

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.   
**Bluegrass Committee**

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
 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 Year-End 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  /  /  through  /  /

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 Larry Steinberg

Signature of Treasurer Larry Steinberg [Electronically Filed] 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.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**Bluegrass Committee**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		<input type="text" value="199820.11"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="199820.11"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="168474.39"/>	<input type="text" value="168474.39"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="368294.50"/>	<input type="text" value="368294.50"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="126862.67"/>	<input type="text" value="126862.67"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="241431.83"/>	<input type="text" value="241431.83"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
**Bluegrass Committee**

Report Covering the Period: From:  /  /  To:  /  /

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).....	11800.00	11800.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	11800.00	11800.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	151600.00	151600.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	163400.00	163400.00
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.....	5000.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	74.39	74.39
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 Transfers (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))..... ▶	168474.39	168474.39
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	168474.39	168474.39

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	72177.67	72177.67
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	72177.67	72177.67
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	50000.00	50000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (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 .....	4685.00	4685.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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)) ..	126862.67	126862.67
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	126862.67	126862.67

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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) .....	163400.00	163400.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	163400.00	163400.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	72177.67	72177.67
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	72177.67	72177.67

**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 6 OF 39
	<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"/> 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)  
**Bluegrass Committee**

**A. Robert Bradway**  
Full Name (Last, First, Middle Initial)

Mailing Address 1151 Hidden Valley Rd.

City Thousand Oaks State CA Zip Code 91361-5046

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

Name of Employer AMGEN Occupation Coo

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 06 / 2014

**Transaction ID : A2DC26A5B9FB34773AD9**

Amount of Each Receipt this Period  
 2500.00

**B. Kenneth Kies**  
Full Name (Last, First, Middle Initial)

Mailing Address 6109 Franklin Park Rd.

City Mc Lean State VA Zip Code 22101-4214

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

Name of Employer Federal Policy Group Occupation Managing Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 06 / 2014

**Transaction ID : AB07FEB61A47D4CC48BE**

Amount of Each Receipt this Period  
 1000.00

**C. Jack Medford**  
Full Name (Last, First, Middle Initial)

Mailing Address 7505 New Lagrange Road

City Louisville State KY Zip Code 40222-4910

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

Name of Employer Medford Property Co. Occupation Real Estate

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 12 / 2014

**Transaction ID : A1B3BCE7DC42F465EA4B**

Amount of Each Receipt this Period  
 2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6000.00
<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 7 OF 39
	<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"/> 17	

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NAME OF COMMITTEE (In Full)  
**Bluegrass Committee**

Full Name (Last, First, Middle Initial)  
**A. Peter Worth**

Mailing Address 99 Park Ave.  
25th Floor

City New York State NY Zip Code 10016-1601

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

Name of Employer American Benefits Consulting Occupation Chairman & CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  
03 / 12 / 2014  
**Transaction ID : ABC94B8060B314DFEBA6**

Amount of Each Receipt this Period  
800.00

Full Name (Last, First, Middle Initial)  
**B. Louis Bacon**

Mailing Address 1251 Avenue of the Americas

City New York State NY Zip Code 10020-1104

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

Name of Employer Moore Capital Management Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
03 / 26 / 2014  
**Transaction ID : A5369805E19C1400E8B2**

Amount of Each Receipt this Period  
5000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5800.00
<b>TOTAL</b> This Period (last page this line number only).....▶	11800.00

**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 OF 39
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Bluegrass Committee**

**A.** Full Name (Last, First, Middle Initial)  
THE HARTFORD FINANCIAL SERVICES GROUP, INC. PAC (AKA THE HARTFORD ADVOCATES FUND)

Mailing Address ONE HARTFORD PLAZA  
HO-1-11

City HARTFORD State CT Zip Code 06155

FEC ID number of contributing federal political committee. **C** C00168864

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 29 / 2014  
**Transaction ID : A8ECE00E96F57463F8B2**

Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
PAC of the Amer Assoc of Orthopaedic Surgeons

Mailing Address 317 Massachusetts Avenue, NE

City Washington State DC Zip Code 20002

FEC ID number of contributing federal political committee. **C** C00343137

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 06 / 2014  
**Transaction ID : A2588A85F410C4713940**

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
REINVENTING A NEW DIRECTION - RANDPAC

Mailing Address PO BOX 72598

City Newport State KY Zip Code 41072-0598

FEC ID number of contributing federal political committee. **C** C00493924

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
02 / 06 / 2014  
**Transaction ID : A0577CAA81CEB419EBAC**

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8500.00
<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 OF 39
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Bluegrass Committee**

Full Name (Last, First, Middle Initial)  
**A. Home Depot PAC**

Mailing Address 1155 F St., NW Ste. 400

City Washington State DC Zip Code 20004-1346

FEC ID number of contributing federal political committee. **C C00284885**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 06 / 2014

**Transaction ID : AC820D64CC6D2418C8E5**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**B. NATIONAL ASSOCIATION OF CONVENIENCE STORES POLITICAL ACTION COMMITTEE**

Mailing Address 1600 DUKE STREET  
1605 King Street

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C C00126763**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 06 / 2014

**Transaction ID : ABED730ED69D443D2BB7**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**C. AT&T Inc. Federal PAC**

Mailing Address 208 South Akard Street  
Suite 3521

City Dallas State TX Zip Code 75202-4206

FEC ID number of contributing federal political committee. **C C00109017**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 06 / 2014

**Transaction ID : AAFDCF70FF2794D63A3B**

Amount of Each Receipt this Period  
2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	12500.00
<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 10 OF 39
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Bluegrass Committee**

**A. Eastman PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 511

City Kingsport	State TN	Zip Code 37662-5000
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FEC ID number of contributing federal political committee. **C** C00113159

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	18	/	2014

**Transaction ID : AB3DD0E59E49D42C6972**

Amount of Each Receipt this Period  
5000.00

**B. American Aca. of Dermatology Assn. PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1350 I St NW, Suite 870

City Washington	State DC	Zip Code 20005
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FEC ID number of contributing federal political committee. **C** C00359539

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	18	/	2014

**Transaction ID : A25D1C1C42854423DB5A**

Amount of Each Receipt this Period  
5000.00

**C. AGSHF Civic Action Committee**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1333 New Hampshire Avenue, NW  
Suite 400

City Washington	State DC	Zip Code 20036-1532
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FEC ID number of contributing federal political committee. **C** C00104901

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	18	/	2014

**Transaction ID : ABB29AF8975FF418F8A6**

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15000.00
<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 11 OF 39
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Bluegrass Committee**

Full Name (Last, First, Middle Initial)  
**A. AMERICAN ACADEMY OF NEUROLOGY BRAINPAC**

Mailing Address 401 C ST NE

City Washington State DC Zip Code 20002-5817

FEC ID number of contributing federal political committee. **C C00435933**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 20 / 2014

**Transaction ID : A1D8F28AA9F9943DBB68**

Amount of Each Receipt this Period  
2500.00

Full Name (Last, First, Middle Initial)  
**B. QUICKEN LOANS INC PAC**

Mailing Address 101 S. WASHINGTON SQ.  
SUITE 620

City Lansing State MI Zip Code 48933-1708

FEC ID number of contributing federal political committee. **C C00388827**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 20 / 2014

**Transaction ID : A774DC0397F0243F4A10**

Amount of Each Receipt this Period  
2500.00

Full Name (Last, First, Middle Initial)  
**C. BHFS-E, PC PAC (BROWNSTEIN HYATT FARBER SCHRECK POLITICAL ACTION COMMITTEE)**

Mailing Address 410 SEVENTEENTH STREET  
SUITE 2200

City Denver State CO Zip Code 80202-4432

FEC ID number of contributing federal political committee. **C C00390583**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 25 / 2014

**Transaction ID : AF3C69A49CB5443D9B09**

Amount of Each Receipt this Period  
1500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6500.00
<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 12 OF 39
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Bluegrass Committee**

Full Name (Last, First, Middle Initial)  
**A. American Dental Assn. PAC**

Mailing Address 1111 14th St NW, Ste. 1100

City Washington	State DC	Zip Code 20005-5627
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FEC ID number of contributing federal political committee. **C** C00000729

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2014

**Transaction ID : AD1931BDCAE0847D8BD5**

Amount of Each Receipt this Period  
2500.00

Full Name (Last, First, Middle Initial)  
**B. General Electric Company PAC**

Mailing Address 1299 Pennsylvania Ave. NW, #1100

City Washington	State DC	Zip Code 20004
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FEC ID number of contributing federal political committee. **C** C00024869

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2014

**Transaction ID : A02EA043BE36F4161999**

Amount of Each Receipt this Period  
2500.00

Full Name (Last, First, Middle Initial)  
**c. Independent Community Bankers PAC**

Mailing Address 1615 L Street, NW  
Suite 900

City Washington	State DC	Zip Code 20036-5623
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00032698

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	27	/	2014

**Transaction ID : A680F6EA11CEA449E9CD**

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10000.00
<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 13 OF 39
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Bluegrass Committee**

Full Name (Last, First, Middle Initial)  
**A. Altria Group PAC**

Mailing Address 101 Constitution Ave. NW

City Washington State DC Zip Code 20001-2133

FEC ID number of contributing federal political committee. **C** C00089136

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 27 / 2014

**Transaction ID : A786AC0AF598B4DF48B4**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**B. Ben Waide for State Representative**

Mailing Address 765 Oakwood Lane

City Madisonville State KY Zip Code 42431

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 27 / 2014

**Transaction ID : A989BDDE345D74FD9A53**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**C. NRA Political Victory Fund**

Mailing Address 11250 Waples Mill Road

City Fairfax State VA Zip Code 22030

FEC ID number of contributing federal political committee. **C** C00053553

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 27 / 2014

**Transaction ID : AC25AB3908D5E4A458D0**

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7000.00
<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 14 OF 39
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Bluegrass Committee**

Full Name (Last, First, Middle Initial) <b>A. American Association of Nurse Anesthetists PAC</b>		Date of Receipt MM / DD / YYYY 02 / 27 / 2014 <b>Transaction ID : A79020E2373D34F61AFE</b>
Mailing Address 25 Massachusetts Avenue, NW Suite 550		Amount of Each Receipt this Period 2500.00
City Washington	State DC	Zip Code 20001-1408
FEC ID number of contributing federal political committee. <b>C</b> C00173153	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>B. MONSANTO COMPANY CITIZENSHIP FUND AKA MONSANTO CITIZENSHIP FUND</b>		Date of Receipt MM / DD / YYYY 03 / 04 / 2014 <b>Transaction ID : A54DA7AF6B4874F0692C</b>
Mailing Address 800 N. LINDBERGH BLVD.		Amount of Each Receipt this Period 5000.00
City Saint Louis	State MO	Zip Code 63167-1000
FEC ID number of contributing federal political committee. <b>C</b> C00042069	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>c. USBancorp PAC</b>		Date of Receipt MM / DD / YYYY 03 / 12 / 2014 <b>Transaction ID : ACDB703127BD849F28CD</b>
Mailing Address 800 Nicollet Mall		Amount of Each Receipt this Period 1000.00
City Minneapolis	State MN	Zip Code 55402-7000
FEC ID number of contributing federal political committee. <b>C</b> C00018036	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	8500.00
<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 15 OF 39
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Bluegrass Committee**

Full Name (Last, First, Middle Initial) <b>A. Capital One PAC</b>		Date of Receipt
Mailing Address 1680 Capital One Drive		<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City	State	Zip Code
Mc Lean	VA	22102
FEC ID number of contributing federal political committee.	<input type="text" value="C00326595"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="2500.00"/>	
		Transaction ID : <b>A8D7D4114733245BEB4A</b>
		Amount of Each Receipt this Period
		<input type="text" value="2500.00"/>

Full Name (Last, First, Middle Initial) <b>B. CAPITAL GROUP COMPANIES INC POLITICAL ACTION COMMITTEE; THE</b>		Date of Receipt
Mailing Address 333 S HOPE STREET		<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2014"/>
City	State	Zip Code
Los Angeles	CA	90071-1406
FEC ID number of contributing federal political committee.	<input type="text" value="C00540518"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="5000.00"/>	
		Transaction ID : <b>A5F9676068BA34FF49A3</b>
		Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>

Full Name (Last, First, Middle Initial) <b>c. Union Pacific Corporation PAC</b>		Date of Receipt
Mailing Address 600 13th St NW Suite 340		<input type="text" value="03"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
City	State	Zip Code
Washington	DC	20005
FEC ID number of contributing federal political committee.	<input type="text" value="C00010470"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="5000.00"/>	
		Transaction ID : <b>AC5039DD16D8E4F5F9A4</b>
		Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="12500.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 16 OF 39
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Bluegrass Committee**

**A. BNSF Rail PAC**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 961039  
City Fort Worth State TX Zip Code 76161  
FEC ID number of contributing federal political committee. **C** C00235739  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 20 / 2014  
**Transaction ID : A4D84437D19774E7A942**  
Amount of Each Receipt this Period  
4000.00

**B. Realtors Political Action Committee**  
Full Name (Last, First, Middle Initial)  
Mailing Address 430 N. Michigan Avenue  
City Chicago State IL Zip Code 60611  
FEC ID number of contributing federal political committee. **C** C00030718  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 20 / 2014  
**Transaction ID : AE8F83E5F98B1485BBD8**  
Amount of Each Receipt this Period  
5000.00

**C. Norfolk Southern Corporation Good Govnt**  
Full Name (Last, First, Middle Initial)  
Mailing Address Three Commercial Place  
City Norfolk State VA Zip Code 23510  
FEC ID number of contributing federal political committee. **C** C00009282  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
03 / 21 / 2014  
**Transaction ID : A8FA832CD9E5A4A53A40**  
Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	14000.00
<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 17 OF 39
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Bluegrass Committee**

**A. MOTOROLA SOLUTIONS, INC. POLITICAL ACTION COMMITTEE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1455 PENNSYLVANIA AVENUE, NW  
 SUITE 900  
 City WASHINGTON State DC Zip Code 20004  
 FEC ID number of contributing federal political committee. **C** C00075341  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014  
**Transaction ID : A90E9D3CDE08142348BA**  
 Amount of Each Receipt this Period  
 2600.00

**B. Wine and Spirits Wholesalers PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 805 15th Street, NW  
 Suite 430  
 City Washington State DC Zip Code 20005-2273  
 FEC ID number of contributing federal political committee. **C** C00147173  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : A73C035F52F694D42B87**  
 Amount of Each Receipt this Period  
 5000.00

**C. Boeing PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1200 Wilson Boulevard  
 City Arlington State VA Zip Code 22209  
 FEC ID number of contributing federal political committee. **C** C00142711  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 27 / 2014  
**Transaction ID : A58098C12C3014D1CA14**  
 Amount of Each Receipt this Period  
 2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10100.00
<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 18 OF 39
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Bluegrass Committee**

Full Name (Last, First, Middle Initial)  
**A. Microsoft Corporation PAC**

Mailing Address 16011 N.E. 36th Way  
Box 97017

City Redmond State WA Zip Code 98073

FEC ID number of contributing federal political committee. **C** C00227546

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
03 / 27 / 2014  
**Transaction ID : AB89A9E2BF48A43A0B33**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**B. CSX Corporation PAC**

Mailing Address 1331 Pennsylvania Avenue, NW  
Suite 560 National Place

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00163832

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
03 / 27 / 2014  
**Transaction ID : A2C4F5236B1D242E79FF**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**C. Novartis PAC**

Mailing Address 701 Pennsylvanai Avenue, NW  
Suite 725

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00033969

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
03 / 31 / 2014  
**Transaction ID : AFA7C4E41A8EC448689A**

Amount of Each Receipt this Period  
2500.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	12500.00
<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 19 OF 39
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Bluegrass Committee**

Full Name (Last, First, Middle Initial) <b>A. Pharma Research &amp; Manufacturers GGC</b>		Date of Receipt
Mailing Address 950 F Street, NW Suite 300		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City Washington	State DC	Zip Code 20004
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00021972"/>	<b>Transaction ID : A5E74E41F05D34FB8A67</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="2500.00"/>	<input type="text" value="2500.00"/>

Full Name (Last, First, Middle Initial) <b>B. Honeywell International PAC</b>		Date of Receipt
Mailing Address 101 Constitution Ave., NW Ste. 500 W		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00096156"/>	<b>Transaction ID : AA6D0BAEB6C6048919B9</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="2000.00"/>	<input type="text" value="1000.00"/>

Full Name (Last, First, Middle Initial) <b>C. National Restaurant Association PAC</b>		Date of Receipt
Mailing Address 1200 17th Street, NW		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City Washington	State DC	Zip Code 20036-3004
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00003764"/>	<b>Transaction ID : AC1276C4A51724E508A6</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	<input type="text" value="5000.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="8500.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

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

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

FOR LINE NUMBER: PAGE 20 OF 39  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Bluegrass Committee**

**A. Verizon Communications INC GGC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1717 Arch Street, 47S  
 City Philadelphia State PA Zip Code 19103  
 FEC ID number of contributing federal political committee. **C** C00186288  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : AD27FC4739C4C46C5A35**  
 Amount of Each Receipt this Period  
 5000.00

**B. J. P. Morgan Chase & Co. PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10 S Dearborn Street  
 City Chicago State IL Zip Code 60603  
 FEC ID number of contributing federal political committee. **C** C00128512  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : AB5DD2A23468B404C983**  
 Amount of Each Receipt this Period  
 5000.00

**C. DARDEN RESTAURANTS, INC. EMPLOYEES GOOD GOVERNMENT FUND**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1000 DARDEN CENTER DRIVE  
 City Orlando State FL Zip Code 32837-4032  
 FEC ID number of contributing federal political committee. **C** C00108282  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2014  
**Transaction ID : ABD34378B516948F0B40**  
 Amount of Each Receipt this Period  
 5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 15000.00  
**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: (check only one)	PAGE 21 OF 39
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Bluegrass Committee**

Full Name (Last, First, Middle Initial) <b>A. Amgen PAC</b>		Date of Receipt
Mailing Address One Amgen Center Drive		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City	State	Zip Code
Thousand Oaks	CA	91320
FEC ID number of contributing federal political committee.		<b>Transaction ID : A34A37CDEA62E43219B5</b>
Name of Employer		Amount of Each Receipt this Period
Occupation		<input type="text" value="5000.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="5000.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Mortgage Bankers Assn. of America PAC</b>		Date of Receipt
Mailing Address 1919 Pennsylvania Avenue, NW		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City	State	Zip Code
Washington	DC	20006
FEC ID number of contributing federal political committee.		<b>Transaction ID : AEA47791FA7074C97B06</b>
Name of Employer		Amount of Each Receipt this Period
Occupation		<input type="text" value="2500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Amer College of Radiology Assoc. PAC</b>		Date of Receipt
Mailing Address 1891 Preston White Drive		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2014"/>
City	State	Zip Code
Reston	VA	20191
FEC ID number of contributing federal political committee.		<b>Transaction ID : A931743CB11FB489E883</b>
Name of Employer		Amount of Each Receipt this Period
Occupation		<input type="text" value="2500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="10000.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 22 OF 39
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)  
**Bluegrass Committee**

Full Name (Last, First, Middle Initial) <b>A. Honeywell International PAC</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2014
Mailing Address 101 Constitution Ave., NW Ste. 500 W		Transaction ID : <b>A7320DB38C9D44CBBB10</b>
City Washington	State DC Zip Code 20001	
FEC ID number of contributing federal political committee. <b>C</b> C00096156		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	Aggregate Year-to-Date ▼ 2000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Receipt MM / DD / YYYY
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date ▼
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt MM / DD / YYYY
Mailing Address		Amount of Each Receipt this Period
City	State Zip Code	
FEC ID number of contributing federal political committee. <b>C</b>		Aggregate Year-to-Date ▼
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	151600.00

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

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

FOR LINE NUMBER: PAGE 23 OF 39  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  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)  
**Bluegrass Committee**

**A. Iowaans for Latham**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 8237  
 City Des Moines State IA Zip Code 50301-8237  
 FEC ID number of contributing federal political committee. **C** C00287045  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 13 / 2014  
**Transaction ID : A87FA8F51C74B44278E1**  
 Amount of Each Receipt this Period  
 5000.00  
 Refund-2014 General

**B.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	5000.00

**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)

<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)  
**Bluegrass Committee**

Full Name (Last, First, Middle Initial)

**A. JRB Consulting LLC**

Mailing Address 312 Arrowhead Dr

City Lake Jackson State TX Zip Code 77566-4586

Purpose of Disbursement  
Strategy Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 02 / 2014

Transaction ID : **BC315FFC5C9994CCB85D**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. Southwinds Consulting**

Mailing Address 425 Massachusetts Ave.

City Washington State DC Zip Code 20001-2609

Purpose of Disbursement  
Strategic Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 13 / 2014

Transaction ID : **BD6F6A7F339A544C6AC1**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Rick Murphy**

Mailing Address 220 1/2 E St NE

City Washington State DC Zip Code 20002-4923

Purpose of Disbursement  
Rent

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 13 / 2014

Transaction ID : **B4EC5D52DBD4C4D0DB51**

Amount of Each Disbursement this Period

750.00

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

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

10750.00

**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)

<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)  
**Bluegrass Committee**

Full Name (Last, First, Middle Initial)

**A. Integrated Campaign Solutions LLC**

Mailing Address 526 Daroco Ave

City State Zip Code  
Coral Gables FL 33146-2713

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 16 / 2014

Transaction ID : B02FAAAB9E984573947

Amount of Each Disbursement this Period

1100.00

Full Name (Last, First, Middle Initial)

**B. Aliign**

Mailing Address 12800 N Meridian St  
Ste 400

City State Zip Code  
Carmel IN 46032-9443

Purpose of Disbursement  
Accounting Service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 16 / 2014

Transaction ID : B6921D31105234797BC5

Amount of Each Disbursement this Period

270.00

Full Name (Last, First, Middle Initial)

**C. Aliign**

Mailing Address 12800 N Meridian St  
Ste 400

City State Zip Code  
Carmel IN 46032-9443

Purpose of Disbursement  
Accounting Service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 31 / 2014

Transaction ID : B6415E8B815AF4324909

Amount of Each Disbursement this Period

63.00

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

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

1433.00

**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)

<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)  
**Bluegrass Committee**

Full Name (Last, First, Middle Initial)

**A. Republic Bank & Trust Co.**

Mailing Address 601 W Market St

City Louisville State KY Zip Code 40202-2745

Purpose of Disbursement  
Payroll Taxes

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 31 / 2014

Transaction ID : **B7968EA56BF2049FF8CE**

Amount of Each Disbursement this Period

1641.13

Full Name (Last, First, Middle Initial)

**B. Aliign**

Mailing Address 12800 N Meridian St  
Ste 400

City Carmel State IN Zip Code 46032-9443

Purpose of Disbursement  
Accounting Service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 31 / 2014

Transaction ID : **B1C8BF8C34C804FCF82F**

Amount of Each Disbursement this Period

135.00

Full Name (Last, First, Middle Initial)

**C. Laura Sequeira**

Mailing Address 616 S Adams St

City Arlington State VA Zip Code 22204-2113

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 31 / 2014

Transaction ID : **B824C84220EA440969B4**

Amount of Each Disbursement this Period

7042.00

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

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

8818.13

**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)

<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)  
**Bluegrass Committee**

Full Name (Last, First, Middle Initial)

**A. Leslie Small**

Mailing Address 425 S Hubbards Ln

City Louisville State KY Zip Code 40207-4086

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 31 / 2014

Transaction ID : B0ADAA079965742E4AF0

Amount of Each Disbursement this Period

1115.21

Full Name (Last, First, Middle Initial)

**B. Leslie Small**

Mailing Address 425 S Hubbards Ln

City Louisville State KY Zip Code 40207-4086

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
01 / 31 / 2014

Transaction ID : B414D988FA3FE40A587A

Amount of Each Disbursement this Period

2222.29

Full Name (Last, First, Middle Initial)

**C. JRB Consulting LLC**

Mailing Address 312 Arrowhead Dr

City Lake Jackson State TX Zip Code 77566-4586

Purpose of Disbursement  
Strategy Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 04 / 2014

Transaction ID : B8131B7C6904A45BBB13

Amount of Each Disbursement this Period

10000.00

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

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

13337.50

**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)

<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)  
**Bluegrass Committee**

**A. Southwinds Consulting**

Full Name (Last, First, Middle Initial)

Mailing Address 425 Massachusetts Ave.

City Washington State DC Zip Code 20001-2609

Purpose of Disbursement Strategy Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 13 / 2014

Transaction ID : B29DAF78BBDFD49798B0

Amount of Each Disbursement this Period: 5000.00

Category/Type

**B. Republic Bank & Trust Co.**

Full Name (Last, First, Middle Initial)

Mailing Address 601 W Market St

City Louisville State KY Zip Code 40202-2745

Purpose of Disbursement Payroll Taxes

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 28 / 2014

Transaction ID : B1915EC03D3A040D9B05

Amount of Each Disbursement this Period: 513.32

Category/Type

**C. Aliign**

Full Name (Last, First, Middle Initial)

Mailing Address 12800 N Meridian St Ste 400

City Carmel State IN Zip Code 46032-9443

Purpose of Disbursement Accounting Service

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 28 / 2014

Transaction ID : B012AD35E1339433C985

Amount of Each Disbursement this Period: 140.00

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 5653.32

**TOTAL** 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)

<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)  
**Bluegrass Committee**

Full Name (Last, First, Middle Initial)

**A. Leslie Small**

Mailing Address 425 S Hubbards Ln

City Louisville State KY Zip Code 40207-4086

Purpose of Disbursement  
Salary

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 28 / 2014

Transaction ID : B586BDDC45F1949CDAD7

Amount of Each Disbursement this Period

1115.21

Full Name (Last, First, Middle Initial)

**B. Laura Sequeira**

Mailing Address 616 S Adams St

City Arlington State VA Zip Code 22204-2113

Purpose of Disbursement  
Fundraising Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 28 / 2014

Transaction ID : B7466C1D587A0413CAE8

Amount of Each Disbursement this Period

7042.00

Full Name (Last, First, Middle Initial)

**C. Rick Murphy**

Mailing Address 220 1/2 E St NE

City Washington State DC Zip Code 20002-4923

Purpose of Disbursement  
Rent

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 28 / 2014

Transaction ID : B2148D7C6C8894E52BAE

Amount of Each Disbursement this Period

1500.00

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

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

9657.21

**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)

<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)  
**Bluegrass Committee**

Full Name (Last, First, Middle Initial)

**A. Aristotle International**

Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement  
Database Software

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
02 / 28 / 2014

Transaction ID : BAA77B4F6B88843A7BB5

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

**B. Southwinds Consulting**

Mailing Address 425 Massachusetts Ave.

City Washington State DC Zip Code 20001-2609

Purpose of Disbursement  
Strategy Consulting

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 06 / 2014

Transaction ID : B653D94120D5B49F4B3F

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. Huckaby Davis Lisker**

Mailing Address 228 S Washington St  
Ste 115

City Alexandria State VA Zip Code 22314-5404

Purpose of Disbursement  
Compliance Compliance

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
03 / 10 / 2014

Transaction ID : B408CA519F3034D9F814

Amount of Each Disbursement this Period

5490.10

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

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

11090.10

**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)

<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)  
**Bluegrass Committee**

Full Name (Last, First, Middle Initial)

**A. Republic Bank & Trust Co.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		11		2014

Mailing Address 601 W Market St

**Transaction ID : B054F91C837554922B8E**

City Louisville State KY Zip Code 40202-2745

Amount of Each Disbursement this Period

52.15
-------

Purpose of Disbursement  
Income Tax

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Bon Vivant Catering**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		19		2014

Mailing Address 6330 Dunman Way

**Transaction ID : B9D76DC62E9FE42C2B68**

City Alexandria State VA Zip Code 22315-5505

Amount of Each Disbursement this Period

2288.00
---------

Purpose of Disbursement  
PAC Event Catering

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Republic Bank & Trust Co.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		21		2014

Mailing Address 601 W Market St

**Transaction ID : BEB53AA1DE2CC4D1597E**

City Louisville State KY Zip Code 40202-2745

Amount of Each Disbursement this Period

20.00
-------

Purpose of Disbursement  
Bank Fee

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

2360.15
---------

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

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**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)

<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)  
**Bluegrass Committee**

Full Name (Last, First, Middle Initial)

**A. Republic Bank & Trust Co.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Mailing Address 601 W Market St

**Transaction ID : B321168B390134E2BB43**

City State Zip Code  
Louisville KY 40202-2745

Amount of Each Disbursement this Period

511.03
--------

Purpose of Disbursement  
Payroll Taxes

Category/Type
---------------

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Laura Sequeira**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Mailing Address 616 S Adams St

**Transaction ID : BB0C2D4519C5441C2A2F**

City State Zip Code  
Arlington VA 22204-2113

Amount of Each Disbursement this Period

7042.00
---------

Purpose of Disbursement  
Fundraising Consulting

Category/Type
---------------

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Leslie Small**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Mailing Address 425 S Hubbards Ln

**Transaction ID : B37593C39C1B84D08BE4**

City State Zip Code  
Louisville KY 40207-4086

Amount of Each Disbursement this Period

1115.23
---------

Purpose of Disbursement  
Salary

Category/Type
---------------

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

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

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

8668.26
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# 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)

<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)  
**Bluegrass Committee**

Full Name (Last, First, Middle Initial)

### A. Align

Mailing Address 12800 N Meridian St  
Ste 400

City Carmel State IN Zip Code 46032-9443

Purpose of Disbursement  
Accounting Service

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
03			31			2014			

Transaction ID : B2D37330B460244DC8D9

Amount of Each Disbursement this Period

140.00
--------

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

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

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

140.00
--------

71907.67
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**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
**Bluegrass Committee**

Full Name (Last, First, Middle Initial)

**A. National Republican Senatorial Committee**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		03		2014

Mailing Address 425 Second Street, NE

**Transaction ID : B558399D7842C4ADAB33**

City Washington State DC Zip Code 20002

Amount of Each Disbursement this Period

15000.00
----------

Purpose of Disbursement  
Committee Contribution

--

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District: PAC20142014

Full Name (Last, First, Middle Initial)

**B. CORY GARDNER FOR SENATE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		21		2014

Mailing Address 9227 E. LINCOLN AVE., #200-234

**Transaction ID : B0380FDF7464E48089CC**

City LONE TREE State CO Zip Code 80124

Amount of Each Disbursement this Period

5000.00
---------

Purpose of Disbursement  
Committee Contribution

--

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CO District:

Full Name (Last, First, Middle Initial)

**C. NEW HAMPSHIRE FOR SCOTT BROWN EXPLORATORY COMMITTEE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		31		2014

Mailing Address PO BOX 600

**Transaction ID : B88FC09CE96FA48FFA89**

City Rye State NH Zip Code 03870-0600

Amount of Each Disbursement this Period

5000.00
---------

Purpose of Disbursement  
Committee Contribution

--

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NH District:

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

25000.00
----------

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

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**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
**Bluegrass Committee**

Full Name (Last, First, Middle Initial)

**A. ED GILLESPIE FOR SENATE**

Mailing Address PO BOX 71596

City RICHMOND State VA Zip Code 23255

Purpose of Disbursement  
Committee Contribution

Candidate Name

**Edward W Gillespie**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: VA District:

Date of Disbursement

MM / DD / YYYY  
02 / 21 / 2014

Transaction ID : **B60227497BAB242799BD**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. DR MONICA WEHBY FOR US SENATE**

Mailing Address PO BOX 3375

City Portland State OR Zip Code 97208-3375

Purpose of Disbursement  
Committee Contribution

Candidate Name

**Monica Wehby**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: OR District:

Date of Disbursement

MM / DD / YYYY  
03 / 21 / 2014

Transaction ID : **BD38B67AC491243378D7**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. CORY GARDNER FOR SENATE**

Mailing Address 9227 E. LINCOLN AVE., #200-234

City LONE TREE State CO Zip Code 80124

Purpose of Disbursement  
Committee Contribution

Candidate Name

**Cory Gardner**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CO District:

Date of Disbursement

MM / DD / YYYY  
03 / 21 / 2014

Transaction ID : **B2CCDD35B56A7443DBA6**

Amount of Each Disbursement this Period

5000.00

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

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

15000.00

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
**Bluegrass Committee**

Full Name (Last, First, Middle Initial)

**A. NEW HAMPSHIRE FOR SCOTT BROWN EXPLORATORY COMMITTEE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2014

Mailing Address PO BOX 600

**Transaction ID : B8EA7A1AE5F0E4FFDA33**

City Rye State NH Zip Code 03870-0600

Amount of Each Disbursement this Period

5000.00
---------

Purpose of Disbursement  
Committee Contribution

Category/ Type
-------------------

Candidate Name  
**Scott Brown**

Office Sought:  House  
 Senate  
 President  
State: NH District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. ED GILLESPIE FOR SENATE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	21	/	2014

Mailing Address PO BOX 71596

**Transaction ID : BE05789515AD142E3950**

City RICHMOND State VA Zip Code 23255

Amount of Each Disbursement this Period

5000.00
---------

Purpose of Disbursement  
Committee Contribution

Category/ Type
-------------------

Candidate Name  
**Edward W Gillespie**

Office Sought:  House  
 Senate  
 President  
State: VA District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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

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

10000.00
----------

50000.00
----------

**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)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Bluegrass Committee**

Full Name (Last, First, Middle Initial)

**A. Hardin County GOP**

Mailing Address 4611 N Dixie Hwy

City Elizabethtown State KY Zip Code 42701-8828

Purpose of Disbursement  
Committee Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
PAC20142014

Date of Disbursement

/  /

Transaction ID : **BB70CF12D1AF24A628A4**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Shelby County Republican Party**

Mailing Address 1009 Majestic Oaks Way

City Simpsonville State KY Zip Code 40067-5619

Purpose of Disbursement  
Committee Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
PAC20142014

Date of Disbursement

/  /

Transaction ID : **B34EACFB3AD2A4B16BF1**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Republican Party of Grayson County**

Mailing Address 362 Friendship Lane

City Leitchfield State KY Zip Code 42754-7638

Purpose of Disbursement  
Committee Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
PAC20142014

Date of Disbursement

/  /

Transaction ID : **B33AABEBBD850487DB47**

Amount of Each Disbursement this Period

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

**TOTAL** 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)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Bluegrass Committee**

Full Name (Last, First, Middle Initial)

**A. Shelby County Republican Party**

Mailing Address 1009 Majestic Oaks Way

City State Zip Code  
Simpsonville KY 40067-5619

Purpose of Disbursement  
Committee Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
PAC20142014

Date of Disbursement

/  /

Transaction ID : **BB4FF50A0AAF1452FB1C**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Calloway County Republican Party**

Mailing Address 3820 US 641 South

City State Zip Code  
Murray KY 42071

Purpose of Disbursement  
Committee Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
PAC20142014

Date of Disbursement

/  /

Transaction ID : **B1C3A99A2E8C641929C8**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. Fifth District Lincoln Club**

Mailing Address 1870 Bacon Ave.

City State Zip Code  
Corbin KY 40701-2334

Purpose of Disbursement  
Committee Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
PAC20142014

Date of Disbursement

/  /

Transaction ID : **B34764F9BF82E45B2A20**

Amount of Each Disbursement this Period

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

**TOTAL** 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)

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**Bluegrass Committee**

Full Name (Last, First, Middle Initial)

**A. Warren County Republican Party**

Mailing Address PO Box 7500

City Bowling Green State KY Zip Code 42102

Purpose of Disbursement  
Committee Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
PAC20142014

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
02 / 21 / 2014

Transaction ID : B729C7C6618F742E7B43

Amount of Each Disbursement this Period

600.00

State: District:

Full Name (Last, First, Middle Initial)

**B. Oldham County GOP**

Mailing Address 604 Crystal Place  
Suite 2-B

City La Grange State KY Zip Code 40031

Purpose of Disbursement  
Committee Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
PAC20142014

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
03 / 10 / 2014

Transaction ID : B3D72F777C70B4CD582D

Amount of Each Disbursement this Period

510.00

State: District:

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y

Amount of Each Disbursement this Period

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

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

1110.00

3301.00