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FEC FORM 1

Only

STATEMENT OF **ORGANIZATION**

RECEIVED

2013 DEC 23 PM 4: 29

(Revised 06/2012)

A 1 Office Ded Opin Example: If typing, type NAME OF (Check if name 12FË4M5 COMMITTEE (in full) is changed) over the lines. |Kentucky Distillers| Association Bourbon Political Action Committee | Shelby Street ADDRESS (number and street) (Check if address is changed) STATE A ZIP CODE ▲ COMMITTEE'S E-MAIL ADDRESS BourbonPAC@kybourbon.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) 2013 11 DATE C FEC IDENTIFICATION NUMBER ▶ **OR** IS THIS STATEMENT AMENDED (A) NEW (N) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Brittany Allison Type or Print Name of Treasurer allison 10 2013 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: **FEC FORM 1** Federal Election Commission Use

Toll Free 800-424-9530

Local 202-694-1100

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5.			OMMITTEE		
Cendidate 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 Candi				
	Candi Party	date Affiliatio	Office State Sought: House Senate President District		
	(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.		
	Name Candi				
	Part	y Con	nmittee:		
	(d)		This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.		
	Polit	ical A	ction Committee (PAC):		
	(e)	X	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/Registraot PAC.		
	(f)		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.)		
Joint Fundraising 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 fedoral eandidate.		
	(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.		
		Com	mittees Participating in Joint Fundraiser		
		1.			
		2.			
		3.	FEC ID number		
		4.			

Write or Type Committee Name Kentucky Distillers' Association Bourbon PAC 6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Kentucky Distillers' Association Mailing Address 614 \$helby Street KY 40691	FEC Form 1 (Re	vised 02/2009)	Page 3
6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Kentucky Distillers' Association Mailing Address 614 \$helby Street CITY STATE ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor 7. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records. Full Name Treasurer Mailing Address Title or Position CITY STATE ZIP CODE 8. Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer). Full Name (Rentucky Distillers' Association (Allison) (Rentucky Distillers' Association)	Write or Type Committee	Name	
Mailing Address 614 Shelby Street	Kentucky Dis	tillers' Association Bourbon PAC	
Mailing Address [6]44 Shellby Stripeet	6. Name of Any Conne	ected Organization, Affiliated Committee, Joint Fundraising Representati	ve, or Leadership PAC Sponsor
Errankflort	Kentucky Dist	Lillers' Association	
Fireinkflort			
Relationship: Connected Organization	Mailing Address	614 Shelby Street	
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor. 7. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records. Full Name			
Relationship: X Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor. 7. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records. Full Name Treasurer Mailing Address Title or Position CITY STATE ZIP CODE Telephone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer). Full Name of Treasurer Mailing Address Kentucky Distillers Association [614 Shelby Street]		Frankflort	40691 -
7. Custodian of Records: Identify by name, address (phone number optional) and position of the person in possession of committee books and records. Full Name Treasurer Mailing Address Title or Position CITY STATE ZIP CODE Telephone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer). Full Name of Treasurer Brittany Allison Mailing Address Kentucky Distillers 'Association [614 Shelby Street]		CITY STATE	ZIP CODE
Full Name Treasurer Mailing Address Title or Position CITY STATE ZIP CODE Telephone number Telephone number Treasurer: List the name and address (phone number - optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer). Full Name of Treasurer Mailing Address Kentucky Distillers' Association [614 Shelby Street]	Relationship: X Cor	nnected Organization Affiliated Committee Joint Fundraising Represe	entative Leadership PAC Sponsor
Mailing Address Title or Position CITY STATE ZIP CODE Telephone number Telephone number of the committee; and the name and address of any designated agent (e.g., assistant treasurer). Full Name of Treasurer Mailing Address Kentucky Distillers' Association Kentucky Distillers' Association [614 Shelby Street]		s: Identify by name, address (phone number optional) and position of the	e person in possession of committee
Title or Position CITY STATE ZIP CODE 8. Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer). Full Name of Treasurer Mailing Address Kentucky Distillers' Association [614 Shelby Street]	Full Name T^1	reasurer	
8. Treasurer: List the name and address (phone number optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer). Full Name of Treasurer Mailing Address Kentucky Distillers' Association [614 Shelby Street]	Mailing Address		
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any designated agent (e.g., assistant treasurer). Full Name of Treasurer Brittany Allison of Treasurer Kentucky Distillers' Association Kentucky Distillers Association Company Compa		Telephone number	
any designated agent (e.g., assistant treasurer). Full Name of Treasurer Mailing Address [Kentucky Distillers' Association [6,14 Shelby Street]			
of Treasurer Brittany Allison	8. Treasurer: List the na any designated agent	ame and address (phone number optional) of the treasurer of the committ (e.g., assistant treasurer).	ee; and the name and address of
Mailing Address [614 Shelby Street	IRY	ittany Allison	
614 Shelby Street	Mailing Address	Kentucky Distillers' Association	1_
Frankfort L LV L MO601 L L	-	614 Shelby Street	
		Frankfort	[40601]-]
CITY STATE ZIP CODE Title or Position	Title or Position	CITY STATE	ZIP CODE
Telephone number [502] - [817] - [1622]		Telephone number	502 817 1622

Name of Bank, Depository, etc.

15051144155

Mailing Address

CITY

STATE

ZIP CODE

BRITTANY ALLISON (502) 875-9351 THE UPS STORE #1414 1303 US HWY 127 S STE 402 FRANKFORT KY 40001-4385

1 LBS 1 OF 1 SHP WT: 1 LBS DATE: 19 DEC 2013

SHIP FEDERAL ELECTION COMMITTEE TO: 999 E ST NW

WASHINGTON DC 20463-0001



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UPS GROUND

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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 Priority Mail Express** Postmark Illegible No Postmark Shipping Date Overnight Delivery Service (Specify): ムグン 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): 13/24/15

DATE PREPARED

(8/2013)

PREPARER