

**FEC  
FORM 1**

**STATEMENT OF  
ORGANIZATION**

(See Instructions)

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines 12FE4M5  
**CHURCHILL DOWNS INCORPORATED FPAC**

ADDRESS (Number and street) (Check if address is changed)  
**700 CENTRAL AVENUE**  
**LOUISVILLE KY 40208**  
 CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS  
**nhanning@kyderby.com**

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER  
**5026384439**

2. DATE **01 / 30 / 2006**

3. FEC IDENTIFICATION NUMBER **C C00331942**

4. IS THIS STATEMENT  NEW (N) OR  AMENDED (A)

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

Type or Print Name of Treasurer **Bradley K Blackwell**

Signature of Treasurer Electronically Filed by **Bradley K Blackwell** Date **01 / 30 / 2006**

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

5. TYPE OF COMMITTEE (Check One)

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate \_\_\_\_\_

Candidate Party Affiliation	Office Sought:	House	Senate	President	State District
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- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate \_\_\_\_\_

- (d) This committee is a \_\_\_\_\_ (National, State (or subordinate) committee of the \_\_\_\_\_ (Democratic, Republican, etc.) Party.

- (e)  This committee is a separate segregated fund

- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

\_\_\_\_\_  
\_\_\_\_\_

Mailing Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ - \_\_\_\_\_

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship \_\_\_\_\_

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

Write or Type Committee Name

**CHURCHILL DOWNS INCORPORATED FPAC**

7. **Custodian of Records:** Identify by name, address, (phone number -- optional), and position of the person in possession of Committee books and records.

Full Name **Bradley K Blackwell**

Mailing Address **700 Central Avenue**

**Louisville KY 40208**

Title or Position ▼ **CITY ▲ STATE ▲ ZIP CODE ▲**

Telephone number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer **Bradley K Blackwell**

Mailing Address **700 Central Avenue**

**Louisville KY 40208**

Title or Position ▼ **CITY ▲ STATE ▲ ZIP CODE ▲**

Telephone number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Full Name of Designated Agent **Bradley K Blackwell**

Mailing Address **700 Central Avenue**

**Louisville KY 40208**

Title or Position ▼ **CITY ▲ STATE ▲ ZIP CODE ▲**

**Treasurer** Telephone number **502** - **636** - **4419**

