

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
Bluegrass Committee

ADDRESS (number and street) 400 N Capitol St, NW, #585
 Check if different than previously reported. (ACC)
Washington DC 20001

2. **FEC IDENTIFICATION NUMBER** C00235655
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 (12G)
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 01 01 2007 through 06 30 2007

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 Electronically Filed by Larry Steinberg Date 07 19 2007

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**

Write or Type Committee Name
Bluegrass Committee

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		564372.36
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	564372.36									
(c) Total Receipts (from Line 19)	115547.85	115547.85								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	679920.21	679920.21								
7. Total Disbursements (from Line 31)	257606.91	257606.91								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	422313.30	422313.30								
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**

Write or Type Committee Name
Bluegrass Committee

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

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)	5500.00	5500.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	5500.00	5500.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	107000.00	107000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	112500.00	112500.00
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	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	3047.85	3047.85
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))	115547.85	115547.85
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	115547.85	115547.85

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) 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.....	66606.91	66606.91
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	66606.91	66606.91
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	185000.00	185000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	5000.00	5000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	5000.00	5000.00
29. Other Disbursements.....	1000.00	1000.00
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))..	257606.91	257606.91
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	257606.91	257606.91

DETAILED SUMMARY PAGE
of Disbursements

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	112500.00	112500.00
34. Total Contribution Refunds (from Line 28(d))	5000.00	5000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	107500.00	107500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	66606.91	66606.91
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	66606.91	66606.91

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 57
	<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	

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

Full Name (Last, First, Middle Initial) A. AT&T Inc. Federal PAC		Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2007	
Mailing Address 175 East Houston, Room 7-A-50		Transaction ID: 70703.C3418	
City State Zip Code San Antonio TX 78205	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C C00109017		Receipt	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) B. Automotive Free Intl Trade PAC		Date of Receipt M M / D D / Y Y Y Y 06 / 07 / 2007	
Mailing Address 1625 Prince St., Ste. 225		Transaction ID: 70703.C3428	
City State Zip Code Alexandria VA 22314-2882	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. C C00250399		Receipt	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) C. BAE Systems USA PAC		Date of Receipt M M / D D / Y Y Y Y 03 / 28 / 2007	
Mailing Address 1300 17th St. N		Transaction ID: 70703.C3416	
City State Zip Code Arlington VA 22209-3803	Amount of Each Receipt this Period 2000.00		
FEC ID number of contributing federal political committee. C C00281212		Receipt	
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Aggregate Year-to-Date ▼ 2000.00		

SUBTOTAL of Receipts This Page (optional) ▶	12000.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 57		
	<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

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NAME OF COMMITTEE (In Full)
Bluegrass Committee

Full Name (Last, First, Middle Initial) A. Bank of America Corporation PAC		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 7
Mailing Address 600 Peachtree St NE, 3rd Floor		Transaction ID: 70703.C3405
City State Zip Code Atlanta GA 30308-2219	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00043489		Receipt
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. Brown Forman PAC		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 7
Mailing Address Post Office Box 1080		Transaction ID: 70703.C3410
City State Zip Code Louisville KY 40201	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00059733		Receipt
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) C. BUILD PAC		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 7
Mailing Address 1201 15th Street, NW		Transaction ID: 70703.C3411
City State Zip Code Washington DC 20005	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00000901		Receipt
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	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 57
	<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. Capital One PAC Mailing Address 1680 Capital One Drive		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 7 Transaction ID: 70703.C3406
City State Zip Code McLean VA 22102	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00326595		Receipt
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. Capital One PAC Mailing Address 1680 Capital One Drive		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 7 Transaction ID: 70703.C3413
City State Zip Code McLean VA 22102	Amount of Each Receipt this Period 1500.00	
FEC ID number of contributing federal political committee. C C00326595		Receipt
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4000.00	

Full Name (Last, First, Middle Initial) C. Clear Channel Communications, Inc. PAC Mailing Address 200 E. Basse Road		Date of Receipt M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 0 7 Transaction ID: 70703.C3422
City State Zip Code San Antonio TX 78209	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00279216		Receipt
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	

SUBTOTAL of Receipts This Page (optional)	▶	9000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 57
	<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. Credit Union PAC		Date of Receipt M M / D D / Y Y Y Y 03 / 20 / 2007
Mailing Address 601 Pennsylvania Avenue, NW South Bldg., Suite 600		Transaction ID: 70703.C3412
City Washington State DC Zip Code 20004	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00007880		Receipt
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. Duke Energy Corporation PAC		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2007
Mailing Address 422 South Church Street, PBO5D		Transaction ID: 70703.C3427
City Charlotte State NC Zip Code 28202	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00083535		Receipt
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) C. Limited Brands PAC		Date of Receipt M M / D D / Y Y Y Y 03 / 07 / 2007
Mailing Address 3 Limited Pkwy		Transaction ID: 70703.C3409
City Columbus State OH Zip Code 43230-1467	Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C C00214338		Receipt
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	

SUBTOTAL of Receipts This Page (optional) ▶	10000.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 57
	<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)
Metlife Inc. Political Part. Fund A

Mailing Address 1620 L St NW Ste 800

City Washington State DC Zip Code 20036-5629

FEC ID number of contributing federal political committee. **C** C00040923

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
0 3 / 2 8 / 2 0 0 7

Transaction ID: 70703.C3417

Amount of Each Receipt this Period
5000.00

Receipt

B. Full Name (Last, First, Middle Initial)
NatL Assn. of Insurance and Financial

Mailing Address 2901 Telestar Ct

City Falls Church State VA Zip Code 22042-1260

FEC ID number of contributing federal political committee. **C** C00005249

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
0 3 / 2 1 / 2 0 0 7

Transaction ID: 70703.C3414

Amount of Each Receipt this Period
1000.00

Receipt

C. Full Name (Last, First, Middle Initial)
National Apartment Assn. PAC

Mailing Address 201 N Union St., Suite 200

City Alexandria State VA Zip Code 22314-2642

FEC ID number of contributing federal political committee. **C** C00113241

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
M M / D D / Y Y Y Y
0 6 / 2 9 / 2 0 0 7

Transaction ID: 70703.C3433

Amount of Each Receipt this Period
3000.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	9000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 57
	<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. National Multi Housing Council PAC Mailing Address 1850 M St NW City Washington State DC Zip Code 20036-5803 FEC ID number of contributing federal political committee. C C00130773 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		Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 7 Transaction ID: 70703.C3431 Amount of Each Receipt this Period 5000.00 Receipt
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Full Name (Last, First, Middle Initial) B. NCTA PAC Mailing Address 1724 Massachusetts Ave NW City Washington State DC Zip Code 20036-1903 FEC ID number of contributing federal political committee. C C00010082 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		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 1 / 2 0 0 7 Transaction ID: 70703.C3415 Amount of Each Receipt this Period 5000.00 Receipt
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Full Name (Last, First, Middle Initial) C. New York Life PAC Mailing Address 51 Madison Ave City New York State NY Zip Code 10010-1603 FEC ID number of contributing federal political committee. C C00158881 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		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 7 Transaction ID: 70703.C3404 Amount of Each Receipt this Period 5000.00 Receipt
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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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 57		
	<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

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NAME OF COMMITTEE (In Full)
Bluegrass Committee

A. Full Name (Last, First, Middle Initial)
NTRA PAC, Inc.
Mailing Address 2525 Harrodsburg Road
City Lexington State KY Zip Code 40504
FEC ID number of contributing federal political committee. **C** C00360008
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
0 5 / 2 9 / 2 0 0 7
Transaction ID: 70703.C3426
Amount of Each Receipt this Period
5000.00
Receipt

B. Full Name (Last, First, Middle Initial)
Outback Steakhouse Inc. PAC
Mailing Address 2202 N West Shore Blvd, Floor 5
City Tampa State FL Zip Code 33607-5747
FEC ID number of contributing federal political committee. **C** C00253153
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
0 4 / 1 7 / 2 0 0 7
Transaction ID: 70703.C3421
Amount of Each Receipt this Period
5000.00
Receipt

C. Full Name (Last, First, Middle Initial)
PriceWaterhouseCoopers PAC
Mailing Address 1301 K Street, NW
City Washington State DC Zip Code 20005
FEC ID number of contributing federal political committee. **C** C00107235
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
0 3 / 3 0 / 2 0 0 7
Transaction ID: 70703.C3419
Amount of Each Receipt this Period
5000.00
Receipt

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 57
	<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)
Raytheon PAC

Mailing Address 1100 Wilson Blvd, Ste. 1500

City State Zip Code
Arlington VA 22209-2249

FEC ID number of contributing federal political committee. **C** C00097568

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
06 / 26 / 2007

Transaction ID: 70703.C3432

Amount of Each Receipt this Period
2500.00

Receipt

B. Full Name (Last, First, Middle Initial)
RJR Political Action Committee

Mailing Address Mr. John H. Fish
Post Office Box 718

City State Zip Code
Winston-Salem NC 27102

FEC ID number of contributing federal political committee. **C** C00042002

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
02 / 13 / 2007

Transaction ID: 70703.C3407

Amount of Each Receipt this Period
5000.00

Receipt

C. Full Name (Last, First, Middle Initial)
Triad Good Government Fund

Mailing Address 5800 Tennyson Pkwy

City State Zip Code
Plano TX 75024-3548

FEC ID number of contributing federal political committee. **C** C00347062

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
06 / 29 / 2007

Transaction ID: 70703.C3434

Amount of Each Receipt this Period
2500.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	10000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 14 / 57
	(check only one)	
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 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. Washington Group International PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 2 6 / 2 0 0 7
Mailing Address 2345 Crystal Drive Suite 708		Transaction ID: 70703.C3423
City Arlington State VA Zip Code 22202	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00097550		Receipt
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. Wellpoint, Inc. PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 2 1 / 2 0 0 7
Mailing Address 120 Monument Cir		Transaction ID: 70703.C3430
City Indianapolis State IN Zip Code 46204-4906	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C C00197228		Receipt
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) C. WSWA PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 7 / 2 0 0 7
Mailing Address 805 15th Street, NW Suite 430		Transaction ID: 70703.C3429
City Washington State DC Zip Code 20005-2273	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. C C00147173		Receipt
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional) ▶	12000.00
TOTAL This Period (last page this line number only) ▶	107000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 57
	<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. David S. Barlow		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 640 Lewis Wharf		Transaction ID: 70703.C3420
City State Zip Code Boston MA 02110-3924	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Molecular Insight	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. David S. Barlow		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 7
Mailing Address 640 Lewis Wharf		Transaction ID: 70703.C3424
City State Zip Code Boston MA 02110-3924	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Molecular Insight	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) C. John E. McCray		Date of Receipt M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 7
Mailing Address PO Box 1275		Transaction ID: 70703.C3425
City State Zip Code East Otis MA 01029-1275	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		Receipt
Name of Employer Molecular Insight	Occupation COO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶	(Empty field)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 16 / 57	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 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)
Leslie H. Wexner

Mailing Address 3 Limited Pkwy

City State Zip Code
Columbus OH 43230-1467

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

Name of Employer Occupation
Limited Brands CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
MM / DD / YYYY
03 / 07 / 2007

Transaction ID: 70703.C3408

Amount of Each Receipt this Period
2500.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	2500.00
TOTAL This Period (last page this line number only)	▶	5500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 57
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Bluegrass Committee

Full Name (Last, First, Middle Initial) Congressional Bank		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 1 / 2 0 0 7	
Mailing Address 7963 Tuckerman Ln		Transaction ID: 70703.C3446	
City Potomac	State MD	Zip Code 20854-3243	Amount of Each Receipt this Period 67.02
FEC ID number of contributing federal political committee. C		Other Receipt	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 67.02		

Full Name (Last, First, Middle Initial) Congressional Bank		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 7	
Mailing Address 7963 Tuckerman Ln		Transaction ID: 70703.C3445	
City Potomac	State MD	Zip Code 20854-3243	Amount of Each Receipt this Period 86.20
FEC ID number of contributing federal political committee. C		Other Receipt	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 153.22		

Full Name (Last, First, Middle Initial) Congressional Bank		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 7	
Mailing Address 7963 Tuckerman Ln		Transaction ID: 70703.C3444	
City Potomac	State MD	Zip Code 20854-3243	Amount of Each Receipt this Period 26.53
FEC ID number of contributing federal political committee. C		Other Receipt	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 179.75		

SUBTOTAL of Receipts This Page (optional) ▶	179.75
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 57
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Bluegrass Committee

Full Name (Last, First, Middle Initial) Congressional Bank		Date of Receipt M M / D D / Y Y Y Y Y 03 / 30 / 2007	
Mailing Address 7963 Tuckerman Ln		Transaction ID: 70703.C3443	
City State Zip Code Potomac MD 20854-3243	Amount of Each Receipt this Period 96.25		
FEC ID number of contributing federal political committee. C	Other Receipt		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 276.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) Congressional Bank		Date of Receipt M M / D D / Y Y Y Y Y 04 / 30 / 2007	
Mailing Address 7963 Tuckerman Ln		Transaction ID: 70703.C3442	
City State Zip Code Potomac MD 20854-3243	Amount of Each Receipt this Period 189.41		
FEC ID number of contributing federal political committee. C	Other Receipt		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 465.41		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) Congressional Bank		Date of Receipt M M / D D / Y Y Y Y Y 05 / 31 / 2007	
Mailing Address 7963 Tuckerman Ln		Transaction ID: 70703.C3441	
City State Zip Code Potomac MD 20854-3243	Amount of Each Receipt this Period 216.88		
FEC ID number of contributing federal political committee. C	Other Receipt		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 682.29		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	502.54
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 57
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Bluegrass Committee

Full Name (Last, First, Middle Initial) A. Congressional Bank		Date of Receipt M M / D D / Y Y Y Y 06 / 29 / 2007	
Mailing Address 7963 Tuckerman Ln		Transaction ID: 70703.C3447	
City State Zip Code Potomac MD 20854-3243	Amount of Each Receipt this Period 239.06		
FEC ID number of contributing federal political committee. C	Other Receipt		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 921.35		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Republic Bank & Trust Co.		Date of Receipt M M / D D / Y Y Y Y 01 / 31 / 2007	
Mailing Address 601 W Market St		Transaction ID: 70703.C3440	
City State Zip Code Louisville KY 40202-2745	Amount of Each Receipt this Period 533.66		
FEC ID number of contributing federal political committee. C	Other Receipt		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 533.66		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Republic Bank & Trust Co.		Date of Receipt M M / D D / Y Y Y Y 02 / 28 / 2007	
Mailing Address 601 W Market St		Transaction ID: 70703.C3439	
City State Zip Code Louisville KY 40202-2745	Amount of Each Receipt this Period 299.72		
FEC ID number of contributing federal political committee. C	Other Receipt		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 833.38		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	1072.44
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 57
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Bluegrass Committee

Full Name (Last, First, Middle Initial) Republic Bank & Trust Co.		Date of Receipt M M / D D / Y Y Y Y 03 / 30 / 2007	
Mailing Address 601 W Market St		Transaction ID: 70703.C3438	
City State Zip Code Louisville KY 40202-2745	Amount of Each Receipt this Period 332.23		
FEC ID number of contributing federal political committee. C	Other Receipt		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1165.61		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) Republic Bank & Trust Co.		Date of Receipt M M / D D / Y Y Y Y 04 / 30 / 2007	
Mailing Address 601 W Market St		Transaction ID: 70703.C3437	
City State Zip Code Louisville KY 40202-2745	Amount of Each Receipt this Period 321.93		
FEC ID number of contributing federal political committee. C	Other Receipt		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1487.54		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) Republic Bank & Trust Co.		Date of Receipt M M / D D / Y Y Y Y 05 / 31 / 2007	
Mailing Address 601 W Market St		Transaction ID: 70703.C3436	
City State Zip Code Louisville KY 40202-2745	Amount of Each Receipt this Period 333.08		
FEC ID number of contributing federal political committee. C	Other Receipt		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 1820.62		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	987.24
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 21 / 57	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Bluegrass Committee

A. Full Name (Last, First, Middle Initial)
Republic Bank & Trust Co.

Mailing Address 601 W Market St

City	State	Zip Code
Louisville	KY	40202-2745

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

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2126.50

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	9	/	2	0	0	7

Transaction ID: 70703.C3435

Amount of Each Receipt this Period
305.88

Other Receipt

SUBTOTAL of Receipts This Page (optional)	▶	305.88
TOTAL This Period (last page this line number only)	▶	3047.85

**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 22 / 57

<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. American Express		Transaction ID: 70703.E2174 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address PO Box 1270		Amount of Each Disbursement this Period 600.00
City Newark State NJ Zip Code 07101-1270	CREDIT CARD: SEE BELOW	
Purpose of Disbursement CREDIT CARD: SEE BELOW Candidate Name		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) ▼

Full Name (Last, First, Middle Initial) B. Aristotle International		Transaction ID: 70705.E2206 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7
Mailing Address 205 Pennsylvania Ave SE		Amount of Each Disbursement this Period 600.00
City Washington State DC Zip Code 20003-1182	[MEMO ITEM] MEMO: SOFTWARE	
Purpose of Disbursement SOFTWARE Candidate Name		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) ▼

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: 70703.E2178 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 7
Mailing Address PO Box 1270		Amount of Each Disbursement this Period 141.90
City Newark State NJ Zip Code 07101-1270	CREDIT CARD: SEE BELOW	
Purpose of Disbursement CREDIT CARD: SEE BELOW Candidate Name		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) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	741.90
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 23 / 57

<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. Southwest Airlines		Transaction ID: 70705.E2207 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 7
Mailing Address 2702 Love Field Dr		Amount of Each Disbursement this Period 141.90
City Dallas State TX Zip Code 75235-1908	[MEMO ITEM] MEMO: AIR TRAVEL	
Purpose of Disbursement AIR TRAVEL Candidate Name		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) ▼

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: 70703.E2186 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 7
Mailing Address PO Box 1270		Amount of Each Disbursement this Period 2174.70
City Newark State NJ Zip Code 07101-1270	CREDIT CARD: SEE BELOW	
Purpose of Disbursement CREDIT CARD: SEE BELOW Candidate Name		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) ▼

Full Name (Last, First, Middle Initial) C. Aristotle International		Transaction ID: 70705.E2213 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 7
Mailing Address 205 Pennsylvania Ave SE		Amount of Each Disbursement this Period 600.00
City Washington State DC Zip Code 20003-1182	[MEMO ITEM] MEMO: SOFTWARE	
Purpose of Disbursement SOFTWARE Candidate Name		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) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	2174.70
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 24 / 57

<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. Northwest Airlines		Transaction ID: 70705.E2215 Date of Disbursement MM / DD / YYYY 06 / 21 / 2007
Mailing Address 2700 Lone Oak Pkwy		Amount of Each Disbursement this Period 790.30
City Saint Paul State MN Zip Code 55121-1546	[MEMO ITEM] MEMO: AIR TRAVEL	
Purpose of Disbursement AIR TRAVEL Candidate Name		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) ▼

Full Name (Last, First, Middle Initial) B. United Airlines		Transaction ID: 70705.E2214 Date of Disbursement MM / DD / YYYY 06 / 21 / 2007
Mailing Address 1200 E Algonquin Rd		Amount of Each Disbursement this Period 784.40
City Arlington Heights State IL Zip Code 60005-4712	[MEMO ITEM] MEMO: AIR TRAVEL	
Purpose of Disbursement AIR TRAVEL Candidate Name		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) ▼

Full Name (Last, First, Middle Initial) C. Business Card		Transaction ID: 70703.E2168 Date of Disbursement MM / DD / YYYY 03 / 20 / 2007
Mailing Address PO Box 15710		Amount of Each Disbursement this Period 182.85
City Wilmington State DE Zip Code 19886-5710	CREDIT CARD: SEE BELOW	
Purpose of Disbursement CREDIT CARD: SEE BELOW Candidate Name		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) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	182.85
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

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

Full Name (Last, First, Middle Initial) A. FedEx		Transaction ID: 70705.E2203 Date of Disbursement MM / DD / YYYY 03 / 20 / 2007	
Mailing Address Post Office Box 1140		Amount of Each Disbursement this Period 28.96	
City Memphis State TN Zip Code 38101-1140	Purpose of Disbursement EXPRESS SHIPPING	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] MEMO: EXPRESS SHIPPING	

Full Name (Last, First, Middle Initial) B. Verizon Wireless		Transaction ID: 70705.E2204 Date of Disbursement MM / DD / YYYY 03 / 20 / 2007	
Mailing Address PO Box 17464		Amount of Each Disbursement this Period 153.89	
City Baltimore State MD Zip Code 21297-1464	Purpose of Disbursement BLACKBERRY EXPENSE	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] MEMO: BLACKBERRY EXPENSE	

Full Name (Last, First, Middle Initial) C. Business Card		Transaction ID: 70703.E2173 Date of Disbursement MM / DD / YYYY 04 / 24 / 2007	
Mailing Address PO Box 15710		Amount of Each Disbursement this Period 47.58	
City Wilmington State DE Zip Code 19886-5710	Purpose of Disbursement CREDIT CARD: SEE BELOW	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) ▼	CREDIT CARD: SEE BELOW	

SUBTOTAL of Disbursements This Page (optional) ▶	47.58
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)
Bluegrass Committee

Full Name (Last, First, Middle Initial) A. FedEx		Transaction ID: 70705.E2205 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 7	
Mailing Address Post Office Box 1140		Amount of Each Disbursement this Period 47.58	
City Memphis State TN Zip Code 38101-1140	Purpose of Disbursement EXPRESS SHIPPING		
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type		

[MEMO ITEM]
MEMO: EXPRESS SHIPPING

Full Name (Last, First, Middle Initial) B. Business Card		Transaction ID: 70703.E2179 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 7	
Mailing Address PO Box 15710		Amount of Each Disbursement this Period 920.57	
City Wilmington State DE Zip Code 19886-5710	Purpose of Disbursement CREDIT CARD: SEE BELOW		
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type		

CREDIT CARD: SEE BELOW

Full Name (Last, First, Middle Initial) C. FedEx		Transaction ID: 70705.E2212 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 7	
Mailing Address Post Office Box 1140		Amount of Each Disbursement this Period 35.11	
City Memphis State TN Zip Code 38101-1140	Purpose of Disbursement EXPRESS SHIPPING		
Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Category/Type		

[MEMO ITEM]
MEMO: EXPRESS SHIPPING

SUBTOTAL of Disbursements This Page (optional) ▶	920.57
TOTAL This Period (last page this line number only) ▶	[Empty Box]

**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)
Bluegrass Committee

Full Name (Last, First, Middle Initial) A. H&R Block		Transaction ID: 70705.E2210 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 7
Mailing Address 4727 Wisconsin Avenue		Amount of Each Disbursement this Period 328.50
City Washington State DC Zip Code 20016-	[MEMO ITEM] MEMO: TAX PREPARATION	
Purpose of Disbursement TAX PREPARATION Candidate Name		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) ▼

Full Name (Last, First, Middle Initial) B. Hewlett Packard		Transaction ID: 70705.E2211 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 7
Mailing Address 3000 Hanover St		Amount of Each Disbursement this Period 342.75
City Palo Alto State CA Zip Code 94304-1112	[MEMO ITEM] MEMO: COMPUTER EQUIPMENT	
Purpose of Disbursement COMPUTER EQUIPMENT Candidate Name		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) ▼

Full Name (Last, First, Middle Initial) C. Office Depot		Transaction ID: 70705.E2209 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 7
Mailing Address Post Office Box 9020		Amount of Each Disbursement this Period 137.52
City Des Moines State IA Zip Code 50368-9020	[MEMO ITEM] MEMO: OFFICE SUPPLIES	
Purpose of Disbursement OFFICE SUPPLIES Candidate Name		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) ▼

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)

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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)
Bluegrass Committee

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Transaction ID: 70705.E2208 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 7
Mailing Address PO Box 17464		Amount of Each Disbursement this Period 76.69
City Baltimore State MD Zip Code 21297-1464	Purpose of Disbursement BLACKBERRY EXPENSE Candidate Name 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] MEMO: BLACKBERRY EXPENSE

Full Name (Last, First, Middle Initial) B. Business Card		Transaction ID: 70703.E2187 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 7
Mailing Address PO Box 15710		Amount of Each Disbursement this Period 1028.87
City Wilmington State DE Zip Code 19886-5710	Purpose of Disbursement CREDIT CARD: SEE BELOW Candidate Name 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) ▼	CREDIT CARD: SEE BELOW

Full Name (Last, First, Middle Initial) C. American Airlines		Transaction ID: 70705.E2219 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 7
Mailing Address 4333 Amon Carter Blvd.		Amount of Each Disbursement this Period 309.40
City Fort Worth State TX Zip Code 76155-2605	Purpose of Disbursement AIR TRAVEL Candidate Name 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] MEMO: AIR TRAVEL

SUBTOTAL of Disbursements This Page (optional) ▶	1028.87
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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)
Bluegrass Committee

A. FedEx Full Name (Last, First, Middle Initial) Mailing Address Post Office Box 1140 City Memphis State TN Zip Code 38101-1140 Purpose of Disbursement EXPRESS SHIPPING Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Transaction ID: 70705.E2216 Date of Disbursement 06 / 21 / 2007 Amount of Each Disbursement this Period 58.43 [MEMO ITEM] MEMO: EXPRESS SHIPPING
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Category/ Type

B. Office Depot Full Name (Last, First, Middle Initial) Mailing Address Post Office Box 9020 City Des Moines State IA Zip Code 50368-9020 Purpose of Disbursement OFFICE SUPPLIES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Transaction ID: 70705.E2218 Date of Disbursement 06 / 21 / 2007 Amount of Each Disbursement this Period 89.30 [MEMO ITEM] MEMO: OFFICE SUPPLIES
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Category/ Type

C. Southwest Airlines Full Name (Last, First, Middle Initial) Mailing Address 2702 Love Field Dr City Dallas State TX Zip Code 75235-1908 Purpose of Disbursement AIR TRAVEL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Transaction ID: 70705.E2220 Date of Disbursement 06 / 21 / 2007 Amount of Each Disbursement this Period 494.80 [MEMO ITEM] MEMO: AIR TRAVEL
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Category/ Type

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)

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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)
Bluegrass Committee

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Transaction ID: 70705.E2217 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 7
Mailing Address PO Box 17464		Amount of Each Disbursement this Period 76.94
City Baltimore State MD Zip Code 21297-1464	[MEMO ITEM] MEMO: BLACKBERRY EXPENSE	
Purpose of Disbursement BLACKBERRY EXPENSE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Huckaby Davis Lisker		Transaction ID: 70109.E2115 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 9 / 2 0 0 7
Mailing Address 228 S Washington St. Ste. 115		Amount of Each Disbursement this Period 2500.00
City Alexandria State VA Zip Code 22314-5404	COMPLIANCE CONSULTANT	
Purpose of Disbursement COMPLIANCE CONSULTANT		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Mrs. Alison Kinnahan		Transaction ID: 70109.E2114 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 8 / 2 0 0 7
Mailing Address 400 N Capitol St NW Ste 585		Amount of Each Disbursement this Period 5806.17
City Washington State DC Zip Code 20001-1502	FUNDRAISING CONSULTANT	
Purpose of Disbursement FUNDRAISING CONSULTANT		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	8306.17
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)
Bluegrass Committee

Full Name (Last, First, Middle Initial) A. Mrs. Alison Kinnahan		Transaction ID: 70109.E2113 Date of Disbursement MM / DD / YYYY 01 / 08 / 2007
Mailing Address 400 N Capitol St NW Ste 585		Amount of Each Disbursement this Period 133.25
City Washington State DC Zip Code 20001-1502	EXPENSES-CELL PHONE LONG DISTANCE	
Purpose of Disbursement EXPENSES-CELL PHONE LONG DISTANCE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Mrs. Alison Kinnahan		Transaction ID: 70131.E2160 Date of Disbursement MM / DD / YYYY 01 / 29 / 2007
Mailing Address 400 N Capitol St NW Ste 585		Amount of Each Disbursement this Period 12.93
City Washington State DC Zip Code 20001-1502	EXPENSES-POSTAGE COPIES CELL PHONE	
Purpose of Disbursement EXPENSES-POSTAGE COPIES CELL PHONE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Mrs. Alison Kinnahan		Transaction ID: 70131.E2159 Date of Disbursement MM / DD / YYYY 01 / 29 / 2007
Mailing Address 400 N Capitol St NW Ste 585		Amount of Each Disbursement this Period 5806.17
City Washington State DC Zip Code 20001-1502	FUNDRAISING CONSULTANT	
Purpose of Disbursement FUNDRAISING CONSULTANT		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	5952.35
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)
Bluegrass Committee

Full Name (Last, First, Middle Initial) A. Mrs. Alison Kinnahan		Transaction ID: 70703.E2165 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 7
Mailing Address 400 N Capitol St NW Ste 585		Amount of Each Disbursement this Period 5839.92
City Washington State DC Zip Code 20001-1502	Category/ Type FUNDRAISING CONSULTANT	
Purpose of Disbursement FUNDRAISING CONSULTANT		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Mrs. Alison Kinnahan		Transaction ID: 70703.E2164 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 5 / 2 0 0 7
Mailing Address 400 N Capitol St NW Ste 585		Amount of Each Disbursement this Period 128.90
City Washington State DC Zip Code 20001-1502	Category/ Type EXPENSES-POSTAGE COPIES CELL PHONE	
Purpose of Disbursement EXPENSES-POSTAGE COPIES CELL PHONE		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Mrs. Alison Kinnahan		Transaction ID: 70703.E2169 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 9 / 2 0 0 7
Mailing Address 400 N Capitol St NW Ste 585		Amount of Each Disbursement this Period 5839.92
City Washington State DC Zip Code 20001-1502	Category/ Type FUNDRAISING CONSULTANT	
Purpose of Disbursement FUNDRAISING CONSULTANT		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	11808.74
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)
Bluegrass Committee

Full Name (Last, First, Middle Initial) A. Mrs. Alison Kinnahan		Transaction ID: 70703.E2170 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 9 / 2 0 0 7
Mailing Address 400 N Capitol St NW Ste 585		Amount of Each Disbursement this Period 24.77
City Washington State DC Zip Code 20001-1502	EXPENSES-POSTAGE COPIES CELL PHONE	
Purpose of Disbursement EXPENSES-POSTAGE COPIES CELL PHONE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Mrs. Alison Kinnahan		Transaction ID: 70703.E2175 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 7
Mailing Address 400 N Capitol St NW Ste 585		Amount of Each Disbursement this Period 5839.92
City Washington State DC Zip Code 20001-1502	FUNDRAISING CONSULTANT	
Purpose of Disbursement FUNDRAISING CONSULTANT		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Mrs. Alison Kinnahan		Transaction ID: 70703.E2176 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 3 / 2 0 0 7
Mailing Address 400 N Capitol St NW Ste 585		Amount of Each Disbursement this Period 39.62
City Washington State DC Zip Code 20001-1502	EXPENSES-POSTAGE COPIES CELL PHONE	
Purpose of Disbursement EXPENSES-POSTAGE COPIES CELL PHONE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	5904.31
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. Mrs. Alison Kinnahan		Transaction ID: 70703.E2181 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 7
Mailing Address 400 N Capitol St NW Ste 585		Amount of Each Disbursement this Period 5839.92
City Washington State DC Zip Code 20001-1502	FUNDRAISING CONSULTANT	
Purpose of Disbursement FUNDRAISING CONSULTANT Candidate Name		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) ▼

Full Name (Last, First, Middle Initial) B. Mr. Thomas Maxwell		Transaction ID: 70109.E2116 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 9 / 2 0 0 7
Mailing Address 5127 Nebraska Avenue, NW		Amount of Each Disbursement this Period 3316.43
City Washington State DC Zip Code 20008-	COMPLIANCE CONSULTANT	
Purpose of Disbursement COMPLIANCE CONSULTANT Candidate Name		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) ▼

Full Name (Last, First, Middle Initial) C. Mr. Thomas Maxwell		Transaction ID: 70703.E2161 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 5 / 2 0 0 7
Mailing Address 5127 Nebraska Avenue, NW		Amount of Each Disbursement this Period 3220.08
City Washington State DC Zip Code 20008-	COMPLIANCE CONSULTANT	
Purpose of Disbursement COMPLIANCE CONSULTANT Candidate Name		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) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	12376.43
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)
Bluegrass Committee

Full Name (Last, First, Middle Initial) A. Mr. Thomas Maxwell		Transaction ID: 70703.E2166 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 2 / 2 0 0 7
Mailing Address 5127 Nebraska Avenue, NW		Amount of Each Disbursement this Period 3220.08
City Washington State DC Zip Code 20008-	Purpose of Disbursement COMPLIANCE CONSULTANT Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	COMPLIANCE CONSULTANT

Full Name (Last, First, Middle Initial) B. Mr. Thomas Maxwell		Transaction ID: 70703.E2171 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 5127 Nebraska Avenue, NW		Amount of Each Disbursement this Period 3220.08
City Washington State DC Zip Code 20008-	Purpose of Disbursement COMPLIANCE CONSULTANT Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	COMPLIANCE CONSULTANT

Full Name (Last, First, Middle Initial) C. Mr. Thomas Maxwell		Transaction ID: 70703.E2177 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 7
Mailing Address 5127 Nebraska Avenue, NW		Amount of Each Disbursement this Period 3220.08
City Washington State DC Zip Code 20008-	Purpose of Disbursement COMPLIANCE CONSULTANT Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	COMPLIANCE CONSULTANT

SUBTOTAL of Disbursements This Page (optional) ▶	9660.24
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)
Bluegrass Committee

Full Name (Last, First, Middle Initial) A. Mr. Thomas Maxwell		Transaction ID: 70703.E2183 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 1 / 2 0 0 7
Mailing Address 5127 Nebraska Avenue, NW		Amount of Each Disbursement this Period 3220.08
City Washington State DC Zip Code 20008-	Category/ Type COMPLIANCE CONSULTANT	
Purpose of Disbursement COMPLIANCE CONSULTANT		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. MBNA America		Transaction ID: 70124.E2124 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 9 / 2 0 0 7
Mailing Address PO Box 15469		Amount of Each Disbursement this Period 215.63
City Wilmington State DE Zip Code 19886-5469	Category/ Type CREDIT CARD: SEE BELOW	
Purpose of Disbursement CREDIT CARD: SEE BELOW		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. FedEx		Transaction ID: 70705.E2195 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 9 / 2 0 0 7
Mailing Address Post Office Box 1140		Amount of Each Disbursement this Period 139.10
City Memphis State TN Zip Code 38101-1140	Category/ Type [MEMO ITEM] MEMO: EXPRESS SHIPPING	
Purpose of Disbursement EXPRESS SHIPPING		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3435.71
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. Verizon Wireless		Transaction ID: 70705.E2194 Date of Disbursement MM / DD / YYYY 01 / 19 / 2007
Mailing Address PO Box 17464		Amount of Each Disbursement this Period 76.53
City Baltimore State MD Zip Code 21297-1464	Purpose of Disbursement BLACKBERRY EXPENSE Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: BLACKBERRY EXPENSE

Full Name (Last, First, Middle Initial) B. MBNA America		Transaction ID: 70124.E2125 Date of Disbursement MM / DD / YYYY 01 / 23 / 2007
Mailing Address PO Box 15469		Amount of Each Disbursement this Period 494.43
City Wilmington State DE Zip Code 19886-5469	Purpose of Disbursement CREDIT CARD: SEE BELOW Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	CREDIT CARD: SEE BELOW

Full Name (Last, First, Middle Initial) C. 701 Restaurant		Transaction ID: 70705.E2199 Date of Disbursement MM / DD / YYYY 01 / 23 / 2007
Mailing Address 701 Pennsylvania Ave NW		Amount of Each Disbursement this Period 203.75
City Washington State DC Zip Code 20004-2608	Purpose of Disbursement FOOD AND BEVERAGE Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	[MEMO ITEM] MEMO: FOOD AND BEVERAGE

SUBTOTAL of Disbursements This Page (optional) ▶	494.43
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)
Bluegrass Committee

Full Name (Last, First, Middle Initial) A. MBNA America		Transaction ID: 70705.E2197 Date of Disbursement 01 / 23 / 2007
Mailing Address PO Box 15469		Amount of Each Disbursement this Period 14.50
City Wilmington State DE Zip Code 19886-5469	Purpose of Disbursement SERVICE CHARGE Candidate Name 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] MEMO: SERVICE CHARGE

Full Name (Last, First, Middle Initial) B. Market Inn Restaurant		Transaction ID: 70705.E2198 Date of Disbursement 01 / 23 / 2007
Mailing Address 200 E St SW		Amount of Each Disbursement this Period 178.84
City Washington State DC Zip Code 20024-3208	Purpose of Disbursement FOOD AND BEVERAGE Candidate Name 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] MEMO: FOOD AND BEVERAGE

Full Name (Last, First, Middle Initial) C. The Monocle		Transaction ID: 70705.E2196 Date of Disbursement 01 / 23 / 2007
Mailing Address 107 D Street, NE		Amount of Each Disbursement this Period 97.34
City Washington State DC Zip Code 20002-	Purpose of Disbursement FOOD AND BEVERAGE Candidate Name 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] MEMO: FOOD AND BEVERAGE

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

**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)
Bluegrass Committee

Full Name (Last, First, Middle Initial) A. MBNA America		Transaction ID: 70703.E2163 Date of Disbursement MM / DD / YYYY 02 / 20 / 2007
Mailing Address PO Box 15469		Amount of Each Disbursement this Period 420.83
City Wilmington	State DE	
Zip Code 19886-5469		CREDIT CARD: SEE BELOW
Purpose of Disbursement CREDIT CARD: SEE BELOW		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. FedEx		Transaction ID: 70705.E2202 Date of Disbursement MM / DD / YYYY 02 / 20 / 2007
Mailing Address Post Office Box 1140		Amount of Each Disbursement this Period 309.86
City Memphis	State TN	
Zip Code 38101-1140		[MEMO ITEM] MEMO: EXPRESS SHIPPING
Purpose of Disbursement EXPRESS SHIPPING		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. Office Depot		Transaction ID: 70705.E2201 Date of Disbursement MM / DD / YYYY 02 / 20 / 2007
Mailing Address Post Office Box 9020		Amount of Each Disbursement this Period 32.77
City Des Moines	State IA	
Zip Code 50368-9020		[MEMO ITEM] MEMO: OFFICE SUPPLIES
Purpose of Disbursement OFFICE SUPPLIES		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

SUBTOTAL of Disbursements This Page (optional) ▶	420.83
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)
Bluegrass Committee

Full Name (Last, First, Middle Initial) A. Verizon Wireless		Transaction ID: 70705.E2200 Date of Disbursement MM / DD / YYYY 02 / 20 / 2007
Mailing Address PO Box 17464		Amount of Each Disbursement this Period 78.20
City Baltimore State MD Zip Code 21297-1464	[MEMO ITEM] MEMO: BLACKBERRY EXPENSE	
Purpose of Disbursement BLACKBERRY EXPENSE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Republic Bank & Trust Co.		Transaction ID: 70703.E2167 Date of Disbursement MM / DD / YYYY 03 / 13 / 2007
Mailing Address 601 W Market St		Amount of Each Disbursement this Period 1550.00
City Louisville State KY Zip Code 40202-2745	2006 FEDERAL INCOME TAX	
Purpose of Disbursement 2006 FEDERAL INCOME TAX		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Mr. Larry J. Steinberg		Transaction ID: 70703.E2172 Date of Disbursement MM / DD / YYYY 04 / 10 / 2007
Mailing Address 1756 Dunaway Court		Amount of Each Disbursement this Period 1601.23
City Indianapolis State IN Zip Code 46228-3362	SEE BELOW: EXPENSE REIMBURSEMENT	
Purpose of Disbursement SEE BELOW: EXPENSE REIMBURSEMENT		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	3151.23
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)
Bluegrass Committee

Full Name (Last, First, Middle Initial)

A. Sony Style

Mailing Address 8702 Keystone Xing

City Indianapolis State IN Zip Code 46240-7621

Purpose of Disbursement
COMPUTER FOR FEC COMPLIANCE

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 70705.E2221

Date of Disbursement

03 / 28 / 2007

Amount of Each Disbursement this Period

1601.23

[MEMO ITEM]

MEMO: COMPUTER FOR FEC COMPLIANCE

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

66606.91

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. Alexander for Senate, Inc.		Transaction ID: 70131.E2129 Date of Disbursement 01 / 25 / 2007	
Mailing Address 231 Third Avenue North		Amount of Each Disbursement this Period 5000.00	
City Nashville State TN Zip Code 37201-	Purpose of Disbursement Category/Type		
Candidate Name LAMAR ALEXANDER	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 00			

Full Name (Last, First, Middle Initial) B. Alexander for Senate, Inc.		Transaction ID: 70131.E2130 Date of Disbursement 01 / 25 / 2007	
Mailing Address 231 Third Avenue North		Amount of Each Disbursement this Period 5000.00	
City Nashville State TN Zip Code 37201-	Purpose of Disbursement Category/Type		
Candidate Name LAMAR ALEXANDER	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 00			

Full Name (Last, First, Middle Initial) C. Friends of John Barrasso		Transaction ID: 70703.E2191 Date of Disbursement 06 / 27 / 2007	
Mailing Address 66 Canal Center Plz		Amount of Each Disbursement this Period 5000.00	
City Alexandria State VA Zip Code 22314-1539	Purpose of Disbursement Category/Type		
Candidate Name JOHN BARRASSO	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WY District: 00			

SUBTOTAL of Disbursements This Page (optional) ▶	15000.00
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)

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<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. Friends of John Barrasso		Transaction ID: 70703.E2190 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 7 / 2 0 0 7
Mailing Address 66 Canal Center Plz		Amount of Each Disbursement this Period 5000.00
City Alexandria State VA Zip Code 22314-1539	Category/ Type	
Purpose of Disbursement		
Candidate Name JOHN BARRASSO		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WY District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Chambliss for Senate		Transaction ID: 70131.E2131 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 7
Mailing Address PO Box 12469		Amount of Each Disbursement this Period 5000.00
City Atlanta State GA Zip Code 30355-2469	Category/ Type	
Purpose of Disbursement		
Candidate Name SAXBY CHAMBLISS		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Chambliss for Senate		Transaction ID: 70131.E2132 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 7
Mailing Address PO Box 12469		Amount of Each Disbursement this Period 5000.00
City Atlanta State GA Zip Code 30355-2469	Category/ Type	
Purpose of Disbursement		
Candidate Name SAXBY CHAMBLISS		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	15000.00
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)

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<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. Coleman for Senate 08		Transaction ID: 70131.E2133 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 7
Mailing Address 7300 Hudson Blvd. Ste. 270A		Amount of Each Disbursement this Period 5000.00
City Saint Paul State MN Zip Code 55128-7141	Purpose of Disbursement <input type="checkbox"/> Category/Type	
Candidate Name NORM COLEMAN		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Coleman for Senate 08		Transaction ID: 70131.E2134 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 7
Mailing Address 7300 Hudson Blvd. Ste. 270A		Amount of Each Disbursement this Period 5000.00
City Saint Paul State MN Zip Code 55128-7141	Purpose of Disbursement <input type="checkbox"/> Category/Type	
Candidate Name NORM COLEMAN		Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Collins for Senator		Transaction ID: 70131.E2136 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 7
Mailing Address Post Office Box 1096		Amount of Each Disbursement this Period 5000.00
City Bangor State ME Zip Code 04402-	Purpose of Disbursement <input type="checkbox"/> Category/Type	
Candidate Name SUSAN M COLLINS		Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ME District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	15000.00
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)

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<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. Collins for Senator		Transaction ID: 70131.E2135 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 7
Mailing Address Post Office Box 1096		Amount of Each Disbursement this Period 5000.00
City Bangor State ME Zip Code 04402-	Purpose of Disbursement	
Candidate Name SUSAN M COLLINS	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ME District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Texans for John Cornyn		Transaction ID: 70131.E2137 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 7
Mailing Address 6850 Austin Centre Blvd Suite 180		Amount of Each Disbursement this Period 5000.00
City Austin State TX Zip Code 78731-	Purpose of Disbursement	
Candidate Name JOHN CORNYN	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Texans for John Cornyn		Transaction ID: 70131.E2138 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 7
Mailing Address 6850 Austin Centre Blvd Suite 180		Amount of Each Disbursement this Period 5000.00
City Austin State TX Zip Code 78731-	Purpose of Disbursement	
Candidate Name JOHN CORNYN	Category/Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	15000.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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 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. Craig for US Senate		Transaction ID: 70131.E2140 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 7
Mailing Address PO Box 2754 802 W Bannock Ste. LP101		Amount of Each Disbursement this Period 5000.00
City Boise State ID Zip Code 83701-2754		
Purpose of Disbursement		Category/ Type
Candidate Name LARRY E CRAIG		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ID District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Craig for US Senate		Transaction ID: 70131.E2139 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 7
Mailing Address PO Box 2754 802 W Bannock Ste. LP101		Amount of Each Disbursement this Period 5000.00
City Boise State ID Zip Code 83701-2754		
Purpose of Disbursement		Category/ Type
Candidate Name LARRY E CRAIG		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ID District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Elizabeth Dole Committee Inc.		Transaction ID: 70131.E2141 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 7
Mailing Address Post Office Box 2109		Amount of Each Disbursement this Period 5000.00
City Salisbury State NC Zip Code 28145-		
Purpose of Disbursement		Category/ Type
Candidate Name ELIZABETH H DOLE		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	15000.00
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)

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<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. Elizabeth Dole Committee Inc.		Transaction ID: 70131.E2142 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 7	
Mailing Address Post Office Box 2109		Amount of Each Disbursement this Period 5000.00	
City Salisbury State NC Zip Code 28145-	Purpose of Disbursement Category/ Type	Candidate Name ELIZABETH H DOLE	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. People for Pete Domenici		Transaction ID: 70703.E2189 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 7 / 2 0 0 7	
Mailing Address PO Box 93656		Amount of Each Disbursement this Period 5000.00	
City Albuquerque State NM Zip Code 87199-3656	Purpose of Disbursement Category/ Type	Candidate Name PETE V DOMENICI	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. People for Pete Domenici		Transaction ID: 70703.E2188 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 7 / 2 0 0 7	
Mailing Address PO Box 93656		Amount of Each Disbursement this Period 5000.00	
City Albuquerque State NM Zip Code 87199-3656	Purpose of Disbursement Category/ Type	Candidate Name PETE V DOMENICI	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	15000.00
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)

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<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. Enzi for US Senate		Transaction ID: 70131.E2144 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 7	
Mailing Address Post Office Box 2775		Amount of Each Disbursement this Period 5000.00	
City CODY State WY Zip Code 82414-	Category/ Type		
Purpose of Disbursement			
Candidate Name MICHAEL B ENZI			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WY District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Enzi for US Senate		Transaction ID: 70131.E2143 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 7	
Mailing Address Post Office Box 2775		Amount of Each Disbursement this Period 5000.00	
City CODY State WY Zip Code 82414-	Category/ Type		
Purpose of Disbursement			
Candidate Name MICHAEL B ENZI			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WY District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Friends of Jim Inhofe		Transaction ID: 70131.E2148 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 7	
Mailing Address Post Office Box 13300		Amount of Each Disbursement this Period 5000.00	
City Oklahoma City State OK Zip Code 73113-	Category/ Type		
Purpose of Disbursement			
Candidate Name JAMES M INHOFE			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	15000.00
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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)

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<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. Friends of Jim Inhofe		Transaction ID: 70131.E2147 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 7
Mailing Address Post Office Box 13300		Amount of Each Disbursement this Period 5000.00
City Oklahoma City State OK Zip Code 73113-	Purpose of Disbursement <input type="checkbox"/> Category/Type	
Candidate Name JAMES M INHOFE		Amount of Each Disbursement this Period 5000.00
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Friends of Sessions Senate Committee		Transaction ID: 70131.E2152 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 7
Mailing Address Post Office Box 4278		Amount of Each Disbursement this Period 5000.00
City Montgomery State AL Zip Code 36103-	Purpose of Disbursement <input type="checkbox"/> Category/Type	
Candidate Name JEFFERSON B SESSIONS		Amount of Each Disbursement this Period 5000.00
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Friends of Sessions Senate Committee		Transaction ID: 70131.E2151 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 7
Mailing Address Post Office Box 4278		Amount of Each Disbursement this Period 5000.00
City Montgomery State AL Zip Code 36103-	Purpose of Disbursement <input type="checkbox"/> Category/Type	
Candidate Name JEFFERSON B SESSIONS		Amount of Each Disbursement this Period 5000.00
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	15000.00
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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)

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<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. Lindsey Graham for Senate		Transaction ID: 70131.E2146 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 7
Mailing Address PO Box 1801		Amount of Each Disbursement this Period 5000.00
City Columbia State SC Zip Code 29202-1801	Purpose of Disbursement Category/Type	
Candidate Name LINDSEY OLIN GRAHAM		Amount of Each Disbursement this Period 5000.00
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Lindsey Graham for Senate		Transaction ID: 70131.E2145 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 7
Mailing Address PO Box 1801		Amount of Each Disbursement this Period 5000.00
City Columbia State SC Zip Code 29202-1801	Purpose of Disbursement Category/Type	
Candidate Name LINDSEY OLIN GRAHAM		Amount of Each Disbursement this Period 5000.00
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Pat Roberts for Senate		Transaction ID: 70131.E2150 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 7
Mailing Address PO Box 433		Amount of Each Disbursement this Period 5000.00
City Great Bend State KS Zip Code 67530-0433	Purpose of Disbursement Category/Type	
Candidate Name PAT ROBERTS		Amount of Each Disbursement this Period 5000.00
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	15000.00
TOTAL This Period (last page this line number only) ▶

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

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(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. Pat Roberts for Senate		Transaction ID: 70131.E2149 Date of Disbursement 01 / 25 / 2007	
Mailing Address PO Box 433		Amount of Each Disbursement this Period 5000.00	
City Great Bend	State KS		Zip Code 67530-0433
Purpose of Disbursement			Category/ Type
Candidate Name PAT ROBERTS			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: KS District: 00	

Full Name (Last, First, Middle Initial) B. Bob Schaffer for US Senate		Transaction ID: 70703.E2185 Date of Disbursement 06 / 19 / 2007	
Mailing Address PO Box 102135		Amount of Each Disbursement this Period 5000.00	
City Denver	State CO		Zip Code 80250-2135
Purpose of Disbursement			Category/ Type
Candidate Name ROBERT W SCHAFFER			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: CO District: 00	

Full Name (Last, First, Middle Initial) C. Bob Schaffer for US Senate		Transaction ID: 70703.E2184 Date of Disbursement 06 / 19 / 2007	
Mailing Address PO Box 102135		Amount of Each Disbursement this Period 5000.00	
City Denver	State CO		Zip Code 80250-2135
Purpose of Disbursement			Category/ Type
Candidate Name ROBERT W SCHAFFER			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: CO District: 00	

SUBTOTAL of Disbursements This Page (optional) ▶	15000.00
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)

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<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. Friends of Gordon Smith		Transaction ID: 70131.E2153 Date of Disbursement 01 / 25 / 2007
Mailing Address 228 S Washington St Ste 115		Amount of Each Disbursement this Period 5000.00
City Alexandria State VA Zip Code 22314-5404	Category/ Type	
Purpose of Disbursement		
Candidate Name GORDON HAROLD SMITH		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Friends of Gordon Smith		Transaction ID: 70131.E2154 Date of Disbursement 01 / 25 / 2007
Mailing Address 228 S Washington St Ste 115		Amount of Each Disbursement this Period 5000.00
City Alexandria State VA Zip Code 22314-5404	Category/ Type	
Purpose of Disbursement		
Candidate Name GORDON HAROLD SMITH		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Stevens for Senate Committee		Transaction ID: 70131.E2155 Date of Disbursement 01 / 25 / 2007
Mailing Address PO Box 100879		Amount of Each Disbursement this Period 5000.00
City Anchorage State AK Zip Code 99510-0879	Category/ Type	
Purpose of Disbursement		
Candidate Name THEODORE F (TED) STEVENS		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AK District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	15000.00
TOTAL This Period (last page this line number only) ▶

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

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<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. Stevens for Senate Committee		Transaction ID: 70131.E2156 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 7	
Mailing Address PO Box 100879		Amount of Each Disbursement this Period 5000.00	
City Anchorage	State AK		Zip Code 99510-0879
Purpose of Disbursement			Category/ Type
Candidate Name THEODORE F (TED) STEVENS			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: AK District: 00	

Full Name (Last, First, Middle Initial) B. Team Sununu		Transaction ID: 70131.E2158 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 7	
Mailing Address Post Office Box 500		Amount of Each Disbursement this Period 5000.00	
City Rye	State NH		Zip Code 03870-
Purpose of Disbursement			Category/ Type
Candidate Name JOHN E SUNUNU			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: NH District: 00	

Full Name (Last, First, Middle Initial) C. Team Sununu		Transaction ID: 70131.E2157 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 5 / 2 0 0 7	
Mailing Address Post Office Box 500		Amount of Each Disbursement this Period 5000.00	
City Rye	State NH		Zip Code 03870-
Purpose of Disbursement			Category/ Type
Candidate Name JOHN E SUNUNU			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: NH District: 00	

SUBTOTAL of Disbursements This Page (optional) ▶	15000.00
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)

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<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. The McConnell Majority Committee		Transaction ID: 70124.E2128 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 3 / 2 0 0 7
Mailing Address PO Box 75103		Amount of Each Disbursement this Period 15000.00
City Washington State DC Zip Code 20013-0103		
Purpose of Disbursement Candidate Name	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 checked="" type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Craig Thomas		Transaction ID: 70703.E2193 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 7
Mailing Address 1606 Crook Avenue		Amount of Each Disbursement this Period -5000.00 ORIGINALLY ISSUED ON 11/1-2/04
City Cheyenne State WY Zip Code 82001-		
Purpose of Disbursement ORIGINALLY ISSUED ON 11/12/04 Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Craig Thomas		Transaction ID: 70703.E2192 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 3 0 / 2 0 0 7
Mailing Address 1606 Crook Avenue		Amount of Each Disbursement this Period -5000.00 ORIGINALLY ISSUED ON 11/1-2/04
City Cheyenne State WY Zip Code 82001-		
Purpose of Disbursement ORIGINALLY ISSUED ON 11/12/04 Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	5000.00
TOTAL This Period (last page this line number only) ▶	185000.00

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)

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<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. Ernie Fletcher		Transaction ID: 70703.E2180 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 3 / 2 0 0 7	
Mailing Address P.O. Box 910504		Amount of Each Disbursement this Period 1000.00	
City Lexington State KY Zip Code 40591-0504	Purpose of Disbursement Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Trey Grayson		Transaction ID: 70703.E2182 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 7	
Mailing Address PO Box 175726		Amount of Each Disbursement this Period 1000.00	
City Covington State KY Zip Code 41017-5726	Purpose of Disbursement Candidate Name Category/Type		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ►

2000.00

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

2000.00

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)

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<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 checked="" 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. Federal Express PAC

Mailing Address 2005 Corporate Ave.

City Memphis State TN Zip Code 38132-

Purpose of Disbursement
Refund of Contribution

Candidate Name

010
Category/
Type

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Transaction ID: 70124.E2126

Date of Disbursement

01 / 23 / 2007

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional) ▶

5000.00

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

5000.00

Form/Schedule: **F3XN**

Transaction ID: **C00235655**

There were no contributions made on behalf of specifically identified federal candidates on Schedule B, supporting Line 21(b). These payments are on the appropriate line and Schedules B and E for Lines 23 and 24 are not required. All of the Bluegrass Committees expenses have been adequately and accurately disclosed. Our fundraising consultant, whose fee is disclosed in our filings with the Federal Election Commission, provides administrative services to the Bluegrass Committee as part of her contractual arrangement with the Committee. A monthly fee is paid to her, and she is responsible for paying basic rent and other occupancy costs, basic telephone service and similar expenses. You will note that our report does disclose other administrative expenditures, including Federal Express, FEC Compliance and office supplies. No administrative expenses are being paid by a connected organization, and all expenditures have been properly reported.