

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

ADDRESS (number and street) PO BOX 24843  
 Check if different than previously reported. (ACC)  
LOUISVILLE KY 40224

2. **FEC IDENTIFICATION NUMBER** C00015594  
3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 04 01 2010 through 06 30 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. Corey Allen Koellner

Signature of Treasurer Electronically Filed by Mr. Corey Allen Koellner Date 07 15 2010

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 Use Only								
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**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		-19650.25
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	-18505.68									
(c) Total Receipts (from Line 19) .....	7276.92	46592.17								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	-11228.76	26941.92								
7. Total Disbursements (from Line 31) .....	6468.09	44638.77								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	-17696.85	-17696.85								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	24090.77									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	577.92	17858.17
(ii) Unitemized .....	1170.00	16925.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	1747.92	34783.17
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	800.00	7080.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	2547.92	41863.17
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	4729.00	4729.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	7276.92	46592.17
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	7276.92	46592.17

## DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	37473.43
(b) Other Federal Operating Expenditures.....	6468.09	7165.34
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	6468.09	44638.77
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	6468.09	44638.77
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6468.09	7165.34

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 17

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	2547.92	41863.17
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2547.92	41863.17
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	6468.09	7165.34
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	6468.09	7165.34

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 17  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Mrs. DeAnna Brangers

Mailing Address 11716 Saratoga Woods Ct.

City State Zip Code  
Louisville KY 40299

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

Name of Employer Self Occupation Housewife

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 387.92

Date of Receipt MM / DD / YYYY  
05 / 18 / 2010

**Transaction ID:** SA11AI.10528

Amount of Each Receipt this Period 107.92

In-kind - Food & decorations for Primary Election Night Viewing Party

**B.** Full Name (Last, First, Middle Initial)  
David Grider

Mailing Address 6219 Moorhaven Dr.

City State Zip Code  
Louisville KY 40228

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

Name of Employer Jefferson County Public School Occupation Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt MM / DD / YYYY  
04 / 12 / 2010

**Transaction ID:** SA11AI.10436

Amount of Each Receipt this Period 20.00

**C.** Full Name (Last, First, Middle Initial)  
David Grider

Mailing Address 6219 Moorhaven Dr.

City State Zip Code  
Louisville KY 40228

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

Name of Employer Jefferson County Public School Occupation Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt MM / DD / YYYY  
05 / 11 / 2010

**Transaction ID:** SA11AI.10469

Amount of Each Receipt this Period 20.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 147.92

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 7 / 17</span>
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) David Grider		Date of Receipt																					
	Mailing Address 6219 Moorhaven Dr.		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	0		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	6		1	0		2	0	1	0														
	City State Zip Code Louisville KY 40228		<b>Transaction ID:</b> SA11AI.10501																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 20.00																						
Name of Employer Jefferson County Public School		Occupation Teacher																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 440.00																						

<b>B.</b>	Full Name (Last, First, Middle Initial) Julie Hinson		Date of Receipt																					
	Mailing Address 7248 Fox Harbor Rd.		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	4		1	2		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	4		1	2		2	0	1	0														
	City State Zip Code Prospect KY 40059		<b>Transaction ID:</b> SA11AI.10437																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00																						
Name of Employer Advance Lifeline Services		Occupation President																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00																						

<b>C.</b>	Full Name (Last, First, Middle Initial) Julie Hinson		Date of Receipt																					
	Mailing Address 7248 Fox Harbor Rd.		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	1		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	5		1	1		2	0	1	0														
	City State Zip Code Prospect KY 40059		<b>Transaction ID:</b> SA11AI.10470																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00																						
Name of Employer Advance Lifeline Services		Occupation President																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 750.00																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>220.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 17
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Julie Hinson		Date of Receipt	
	Mailing Address 7248 Fox Harbor Rd.		M M / D D / Y Y Y Y 06 / 10 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.10502
	Prospect	KY	40059	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		100.00
Name of Employer Advance Lifeline Services		Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		850.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Linda Huber		Date of Receipt	
	Mailing Address 3602 Sudbury Lane		M M / D D / Y Y Y Y 04 / 09 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.10432
	Louisville	KY	40220	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		10.00
Name of Employer Jefferson County Public School		Occupation Business Liason		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		230.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Linda Huber		Date of Receipt	
	Mailing Address 3602 Sudbury Lane		M M / D D / Y Y Y Y 05 / 11 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.10471
	Louisville	KY	40220	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		10.00
Name of Employer Jefferson County Public School		Occupation Business Liason		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		240.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	120.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 17
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Linda Huber		Date of Receipt	
	Mailing Address 3602 Sudbury Lane		M M / D D / Y Y Y Y Y 06 / 09 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.10498
	Louisville	KY	40220	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		C	10.00	
Name of Employer Jefferson County Public School		Occupation Business Liason		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		250.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Corey Allen Koellner		Date of Receipt	
	Mailing Address 5900 Ashby Lane		M M / D D / Y Y Y Y Y 04 / 20 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.10457
	Louisville	KY	40272	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		C	10.00	
Name of Employer Not employed		Occupation Auditor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		360.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Corey Allen Koellner		Date of Receipt	
	Mailing Address 5900 Ashby Lane		M M / D D / Y Y Y Y Y 05 / 20 / 2010	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.10481
	Louisville	KY	40272	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		C	10.00	
Name of Employer Not employed		Occupation Auditor		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		370.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	30.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 17
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

**A.**

Full Name (Last, First, Middle Initial) Mr. Corey Allen Koellner		Date of Receipt
Mailing Address 5900 Ashby Lane		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 21 / 2010
City	State	Zip Code
Louisville	KY	40272
FEC ID number of contributing federal political committee.		<b>Transaction ID:</b> SA11AI.10517
C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/> 10.00
Name of Employer Not employed	Occupation Auditor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text"/> 380.00	

**B.**

Full Name (Last, First, Middle Initial) Frank Simon		Date of Receipt
Mailing Address PO Box 6418		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 14 / 2010
City	State	Zip Code
Louisville	KY	40206
FEC ID number of contributing federal political committee.		<b>Transaction ID:</b> SA11AI.10504
C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/> 50.00
Name of Employer Dr. Frank Simon	Occupation Allergist	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text"/> 580.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 60.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/> 577.92

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 11 / 17	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) RAND PAUL FOR US SENATE		Date of Receipt																					
	Mailing Address 1332 ANDREA ST		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	3		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	6		2	3		2	0	1	0														
	City State Zip Code BOWLING GREEN KY 42104		<b>Transaction ID:</b> SA11C.10523																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 800.00																						
Name of Employer Occupation		Lincoln Day Dinner - table payment																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 800.00																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	800.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	800.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 17  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16

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NAME OF COMMITTEE (In Full)  
LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
Commonwealth of Ky. Treasurer's Office

Mailing Address Department of the Treasury

City State Zip Code  
Frankfort KY 40601

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4729.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 9 / 2 0 1 0

Transaction ID: SA17.10564

Amount of Each Receipt this Period  
4729.00

Income Tax Check-off receipts

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4729.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	4729.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

A.	Full Name (Last, First, Middle Initial) 4710 Champions Trace, LLC	Transaction ID: SB21B.10554 Date of Disbursement
	Mailing Address 4901 Fern Valley Road	<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City Louisville State KY Zip Code 40219	Amount of Each Disbursement this Period
	Purpose of Disbursement July Rent	<input type="text" value="1800.00"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) AT&T	Transaction ID: SB21B.10551 Date of Disbursement
	Mailing Address P.O. Box 70807	<input type="text" value="06"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City Charlotte State NC Zip Code 28272-0807	Amount of Each Disbursement this Period
	Purpose of Disbursement Temporary wireless card (internet access)	<input type="text" value="110.35"/>
	Candidate Name	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Bankcard MTOT	Transaction ID: SB21B.10562 Date of Disbursement
	Mailing Address	<input type="text" value="06"/> / <input type="text" value="03"/> / <input type="text" value="2010"/>
	City State Zip Code	Amount of Each Disbursement this Period
	Purpose of Disbursement credit card processing fees	<input type="text" value="135.60"/>
	Candidate Name	<input type="text" value="003"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2045.95"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 14 / 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

A.	Full Name (Last, First, Middle Initial) FBM, Inc.	Transaction ID: SB21B.10531 Date of Disbursement 04 / 14 / 2010
	Mailing Address 410 W. Chestnut Street	Amount of Each Disbursement this Period 1016.46
	City Louisville State KY Zip Code 40241	
	Purpose of Disbursement Rent Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FBM, Inc.	Transaction ID: SB21B.10537 Date of Disbursement 04 / 29 / 2010
	Mailing Address 410 W. Chestnut Street	Amount of Each Disbursement this Period 1016.46
	City Louisville State KY Zip Code 40241	
	Purpose of Disbursement Rent Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Insight Communications	Transaction ID: SB21B.10539 Date of Disbursement 05 / 20 / 2010
	Mailing Address 4701 Commerce Crossings Dr.	Amount of Each Disbursement this Period 133.79
	City Louisville State KY Zip Code 40229	
	Purpose of Disbursement Phone / Internet charges Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2166.71
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 15 / 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) Insight Communications  Mailing Address 4701 Commerce Crossings Dr.  City Louisville State KY Zip Code 40229  Purpose of Disbursement June 2010 broadband/phone Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.10549 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 1 0	Amount of Each Disbursement this Period  133.79
<b>B.</b>	Full Name (Last, First, Middle Initial) Kentucky State Fair Board  Mailing Address P.O. Box 37130  City Louisville State KY Zip Code 40233  Purpose of Disbursement 2010 State Fair booth rental (deposit) Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.10542 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 4 / 2 0 1 0	Amount of Each Disbursement this Period  450.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Shellie May  Mailing Address 609 Bedfordshire Road  City Louisville State KY Zip Code 40222  Purpose of Disbursement Reimbursement: Constant Contact Charges Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.10536 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 4 / 2 9 / 2 0 1 0	Amount of Each Disbursement this Period  100.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....		<b>683.79</b>	
<b>TOTAL</b> This Period (last page this line number only) .....			

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 16 / 17

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

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NAME OF COMMITTEE (In Full)

LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Take A Dumper

Mailing Address 1850 Taylor Avenue

City State Zip Code  
Louisville KY 40213

Purpose of Disbursement  
Dumpster rental for HQ clean-out

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.10545

Date of Disbursement

05 / 27 / 2010

Amount of Each Disbursement this Period

225.00

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

225.00

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

5121.45

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9  
 10

NAME OF COMMITTEE (In Full)  
LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

Nature of Debt (Purpose):  
Deposits should be made to non-fed acct

Mailing Address PO BOX 24843

City State ZIP Code  
LOUISVILLE KY 40224

Outstanding Balance Beginning This Period

23981.36

Transaction ID: SD10.9376

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

23981.36

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
LOUISVILLE & JEFFERSON COUNTY REPUBLICAN EXECUTIVE COMMITTEE

Nature of Debt (Purpose):  
Deposit tranfer to non-federal account

Mailing Address PO BOX 24843

City State ZIP Code  
LOUISVILLE KY 40224

Outstanding Balance Beginning This Period

109.41

Transaction ID: SD10.9399

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

109.41

1) **SUBTOTALS** This Period This Page (optional)..... ▶

24090.77

2) **TOTALS** This Period (last page this line number only)..... ▶

24090.77

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

24090.77