans	acti	on ID	: D1:	393			
Α.	David A. Watkins Campaign Fund								of D	isburs		nt	, , ,		V
	Mailing Address 1413 N Elm St Ste 106							0 9	IVI		2 9		2	οŏε	
	City Henderson	State KY	Zip Code 42420					Amou	ınt o	f Each	n Disl	burse	ment	this F	Period
	Purpose of Disbursement	101	72720	_	_								. :	250.0	00
	Non-Federal David A. Watkins, MD			L			Ш								
	Candidate Name					gory/ pe									
	Senate President	ement For: Primary Other (spec	General <b>▼</b>					(KY-1	1-D	))					
_	State: District: Full Name (Last, First, Middle Initial)							_			- D.4				
В.	David L. Williams Campaign Fund									isburs	emer		, , ,	V	V
	Mailing Address PO Box 666							0 9	IVI		2 9		2	οŏε	
	City Burkesville	State KY	Zip Code 42717-0666					Amou	ınt o	f Each	n Disl	burse			-
	Purpose of Disbursement Non-Federal David L. Williams (KY-16-R)												. 10	000.0	00
	Candidate Name					gory/ pe									
	Senate President	ement For: Primary Other (spec	General <b>▼</b>												
	State: District:														
C.	Full Name (Last, First, Middle Initial) Elizabeth Tori Campaign Fund							<b>Trans</b> Date		on ID					
	Mailing Address 2851 S. Wilson Road							0 9	М	/ D	2 9	/ L	ž	οŏε	S Y
	City Radcliff	State KY	Zip Code 40160					Amou	ınt o	f Each	n Disl	burse	ment	this F	Period
	Purpose of Disbursement Non-Federal Elizabeth Tori (KY-10-R)			Г			1	L.		-			. 10	000.0	00
	Candidate Name					gory/ pe									
	Senate President	ement For: Primary Other (spec	General												
Г	State: District:								_	-				)EO (	\ <u>\</u>
S	UBTOTAL of Disbursements This Page (optional)						<u> </u>	<u> </u>					22	250.0	)U
т	OTAL This Period (last page this line number only					ı	•								

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ľ	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b	22		23	24		25	$oldsymbol{\sqcup}$	26		
^	Information and form the Decision of Control		[	27	28a		28b	28c		29		30b		
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam										5			
_	NAME OF COMMITTEE (In Full)	, , , , , , , , , , , , , , , , , , ,												
$\rangle$	Kentucky Medical Associaton PAC (Kentu	cky Educational Medical	PAC	- KEMI	PAC)									
	Full Name (Last, First, Middle Initial)				Trar	nsact	ion ID:	D1420						
١.	Hubert Collins Campaign Fund				Date		Disburse / D		V • V		V			
	Mailing Address 72 Collins Drive				O <sup>M</sup> S	) M	2	9 /	2	0 Ď 6				
	City	State Zip Code			Amo	ount o	of Each	Disburse	emen	t this F	eriod			
	Wittensville	KY 41274-9021	1		- [					250.0	00	1		
	Purpose of Disbursement Non-Federal Hubert Collins (KY-97-D)					_			_	200.0	,,	-		
	Candidate Name			tegory/ ype										
	Office Sought: House Disburs Senate	ement For: Primary General	•											
	President	Other (specify)												
	State: District:													
,	Full Name (Last, First, Middle Initial)							D1422						
5.	Jeff Greer Campaign Fund						Disburse		•		14			
	Mailing Address 45 Knollwood Rd.				O <sub>M</sub> S	9 <sup>M</sup>	<sup>′</sup> 2	9 /	ž	0 Ď 6	Y			
	City Brandenburg	State Zip Code KY 40108			Amo	ount o	of Each	Disburse	emen	t this F	eriod	_		
	Purpose of Disbursement Non-Federal Jeff Greer (KY-27-D)									250.0	00	_		
	Candidate Name			tegory/ ype										
	Senate President	ement For:  Primary General  Other (specify) ▼	•											
	State: District:													
Э.	Full Name (Last, First, Middle Initial) Jim DeCesare Campaign Fund					of D	Disburse	D1400 ement			_			
	Mailing Address 136 Cedar Trail				O <sup>M</sup> S	Э М	<sup>′</sup> 2	9 /	ž	0 Ď 6	Y			
	City Bowling Green	State Zip Code KY 42101-7422			Amo	ount o	of Each	Disburs	emen	t this F	eriod	_		
	Purpose of Disbursement Non-Federal Jim DeCesare (KY-21-R)			•	7 L					500.0	00			
	Candidate Name			tegory/ ype										
	Office Sought:    House   Disburs	ement For:  Primary General  Other (specify) ▼	•											
	otato. District.											_		
s	UBTOTAL of Disbursements This Page (optional)			▶					.10	000.0	0			
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ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b	2	_	23 28b	24 28c	$\square$	25 29	26 30b
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<u> </u>	e and address of any political co	iriiriittee to	SOIICIL	OHUIDU	lions irc	JIII SUCII	COMMIN	llee	
NAME OF COMMITTEE (In Full)  Kentucky Medical Associaton PAC (Kentucky)	cky Educational Medical PA	AC - KEM	IPAC)						
Full Name (Last, First, Middle Initial)			Tr	ansac	ion ID:	D1394			
Jim Gooch Campaign Fund					Disburse				_
Mailing Address 714 N. Broadway B-4				9 м	<sup>/</sup> 2	9 /	Ž (	o ŏ 6	Y
City	State Zip Code		Aı	mount (	of Each	Disburs	ement	this Pe	eriod
Providence	KY 42450-1164				-			250.00	0
Purpose of Disbursement Non-Federal Jim Gooch, Jr. (KY-12-D)			1			-		_50.00	3
Candidate Name		Category/ Type	1						
Senate	ement For: Primary General								
President State: District:	Other (specify)								
Full Name (Last, First, Middle Initial)			т.		ian ID.	D1117			
3. Jim Stewart Campaign Fund			D		Disburse		V V	V .	Y
Mailing Address HC 76, Box 556				9 "	2	9 /	2 (	) Ď 6	
City Flat Lick	State         Zip Code           KY         40935-9802		Aı	mount (	of Each	Disburs			-
Purpose of Disbursement Non-Federal James Stewart (KY-86-R)			]   [	•			2	250.00	0
Candidate Name		Category/ Type							
Senate President	ement For: Primary General Other (specify)								
State: District:  Full Name (Last, First, Middle Initial)									
Joe Bowen Campaign Fund			1	ate of D	Disburse				
Mailing Address 2031 Fieldcrest Drive				9	<sup>/</sup> 2	9 /	' 2 (	o ŏ 6	Ť
City Owensboro	State Zip Code KY 42301		Aı	mount (	of Each	Disburs	ement	this Pe	eriod
Purpose of Disbursement Non-Federal Joe Bowen (KY-13-R)			∏		-		. 5	500.00	0
Candidate Name		Category/ Type							
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)								
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JI 1	NAME OF COMMITTEE (In Full)	e and address d	n arry political c	OITIII	iillee lo s	SUIICII	COITLIIL	Julion	5 1101	II SUCII (	JOHIII	iiiiee		
$\rangle$	Kentucky Medical Associaton PAC (Kentuc	sky Education	nal Medical P	۸۲	- KEME	<b>2Λ</b> ()								
/	Remucky Wedical Association FAC (Remuc	ky Luucalioi	iai ivieuicai r	AC	- KLIVII	AC)	1							
	Full Name (Last, First, Middle Initial)					-	Transa	ction	ID:	D1411				
١.	Joseph M. Fischer Campaign Fund						Date of						V	
	Mailing Address 126 Dixie Place						0 9		2	9 /	ž	0 Ď 6	Y	
			ip Code				Amoun	t of E	ach [	Disburse	emen	t this P	erioc	ı
		KY 4	1075-1377			4		-				500.0	nn	٦
	Purpose of Disbursement Non-Federal Joseph M. Fischer (KY-68-R)						-	-				500.0	,0	_
	Candidate Name			Cat	egory/									
				T	уре									
		ement For:	Camanal											
	Senate President	Primary Other (specify	General											
	State: District:	] (- ,	, <b>v</b>											
_	Full Name (Last, First, Middle Initial)					١.	Transa	ction	ID:	D1382				
3.	Kentucky Legislative Trust						Date of	Disb						
	Mailing Address PO Box 1068						0 9	7 [	<sup>D</sup> 2	2 /	ž	0 ŏ 6	Y	
	,		ip Code ·0602				Amoun	t of E	ach [	Disburse	emen	t this P	erioc	<u> </u>
	Purpose of Disbursement	1(1)	0002			+					2	2000.0	00	
	Contr. Kentucky Legislative Trust (KY-R)			L.										
	Candidate Name		'		egory/									
	Office Sought: House Disburse	ement For:		- 1	ype									
	Senate Sought.	Primary	General											
	President	Other (specify	') <b>V</b>											
	State: District:													
<b>)</b> .	Full Name (Last, First, Middle Initial) Kevin Locke Campaign Fund									D1423				
							Date of		D	D / `	ΥΥ	Y	Υ	
	Mailing Address 3335 Shannon Run Rd.						0 9		2	9	2	0 Ď 6		
	,		ip Code				Amoun	t of E	ach [	Disburse	emen	t this P	erioc	ı
	Versailles Purpose of Disbursement	KY 4	0383			+		•				500.0	00	
	Non-Federal Kevin Locke (KY-56-R)									-	_	-	-	_
	Candidate Name				egory/ ype									
	Office Sought: House Disburse	ment For:	_											
	Senate	Primary	General											
	President State: District:	Other (specify	") <b>▼</b>											
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	or commercial purposes, other than using the name	e and addres	s or any political	COITII	millee to	SOIICIL	CONTIN	Julion	5 110	m such	COITII	iiillee		
\	NAME OF COMMITTEE (In Full)	.l	:! <b>N</b>	D 4 0	125845	340								
/	Kentucky Medical Associaton PAC (Kentuc	cky Educati	ionai Medicai	PAC	- KEIVII	AC)								
	Full Name (Last, First, Middle Initial)					-	Γransa	ction	ID:	D1392				
١.	Marvin Wilson Campaign Fund						Date of							
	Mailing Address PO Box 460						0 9	] ′ [	<sup>D</sup> 2	9 /	ž	0 Ď 6	Y	
		State	Zip Code				Amour	t of E	ach I	Disburse	emen	t this F	erio	k
	Eddyville	KY	42038								1	0.000	າດ	٦
	Purpose of Disbursement Non-Federal Marvin Wilson (KY-6-R)						-	-	_	-		000.0	,,,	_
	Candidate Name			Cat	egory/									
				Т	уре									
		ment For:	C											
	Senate   President	Primary Other (spec	General											
	State: District:	] ( <b>-</b>	···//											
	Full Name (Last, First, Middle Initial)					١.	Transa	ction	ID:	D1391				
3.	Melvin B. Henley Campaign Fund						Date of							
	Mailing Address 1305 S. 16th Street					+	0 9	/	<sup>D</sup> 2	9 /	ž	0 ŏ 6	Y	
											_			
	,	State KY	Zip Code 42071				Amour	t of E	ach I	Disburse	emen	t this F	erio	t
	Murray Purpose of Disbursement	K1	42071	_		-						250.0	00	٦
	Non-Federal Melvin B. Henley (KY-5-R)										-	-		_
	Candidate Name				egory/									
	000			Т	уре									
	Office Sought: House Disburse Senate	ment For: Primary	General											
	President	Other (spec												
	State: District:		• •											
	Full Name (Last, First, Middle Initial)									D1404				
<i>,</i> .	Mike Czerwonka Campaign Fund						Date of			ment	, , , ,	* ` ` `		
	Mailing Address 2006 Camargo Road						0 9	<u> </u>	<sup>D</sup> 2	9 ′	ž	0 Ď 6	Y	
	City	State	Zip Code			+	Amour	t of F	ach l	Disburse	men	t this F	erio	
	Louisville	KY	40207							5.501.50			-	
	Purpose of Disbursement Non-Federal Mike Czerwonka (KY-43-R)											500.0	00	_
	Candidate Name			Cat	egory/									
					ype									
	Office Sought: House Disburse	ment For:												
	Senate	Primary	General											
	President State: District:	Other (spec	опу) 🔻											
	Ciaco. Diotriot.								_		_		_	_
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SCILDOLL B (I LCI OIII 3X)	Use seperate schedule(s)	(check on	= NUMBER: PAGE 28 / 33				
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 28a	23 24 28b 28c	25 X 29	26 30b	
Any Information copied from such Reports and Staten						S	
or for commercial purposes, other than using the nam	e and address of any political co	mmittee to so	olicit contributi	ons from such	committee		
NAME OF COMMITTEE (In Full)  Kentucky Medical Associaton PAC (Kentucky)	cky Educational Medical PA	AC - KEMP	AC)				
Full Name (Last, First, Middle Initial)			Transacti	on I <b>D</b> : D1407			
A. Mike Harmon Campaign Fund				sbursement		V	
Mailing Address PO Box 458			09	29	žoŏ6		
City	State Zip Code		Amount of	Each Disburs	ement this F	Period	
Junction City	KY 40440				1000.0	00	
Purpose of Disbursement Non-Federal Michael Harmon (KY-54-R)							
Candidate Name	-	Category/ Type					
Senate President	ement For: Primary General Other (specify)						
State: District:							
Full Name (Last, First, Middle Initial)  Milward Dedman Campaign Fund				on ID: D1408 sbursement			
			мм		Y Y Y Y	Υ	
Mailing Address 1561 Lexington Rd			0 9	29 /	Ž 0 Ŏ 6		
City Harrodsburg	State Zip Code KY 40330		Amount of	Each Disburs	ement this F	Period	
Purpose of Disbursement Non-Federal Milward Dedman (KY-55-R)			L		250.0	00	
Candidate Name		Category/ Type					
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)						
Full Name (Last, First, Middle Initial)			Transacti	on ID: D1421			
Myron Dossett Campaign Fund				sbursement			
Mailing Address 7155 Salubria Springs R	d.		09	<sup>D</sup> 29 <sup>D</sup>	<sup>°</sup> 2006	Y	
City Pembroke	State Zip Code KY 42266		Amount of	Each Disburs	ement this F	Period	
Purpose of Disbursement	Г	* *	L		500.0	00	
Non-Federal Myron B. Dossett (KY-9-R)  Candidate Name		Category/ Type					
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)						
SUBTOTAL of Disbursements This Page (optional)					1750.0	00	
TOTAL This Period (last page this line number only)							
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SCHEDULE B (I LCI OIIII 3X)	Use seperate schedule(s)	(check only	NUMBER:	PAGE 29/33
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 2 28a 28b	24 25 26 28c X 29 30b
Any Information copied from such Reports and Statem				
or for commercial purposes, other than using the name	e and address of any political co	ommittee to so	iicit contributions from	such committee
NAME OF COMMITTEE (In Full)  Kentucky Medical Associaton PAC (Kentuc	ky Educational Medical PA	AC - KEMPA	AC)	
Full Name (Last, First, Middle Initial)			Transaction ID: D	1414
A. Ralph A. Alvarado Campaign Fund			Date of Disbursem	
Mailing Address 120 Casa Landa Way			$\begin{bmatrix} 0 & 9 & M \\ 0 & 9 & M \end{bmatrix}$	<sup>'</sup> 2006
	State Zip Code		Amount of Each Di	sbursement this Period
	KY 40391-8768			1000.00
Purpose of Disbursement Non-Federal Ralph A. Alvarado (KY-73-R)		,		1000.00
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)			
State: District:				
Full Name (Last, First, Middle Initial)  Richard Henderson Campaign Fund			Transaction ID: D	=
nichard Henderson Campaign Fund			Date of Disburseme	
Mailing Address 60 Myers Cemetary Rd.			09 / 29	2006
,	State Zip Code KY 40337		Amount of Each Di	sbursement this Period
Purpose of Disbursement Non-Federal Richard D. Henderson				250.00
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼		(KY-74-D)	
Full Name (Last, First, Middle Initial)			Transaction ID: D	1/103
Robert Damron Campaign Fund			Date of Disbursem	
Mailing Address 231 Fairway West			$\begin{bmatrix} 0 & 9 & 0 & 0 \\ 0 & 9 & 0 & 0 \end{bmatrix}$	<sup>'</sup> 2006
,	State Zip Code KY 40536		Amount of Each Di	sbursement this Period
Purpose of Disbursement Non-Federal Robert R. Damron (KY-39-D)				1000.00
Candidate Name		Category/ Type		
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼			
SUBTOTAL of Disbursements This Page (optional) .				2250.00
TOTAL This Period (last page this line number only)				

SCHEDOLL B (I LOT OHII 3A)	Use seperate schedule(s)	(check only	NUMBER:	PAGE 30/33
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 2 28a 28b	24 25 26 28c X 29 30b
Any Information copied from such Reports and Stater				
or for commercial purposes, other than using the name	e and address of any political co	mmittee to so	licit contributions from	such committee
NAME OF COMMITTEE (In Full)  Kentucky Medical Associaton PAC (Kentu	cky Educational Medical PA	AC - KEMPA	AC)	
Full Name (Last, First, Middle Initial)			Transaction ID: D	1383
Robert J. Leeper Campaign Fund-			Date of Disbursem	
Mailing Address 229 South Friendship Ro	pad		09 / 29	y žoó6°
City	State Zip Code		Amount of Each Di	sbursement this Period
Paducah	KY 42003			1000.00
Purpose of Disbursement Non-Federal Robert J. Leeper (KY-2-I)	IΓ			1000.00
Candidate Name		Category/ Type		
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)			
Full Name (Last, First, Middle Initial)			Transaction ID: D	1406
3. Russ Mobley Campaign Fund			Date of Disbursem	ent
Mailing Address 900 Holly Street			$\begin{bmatrix} 0 & 9 & M \end{bmatrix} / \begin{bmatrix} 0 & 2 & 9 \end{bmatrix}$	2006
City Campbellsville	State Zip Code KY 42718		Amount of Each Disbu	sbursement this Period
Purpose of Disbursement Non-Federal Russ Mobley (KY-51-R)				250.00
Candidate Name		Category/ Type		
Office Sought: House Disburs Senate President State: District:	ement For:  Primary General  Other (specify) ▼			
Full Name (Last, First, Middle Initial)			Transaction ID: D	1404
Sal Santoro Campaign Fund			Date of Disbursem	ent
Mailing Address 596 Waterlot Ct			$\begin{bmatrix} 0 & 9 & M \end{bmatrix} / \begin{bmatrix} 0 & 2 & 9 \end{bmatrix}$	<sup>7</sup> 2006
City Florence	State Zip Code KY 41041		Amount of Each Di	sbursement this Period
Purpose of Disbursement Non-Federal Sal Santoro (KY-60-R)				500.00
Candidate Name		Category/ Type		
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)			
SUBTOTAL of Disbursements This Page (optional)				1750.00
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ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 28a	23 24 28b 28	$\square$	26 30b		
Any Information copied from such Reports and Stater						S		
or for commercial purposes, other than using the name	e and address of any political co	mmittee to s	solicit contribi	utions from such	1 committee			
NAME OF COMMITTEE (In Full)  Kentucky Medical Associaton PAC (Kentu	cky Educational Medical PA	AC - KEMF	PAC)					
Full Name (Last, First, Middle Initial)			Transac	tion ID: D139	 B			
Sheldon Baugh Campaign Fund				Disbursement				
Mailing Address 252 West Valley Driv			0 9	<sup>7</sup> 29 <sup>7</sup>	žoŏ6	<b>5</b>		
City	State Zip Code		Amount	of Each Disbur	sement this F	Period		
Russellville	KY 42276				500.0	20		
Purpose of Disbursement Non-Federal Sheldon E. Baugh (KY-16-R)	1				000.0	30		
Candidate Name	-	Category/ Type						
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)							
Full Name (Last, First, Middle Initial)			Tropos	tion ID: D140				
3. Steve R. Nunn Campaign Fund			Date of	ction ID: D140		V		
Mailing Address 136 Fairway Place			09	<sup>7</sup> 29 9	<sup>°</sup> 2006	5 <sup>*</sup>		
City Glasgow	State Zip Code KY 42141		Amount	of Each Disbur		-		
Purpose of Disbursement Non-Federal Stephen R. Nunn (KY-23-R)					500.0	00		
Candidate Name		Category/ Type						
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)							
Full Name (Last, First, Middle Initial)  Steven J. Rudy Campaign Fund				ction ID: D1390	)			
			M M	/ D D / 29	<sup>2</sup> 0 0 6	Y		
Mailing Address 221 Mount Pleasant Rd			0 9					
City LaCenter	State Zip Code KY 42056		Amount	of Each Disbur		-		
Purpose of Disbursement Non-Federal Steven J. Rudy (KY-1-R)			L.		500.0	00		
Candidate Name		Category/ Type						
Office Sought: House Senate President State: District:	ement For: Primary General Other (specify)							
SUBTOTAL of Disbursements This Page (optional)					1500.0	00		
TOTAL This Period (last page this line number only								

SCILDOLL B (I LCI OIIII 3X)	Use seperate schedule(s)	(check on	: NUMBER:	:R: PAGE 32/33				
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 28a	23 24 28b 28c	25 X 29	26 30b		
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name						S		
	and address of any political co	ininillee to so	DIICIL CONTINDULI	OHS HOIH SUCH	Committee			
NAME OF COMMITTEE (In Full)  Kentucky Medical Associaton PAC (Kentuc	ky Educational Medical PA	AC - KEMP	AC)					
Full Name (Last, First, Middle Initial)			Transacti	on ID: D1415				
Susan Westrom Campaign Fund				sbursement	V V V	V		
Mailing Address 2965B Candlelight Way			0 9	29	Ž 0 0 6			
	State Zip Code		Amount of	Each Disburs	ement this P	Period		
Lexington Purpose of Disbursement	KY 40502-2825				500.0	00		
Non-Federal Susan Westrom (KY-79-D)					300.0	,		
Candidate Name		Category/ Type						
Senate President	ment For: Primary General Other (specify)							
State: District:  Full Name (Last, First, Middle Initial)								
3. Terry Shelton Campaign Fund			Date of Di	on ID: D1399 sbursement				
Mailing Address 7725 N. Jackson Hwy			09	29 /	Ž 0 0 6	Y		
,	State Zip Code KY 42754		Amount of	Each Disburs		-		
Purpose of Disbursement Non-Federal Terry Shelton (KY-19-R)					250.0	00		
Candidate Name		Category/ Type						
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼							
Full Name (Last, First, Middle Initial)				ID D4400				
Tim Moore Campaign Fund				on ID: D1402 sbursement		V		
Mailing Address 417 Bates Rd			0.8	29	Ý Ž0Ŏ6			
,	State Zip Code KY 42701		Amount of	Each Disburs	ement this P	Period		
Purpose of Disbursement Non-Federal Tim Moore (KY-26-R)					500.0	00		
Candidate Name		Category/ Type						
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)							
SUBTOTAL of Disbursements This Page (optional) .					1250.0	00		
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	y Information copied from such Reports and for commercial purposes, other than using the			
$\overline{\ }$	NAME OF COMMITTEE (In Full)			
	Kentucky Medical Associaton PAC (K	Kentucky Educational Medical PA	AC - KEMPA	4C)
	Full Name (Last, First, Middle Initial)			Transaction ID: D1396
۹.	Tommy Thompson Campaign Fund			Date of Disbursement
	Mailing Address 4460 Highway 142			09
	City	State Zip Code		Amount of Each Disbursement this Period
	Owensboro	KY 42303		050.00
	Purpose of Disbursement Non-Federal Tommy N. Thompson (KY-14-	-D)		250.00
	Candidate Name		Category/	
			Туре	
		sbursement For:		
	Senate President	Primary General  Other (specify) ▼		
	State: District:	Ciriei (Specily)		

SUBTOTAL of Disbursements This Page (optional)	<b>•</b>	250.00
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