

FEDERAL ELECTION OPERATIONS CENTER

2004 JUL 15 A 10:14

Office Use Only

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5
KY PROLIFE POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 3101 SORA AVE
Louisville KY 40213-1

2. FEC IDENTIFICATION NUMBER 000164007
3. IS THIS REPORT NEW OR AMENDED (N) OR (A)

Table with 4 columns: (a) Quarterly Reports (Q1-Q3, YE, MY, TER), (b) Monthly Report Due On (Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31), (c) 12-Day PRE-Election Report for the (Primary, General, Special), (d) 30-Day POST-Election Report for the (General, Runoff, Special). Includes 'Election on' and 'in the State of' fields.

5. Covering Period 04 01 2004 through 06 30 2004

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 SUSAN K KENNEY

Signature of Treasurer [Handwritten Signature] Date 07 09 2004

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

KY PROLIFE POLITICAL ACTION COMMITTEE

Report Covering the Period

From

07 01 2007

To

06 30 2007

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

5 (a) Cash on Hand January 1	<u>2007</u>	
(b) Cash on Hand at Beginning of Reporting Period	<u>3,372.90</u>	
(c) Total Receipts (from Line 19)	<u>25,650.00</u>	<u>17,023.00</u>
(d) Subtotal (add Lines 5(a) and 5(b) for Column A and Lines 5(a) and 5(b) for Column B)	<u>5,937.00</u>	<u>23,267.90</u>
7 Total Disbursements (from Line 3)	<u>2,897.50</u>	<u>8,898.44</u>
8 Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 5(d))	<u>3,039.50</u>	<u>14,869.46</u>
9 Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)		
10 Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)		

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

KY PROLIFE POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 01 01 2004 To: 06 30 2004

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)	15,000.00	
(ii) Unitemized	1,065.00	
(iii) TOTAL (add Lines 11(a)(i) and (ii))	25,650.00	17,023.00
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contributions (add Lines 11(a)(ii), (b), and (c)) (Carry Totals to Line 32, page 4)	25,650.00	17,023.00
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 36, page 4)		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17. Other Federal Receipts (Dividends, Interest, etc.)		
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18)	25,650.00	17,023.00
20. Total Federal Receipts (subtract Line 18 from Line 19)	25,650.00	17,023.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Revised 1/01)

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		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures	897.50	2545.21
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	897.50	2545.21
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	2000.00	3000.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. §441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		
29. Other Disbursements		
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)	7897.50	8898.44
31. Total Federal Disbursements (subtract Line 21(a)(i) from Line 30)	2897.50	8898.44

III. Net Contributions/Operating Expenditures

32. Total Contributions (other than loans) (from Line 11(d), page 3)	2565.00	17023.00
33. Total Contribution Refunds (from Line 28(d))		
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	2565.00	17023.00
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	897.50	2545.21
36. Offsets to Operating Expenditures (from Line 15, page 3)		
37. Net Operating Expenditures (subtract Line 36 from Line 35)	1667.50	8476.85

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)		PAGE / OF /	
<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 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)
KY PRO-LIFE POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
GILMAUR, DON

Mailing Address
531 RIDGEWOOD Rd

City **Louisville** State **KY** Zip Code **40207**

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

Name of Employer **SELF** Occupation **REALTOR**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200000

Date of Receipt
04 / 27 / 2004

Amount of Each Receipt this Period
150000

B. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) **150000**

TOTAL This Period (last page this line number only) **150000**

**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 / OF 3	
	<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

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NAME OF COMMITTEE (in Full)
KY PROLIFE POLITICAL ACTION COMMITTEE

A. LEWIS, RON
 Full Name (Last, First, Middle Initial)
 Mailing Address: **312 N. MULBERRY**
 City: **ELIZABETH TOWN** State: **KY** Zip Code: **42701**
 Purpose of Disbursement: **CONTRIBUTION**
 Candidate Name: **RON LEWIS**
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)
 State: **KY** District: _____

Date of Disbursement: **07/27/2004**
 Amount of Each Disbursement this Period: **1000.00**

B. U.S. POSTMASTER
 Full Name (Last, First, Middle Initial)
 Mailing Address: **ST MATTHEWS**
 City: **Louisville** State: **KY** Zip Code: **40207**
 Purpose of Disbursement: **13 POSTAGE MAILING PRIMARY PAC MEET**
 Candidate Name: _____
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)
 State: _____ District: _____

Date of Disbursement: **05/03/2004**
 Amount of Each Disbursement this Period: **234.25**

C. NORTHUP, ANNIE
 Full Name (Last, First, Middle Initial)
 Mailing Address: **P.O. BOX 7313**
 City: **Louisville** State: **KY** Zip Code: **40257**
 Purpose of Disbursement: **CONTRIBUTION**
 Candidate Name: **ANNIE NORTHUP**
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)
 State: **KY** District: _____

Date of Disbursement: **04/12/2004**
 Amount of Each Disbursement this Period: **1000.00**

SUBTOTAL of Disbursements This Page (optional) **2234.25**
 TOTAL This Period (last page this line number only) _____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE <u>2</u> OF <u>3</u>			
	<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 type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
KY PROLIFE POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. AMERIVISION COMM		Date of Disbursement 05 12 2004
Mailing Address P.O. Box 12980		Amount of Each Disbursement this Period 1,036
City OKLAHOMA CITY	State OK	
Zip Code 73157		Category/Type
Purpose of Disbursement PORTION OF LONG DISTANCE		
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. U.S. POSTMASTER		Date of Disbursement 05 17 2004
Mailing Address 51 MATTHEWS		Amount of Each Disbursement this Period 2,590.00
City LOUISVILLE	State KY	
Zip Code 40207		Category/Type
Purpose of Disbursement STAMPS		
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. PENNANT LITHO		Date of Disbursement 05 21 2004
Mailing Address 4701 PINELWOOD RD		Amount of Each Disbursement this Period 3,746.00
City LOUISVILLE	State KY	
Zip Code 40218		Category/Type
Purpose of Disbursement PRIMARY PAC ALERT 8825 MAILED		
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)	6,439.60
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
KY PROLIFE POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <i>A. AMERIVISION</i>		Date of Disbursement <i>05 28 2004</i>
Mailing Address <i>P.O. BOX 12980</i>		Amount of Each Disbursement this Period <i>19.29</i>
City <i>OKLAHOMA CITY</i>	State <i>OK</i>	
Zip Code <i>73157</i>		Category/Type
Purpose of Disbursement <i>PORTION LONG DISTANCE CALLS</i>		
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) <i>B.</i>		Date of Disbursement
Mailing Address		
City	State	Amount of Each Disbursement this Period
Zip Code		
Purpose of Disbursement		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) <i>C.</i>		Date of Disbursement
Mailing Address		
City	State	Amount of Each Disbursement this Period
Zip Code		
Purpose of Disbursement		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)	<i>19.29</i>
TOTAL This Period (last page this line number only)	<i>289.750</i>

Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
 FOR INCOMING DOCUMENTS**

The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked 7-10-04
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
	Delivery Confirmation™ Label <input type="checkbox"/>
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
JM W PREPARER (5/2004)	7-18-04 DATE PREPARED