

KENNETH S. STEPP
CANDIDATE FOR U.S. HOUSE, KENTUCKY-05
P. O. BOX 1271
MANCHESTER, KENTUCKY 40962

Phone or Fax: (606) 596-0360

Email: kenneth_stepp@yahoo.com

web site: <http://www.steppforcongress.blogspot.com>

RECEIVED

FEB 12 AM 9:34
FEC MAIL CENTER

February 6, 2014

Federal Elections Commission
999 E Street, N.W.
Washington, DC 20463

Re: Stepp Committee
Kenneth Stepp
U.S. House, Kentucky-05
FEC NO. _____

Dear Federal Elections Commission :

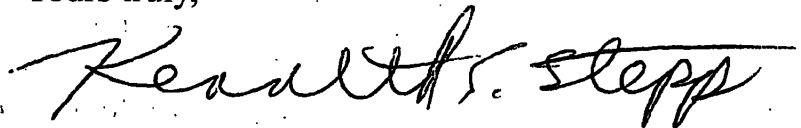
I am a candidate for the U.S. House, Kentucky-05 as a Democrat.

I have organized a committee, the Stepp Committee.

Please find enclosed my forms FEC 1 and FEC 2. Please file them. Please stamp the copy of the extra first page of each "filed" to show when and where the original was filed, and mail the copy of the first page back to me in the enclosed envelope.

Please phone me if you have any questions, or corrections, about my FEC forms and requirements.

Yours truly,



KENNETH S. STEPP

KSS/ks
Enclosures

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FEC
FORM 1

STATEMENT OF
ORGANIZATION

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2014 FEB 12 AM 9:34
FEC MAIL CENTER
Office Use Only

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

STEPP COMMITTEE

ADDRESS (number and street) 7750 NORTH U.S. HIGHWAY 421
P. O. BOX 1271
 (Check if address is changed) MANCHESTER KY 40962 4271
CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)
 (Check if address is changed) kenneth_stepp@yahoo.com

COMMITTEE'S WEB PAGE ADDRESS (URL)
 (Check if address is changed) steppforcongress.blogspot.com

2. DATE 02 6 2014

3. FEC IDENTIFICATION NUMBER C

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

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

Type or Print Name of Treasurer KENNETH S. STEPP
Signature of Treasurer *Kenneth Stepp* Date 02 06 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.
ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

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5. TYPE OF COMMITTEE

Candidate Committee:

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

Name of Candidate **KENNETH S. STEPP**

Candidate Party Affiliation **DEM** Office Sought: House Senate President State **KY** District **05**

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate

Party Committee:

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

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
 - Corporation Corporation w/o Capital Stock Labor Organization
 - Membership Organization Trade Association Cooperative
 - In addition, this committee is a Lobbyist/Registrant PAC.
- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
 - In addition, this committee is a Lobbyist/Registrant PAC.
 - In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1. _____ FEC ID number C
2. _____ FEC ID number C
3. _____ FEC ID number C
4. _____ FEC ID number C

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Write or Type Committee Name

STEPP COMMITTEE

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6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

[Empty grid lines for organization name]

Mailing Address

[Empty grid lines for mailing address]

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

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

Full Name KENNETH STEPHENSON STEPP

Mailing Address P. O. BOX 1271

MANCHESTER KY 40962 4271

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number 606 596 0360

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

Full Name of Treasurer KENNETH STEPHENSON STEPP

Mailing Address P. O. BOX 1271

MANCHESTER KY 40962 4271

Title or Position

CITY

STATE

ZIP CODE

TREASURER

Telephone number 606 596 0360

Full Name of Designated Agent

Mailing Address

CITY

STATE

ZIP CODE

Title or Position

Telephone number

14031183444

- 9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

COMMERCIAL BANK

Mailing Address

P. O. BOX 220

BARBOURVILLE

KY

40906

CITY

STATE

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE

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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.

14031183446

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input checked="" type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<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

 2/12/14
 PREPARER DATE PREPARED