

**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

New Power PAC

ADDRESS (number and street)

PO Box 1450

☐Check if different
than previously
reported. (ACC)

London

KY

40743

1450

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00489252

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

11

02

2010

in the
State of

KY

5. Covering Period

10

14

2010

through

11

22

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

Burt Lauderdale

Signature of Treasurer

Electronically Filed by Burt Lauderdale

Date

11

02

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

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 22

Write or Type Committee Name
New Power PAC

Report Covering the Period:

From:

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

To:

M	M
1	1

D	D
2	2

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	2010	0.00
(b) Cash on Hand at Beginning of Reporting Period	1946.39	
(c) Total Receipts (from Line 19)	64234.85	116406.91
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	66181.24	116406.91
7. Total Disbursements (from Line 31)	60790.20	111015.87
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	5391.04	5391.04
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	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)

3 / 22

Write or Type Committee Name
New Power PAC

Report Covering the Period:

From:

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

To:

M	M
1	1

D	D
2	2

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)	62719.85	113396.91
(ii) Unitemized	1515.00	3010.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	64234.85	116406.91
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	64234.85	116406.91
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.)	0.00	0.00
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))	64234.85	116406.91
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	64234.85	116406.91

DETAILED SUMMARY PAGE

of Disbursements

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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	0.00	
(b) Other Federal Operating Expenditures.....	48946.32	99171.99	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	48946.32	99171.99	
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)	11843.88	11843.88	
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))..	60790.20	111015.87	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	60790.20	111015.87	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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)	64234.85	116406.91
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	64234.85	116406.91
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	48946.32	99171.99
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	48946.32	99171.99

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

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

FOR LINE NUMBER: PAGE 6 / 22

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New Power PAC

A.

Full Name (Last, First, Middle Initial)

Wanda Humphrey

Mailing Address PO Box 193

City

Benham

State

KY

Zip Code

40807

FEC ID number of contributing
federal political committee.

C

Name of Employer
retired

Occupation
retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 5 / 2 0 1 0

Transaction ID: SA11AI.4313

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Kentuckians For The Commonwealth

Mailing Address PO Box 1450

City

London

State

KY

Zip Code

40743

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

45277.06

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 2 6 / 2 0 1 0

Transaction ID: SA11AI.4358

Amount of Each Receipt this Period

5100.00

C.

Full Name (Last, First, Middle Initial)

Kentuckians For The Commonwealth

Mailing Address PO Box 1450

City

London

State

KY

Zip Code

40743

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

60286.54

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 3 1 / 2 0 1 0

Transaction ID: SA11AI.4428

Amount of Each Receipt this Period

15009.48

In-kind - staff salary and
benefits

SUBTOTAL of Receipts This Page (optional)

21109.48

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 7 / 22

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New Power PAC

A.

Full Name (Last, First, Middle Initial)

Kentuckians For The Commonwealth

Mailing Address PO Box 1450

City

London

State

KY

Zip Code

40743

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

82286.54

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 4 / 2 0 1 0

Transaction ID: SA11AI.4359

Amount of Each Receipt this Period

22000.00

B.

Full Name (Last, First, Middle Initial)

Kentuckians For The Commonwealth

Mailing Address PO Box 1450

City

London

State

KY

Zip Code

40743

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

86239.07

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 7 / 2 0 1 0

Transaction ID: SA11AI.4360

Amount of Each Receipt this Period

3952.53

C.

Full Name (Last, First, Middle Initial)

Kentuckians For The Commonwealth

Mailing Address PO Box 1450

City

London

State

KY

Zip Code

40743

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

100239.52

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Transaction ID: SA11AI.4361

Amount of Each Receipt this Period

14000.45

SUBTOTAL of Receipts This Page (optional)

39952.98

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: PAGE 8 / 22

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

New Power PAC

A.

Full Name (Last, First, Middle Initial)

Kentuckians For The Commonwealth

Mailing Address PO Box 1450

City

London

State

KY

Zip Code

40743

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

101896.91

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.4430

Amount of Each Receipt this Period

1657.39

In-kind - staff salary and
benefits

SUBTOTAL of Receipts This Page (optional)

1657.39

TOTAL This Period (last page this line number only)

62719.85

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 9 / 22

<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)
New Power PAC

A. Full Name (Last, First, Middle Initial) Allegra Print & Imaging	Transaction ID: SB21B.4376 Date of Disbursement
Mailing Address 198 Moore Drive	<div> <div>10</div> <div>26</div> <div>2010</div> </div>
City Lexington State KY Zip Code 40503	Amount of Each Disbursement this Period
Purpose of Disbursement Printing	<div>860.00</div>
Candidate Name	<div>006</div> 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) Bank of America	Transaction ID: SB21B.4386 Date of Disbursement
Mailing Address PO Box 60073	<div> <div>11</div> <div>17</div> <div>2010</div> </div>
City City of Industry State CA Zip Code 91716	Amount of Each Disbursement this Period
Purpose of Disbursement Ads, meals: split cost	<div>1196.86</div>
Candidate Name	<div>004</div> 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) Google Inc	Transaction ID: SB21B.4386.7 Date of Disbursement
Mailing Address PO Box 39000	<div> <div>10</div> <div>18</div> <div>2010</div> </div>
City San Francisco State CA Zip Code 94139	Amount of Each Disbursement this Period
Purpose of Disbursement web ad	<div>179.68</div>
Candidate Name	<div>004</div> 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) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

2056.86

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)

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<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)
New Power PAC

A. Full Name (Last, First, Middle Initial) Herald Leader Advertising	Transaction ID: SB21B.4386.9 Date of Disbursement																				
Mailing Address 100 Midland Ave	<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>1</td><td>0</td><td></td><td>1</td><td>9</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	1	0		1	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	9		2	0	1	0												
City Lexington State KY Zip Code 40508	Amount of Each Disbursement this Period <table border="1"> <tr> <td>4</td><td>5</td><td>0</td><td>.</td><td>0</td><td>0</td> </tr> </table>	4	5	0	.	0	0														
4	5	0	.	0	0																
Purpose of Disbursement web ad Candidate Name	<table border="1"> <tr> <td>004</td> </tr> </table> Category/ Type	004																			
004																					
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) ▼																				
[MEMO ITEM]																					
B. Full Name (Last, First, Middle Initial) Facebook inc	Transaction ID: SB21B.4386.12 Date of Disbursement																				
Mailing Address 1601 S. California Ave	<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>1</td><td>0</td><td></td><td>2</td><td>6</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	1	0		2	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	6		2	0	1	0												
City Palo Alto State CA Zip Code 94304	Amount of Each Disbursement this Period <table border="1"> <tr> <td>2</td><td>8</td><td>.</td><td>0</td><td>3</td> </tr> </table>	2	8	.	0	3															
2	8	.	0	3																	
Purpose of Disbursement web ad Candidate Name	<table border="1"> <tr> <td>004</td> </tr> </table> Category/ Type	004																			
004																					
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) ▼																				
[MEMO ITEM]																					
C. Full Name (Last, First, Middle Initial) Facebook inc	Transaction ID: SB21B.4386.13 Date of Disbursement																				
Mailing Address 1601 S. California Ave	<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>1</td><td>0</td><td></td><td>2</td><td>9</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	1	0		2	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	9		2	0	1	0												
City Palo Alto State CA Zip Code 94304	Amount of Each Disbursement this Period <table border="1"> <tr> <td>2</td><td>6</td><td>.</td><td>2</td><td>4</td> </tr> </table>	2	6	.	2	4															
2	6	.	2	4																	
Purpose of Disbursement web ad Candidate Name	<table border="1"> <tr> <td>004</td> </tr> </table> Category/ Type	004																			
004																					
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) ▼																				
[MEMO ITEM]																					

SUBTOTAL of Disbursements This Page (optional) ►

0.00

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)

PAGE 11 / 22

<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)
New Power PAC

A.

Full Name (Last, First, Middle Initial)
Facebook inc

Mailing Address 1601 S. California Ave

City Palo Alto State CA Zip Code 94304

Purpose of Disbursement
web ad

Candidate Name

004

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.4386.14
Date of Disbursement

11 / 01 / 2010

Amount of Each Disbursement this Period

25.84

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Tim Buckingham

Mailing Address 2305 Southview Dr

City Lexington State KY Zip Code 40503

Purpose of Disbursement
Reimbursement: campaign postage

Candidate Name

006

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.4377
Date of Disbursement

10 / 26 / 2010

Amount of Each Disbursement this Period

963.49

C.

Full Name (Last, First, Middle Initial)
Full Signal Media Group, LLC

Mailing Address 2505 Brownsboro Rd
Unit B5

City Louisville State KY Zip Code 40206

Purpose of Disbursement
Website ad

Candidate Name

004

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.4369
Date of Disbursement

10 / 20 / 2010

Amount of Each Disbursement this Period

1320.00

SUBTOTAL of Disbursements This Page (optional)

2283.49

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)

PAGE 12 / 22

<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

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)
New Power PAC

A.

Full Name (Last, First, Middle Initial)
IMG Communications

Mailing Address 546 East Main Street

City Lexington State KY Zip Code 40508

Purpose of Disbursement
Radio Ads

Candidate Name

004
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.4412
Date of Disbursement

11 / 17 / 2010

Amount of Each Disbursement this Period

2700.00

B.

Full Name (Last, First, Middle Initial)
Kentuckians For The Commonwealth

Mailing Address PO Box 1450

City London State KY Zip Code 40743

Purpose of Disbursement
Printing

Candidate Name

006
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.4380
Date of Disbursement

10 / 26 / 2010

Amount of Each Disbursement this Period

191.12

C.

Full Name (Last, First, Middle Initial)
Kentuckians For The Commonwealth

Mailing Address PO Box 1450

City London State KY Zip Code 40743

Purpose of Disbursement
Reimbursement: Web hosting fee paid to Dream Host

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.4381
Date of Disbursement

10 / 26 / 2010

Amount of Each Disbursement this Period

119.40

SUBTOTAL of Disbursements This Page (optional)

3010.52

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)

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<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)
New Power PAC

A. Full Name (Last, First, Middle Initial)
Kentuckians For The Commonwealth

Mailing Address PO Box 1450

City London State KY Zip Code 40743

Purpose of Disbursement
Overhead expenses: joint costs

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.4382

Date of Disbursement

10 / 26 / 2010

Amount of Each Disbursement this Period

280.38

B. Full Name (Last, First, Middle Initial)
Kentuckians For The Commonwealth

Mailing Address PO Box 1450

City London State KY Zip Code 40743

Purpose of Disbursement
In-kind - staff salary and benefits

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.4429

Date of Disbursement

10 / 31 / 2010

Amount of Each Disbursement this Period

15009.48

C. Full Name (Last, First, Middle Initial)
Kentuckians For The Commonwealth

Mailing Address PO Box 1450

City London State KY Zip Code 40743

Purpose of Disbursement
In-kind - staff salary and benefits

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.4431

Date of Disbursement

11 / 22 / 2010

Amount of Each Disbursement this Period

1657.39

SUBTOTAL of Disbursements This Page (optional)

16947.25

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)

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<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)
New Power PAC

A.

Full Name (Last, First, Middle Initial)
Burt Lauderdale

Mailing Address PO Box 1450

City London State KY Zip Code 40743

Purpose of Disbursement
Reimbursement: newspaper ad
Candidate Name

004
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.4416
Date of Disbursement

11 / 04 / 2010

Amount of Each Disbursement this Period

13965.50

B.

Full Name (Last, First, Middle Initial)
Herald Leader Advertising

Mailing Address 100 Midland Ave

City Lexington State KY Zip Code 40508

Purpose of Disbursement
newspaper ad
Candidate Name

004
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.4416.0
Date of Disbursement

11 / 04 / 2010

Amount of Each Disbursement this Period

13965.50

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Burt Lauderdale

Mailing Address PO Box 1450

City London State KY Zip Code 40743

Purpose of Disbursement
Reimbursement: travel
Candidate Name

002
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.4419
Date of Disbursement

11 / 04 / 2010

Amount of Each Disbursement this Period

161.54

SUBTOTAL of Disbursements This Page (optional)

14127.04

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)

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<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)
New Power PAC

A.

Full Name (Last, First, Middle Initial)
Burt Lauderdale

Mailing Address PO Box 1450

City London State KY Zip Code 40743

Purpose of Disbursement
Reimbursement: travel

Candidate Name

002
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.4421

Date of Disbursement

11 / 04 / 2010

Amount of Each Disbursement this Period

161.54

B.

Full Name (Last, First, Middle Initial)
Mail Pro

Mailing Address 482 Curry Avenue

City Lexington State KY Zip Code 40508

Purpose of Disbursement
Mailing service

Candidate Name

006
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.4413

Date of Disbursement

11 / 18 / 2010

Amount of Each Disbursement this Period

1040.92

C.

Full Name (Last, First, Middle Initial)
Brendan Smith

Mailing Address PO Box 1462

City Guilford State CT Zip Code 06437

Purpose of Disbursement
Consultant: website and media

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.4414

Date of Disbursement

11 / 18 / 2010

Amount of Each Disbursement this Period

7959.53

SUBTOTAL of Disbursements This Page (optional)

9161.99

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)

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<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)
New Power PAC

A.

Full Name (Last, First, Middle Initial)
Sumo Design

Mailing Address 500 West Maple St

City State Zip Code
Nicholasville KY 40356

Purpose of Disbursement
consultant: materials design

Candidate Name

006
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.4425
Date of Disbursement

11 / 04 / 2010

Amount of Each Disbursement this Period

1020.00

B.

Full Name (Last, First, Middle Initial)
Vanco Services Inc.

Mailing Address 12600 Whitewater Drive
Suite 200

City State Zip Code
Minnetonka MN 55343

Purpose of Disbursement
credit card transaction fee

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.4362
Date of Disbursement

10 / 15 / 2010

Amount of Each Disbursement this Period

7.72

C.

Full Name (Last, First, Middle Initial)
Vanco Services Inc.

Mailing Address 12600 Whitewater Drive
Suite 200

City State Zip Code
Minnetonka MN 55343

Purpose of Disbursement
credit card transaction fee

Candidate Name

001
Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.4365
Date of Disbursement

10 / 25 / 2010

Amount of Each Disbursement this Period

1.83

SUBTOTAL of Disbursements This Page (optional)

1029.55

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)

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<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)
New Power PAC

A.

Full Name (Last, First, Middle Initial)
Vanco Services Inc.

Transaction ID: SB21B.4366

Date of Disbursement

10 / 28 / 2010

Mailing Address 12600 Whitewater Drive
Suite 200

City Minnetonka State MN Zip Code 55343

Amount of Each Disbursement this Period

1.00

Purpose of Disbursement
credit card transaction fee

001

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Vanco Services Inc.

Transaction ID: SB21B.4367

Date of Disbursement

10 / 29 / 2010

Mailing Address 12600 Whitewater Drive
Suite 200

City Minnetonka State MN Zip Code 55343

Amount of Each Disbursement this Period

5.95

Purpose of Disbursement
credit card transaction fee

001

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Vanco Services Inc.

Transaction ID: SB21B.4364

Date of Disbursement

11 / 03 / 2010

Mailing Address 12600 Whitewater Drive
Suite 200

City Minnetonka State MN Zip Code 55343

Amount of Each Disbursement this Period

0.73

Purpose of Disbursement
credit card transaction fee

001

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

7.68

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 PageFOR LINE NUMBER:
(check only one)

PAGE 18 / 22

<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)

New Power PAC

A.

Full Name (Last, First, Middle Initial)

Vanco Services Inc.

Mailing Address 12600 Whitewater Drive
Suite 200City State Zip Code
Minnetonka MN 55343Purpose of Disbursement
credit card transaction fee

Candidate Name

001
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.4368

Date of Disbursement

M M / D D / Y Y Y Y
1 1 / 1 8 / 2 0 1 0

Amount of Each Disbursement this Period

1.14

SUBTOTAL of Disbursements This Page (optional)

1.14

TOTAL This Period (last page this line number only)

48625.52

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 19 / 22

FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) New Power PAC		FEC IDENTIFICATION NUMBER C C00489252	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Allegra Print & Imaging		Date MM / DD / YYYY 10 / 26 / 2010	
Mailing Address 198 Moore Drive		Amount 1204.16	
City Lexington State KY Zip Code 40503		Transaction ID: SE.4264	
Purpose of Expenditure Printing: direct ma- il postcard		Office Sought: <input checked="" type="checkbox"/> House State: KY <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 006		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rand Paul		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 1204.16		2010	
Full Name (Last, First, Middle, Initial) of Payee Allegra Print & Imaging		Date MM / DD / YYYY 10 / 26 / 2010	
Mailing Address 198 Moore Drive		Amount 2146.50	
City Lexington State KY Zip Code 40503		Transaction ID: SE.4284	
Purpose of Expenditure Printing: direct mail postcard		Office Sought: <input checked="" type="checkbox"/> House State: KY <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> Presidential	
Category/Type 006		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Ben Chandler		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 2146.50		2010	
(a) SUBTOTAL of Itemized Independent Expenditures		3350.66	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Burt Lauderdale Signature		Date MM / DD / YYYY 11 / 02 / 2010	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) New Power PAC		FEC IDENTIFICATION NUMBER C C00489252	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Burt Lauderdale		Date M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 1 0	
Mailing Address PO Box 1450		Amount 2622.82	
City State Zip Code London KY 40743		Transaction ID: SE.4278	
Purpose of Expenditure Postage: direct mail piece; to be reimbursed; Mail Pro final Vendor of Federal Candidate supported or Opposed by expenditure: Rand Paul		Office Sought: <input type="checkbox"/> House State: KY <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 006		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 3826.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010	
Full Name (Last, First, Middle, Initial) of Payee Burt Lauderdale		Date M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 1 0	
Mailing Address PO Box 1450		Amount 4769.40	
City State Zip Code London KY 40743		Transaction ID: SE.4286	
Purpose of Expenditure Postage: direct mail postcard postage; re-imbursement; Mail Pro final Vendor of Federal Candidate supported or Opposed by expenditure: Ben Chandler		Office Sought: <input checked="" type="checkbox"/> House State: KY <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> Presidential	
Category/Type 006		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6915.90		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010	
(a) SUBTOTAL of Itemized Independent Expenditures		7392.22	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Burt Lauderdale Signature		Date M M / D D / Y Y Y Y 1 1 / 0 2 / 2 0 1 0	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) New Power PAC		FEC IDENTIFICATION NUMBER C C00489252	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Leo Weekly		Date MM / DD / YYYY 10 / 26 / 2010	
Mailing Address 301 E. Main St. Suite 201		Amount 1101.00	
City State Zip Code Louisville KY 40202		Transaction ID: SE.4291	
Purpose of Expenditure Newspaper Ad		Office Sought: <input checked="" type="checkbox"/> House State: KY <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John Yarmuth		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2010	
1101.00			
Full Name (Last, First, Middle, Initial) of Payee Mail Pro		Date MM / DD / YYYY 10 / 26 / 2010	
Mailing Address 482 Curry Avenue		Amount 2622.82	
City State Zip Code Lexington KY 40508		Transaction ID: SE.4280	
Purpose of Expenditure Postage: reimbursement to Burt Lauderdale for direct mail postage		Office Sought: <input type="checkbox"/> House State: KY <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type 006		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Rand Paul		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2010	
3826.98		[MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures		1101.00	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Burt Lauderdale Signature		Date MM / DD / YYYY 11 / 02 / 2010	

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) New Power PAC		FEC IDENTIFICATION NUMBER C C00489252	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Mail Pro		Date M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 1 0	
Mailing Address 482 Curry Avenue		Amount 4769.40	
City Lexington State KY Zip Code 40508		Transaction ID: SE.4288	
Purpose of Expenditure Postage: direct mail postcard postage; re- imbursed to Burt Lau- derdale		Office Sought: <input checked="" type="checkbox"/> House State: KY <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> Presidential	
Category/ Type 006		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Federal Candidate supported or Opposed by expenditure: Ben Chandler		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : 2010	
Calendar Year-To-Date Per Election for Office Sought		6915.90 [MEMO ITEM]	

(a) SUBTOTAL of Itemized Independent Expenditures	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	11843.88

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Burt Lauderdale
Signature

Date M M / D D / Y Y Y Y
1 1 / 0 2 / 2 0 1 0