SCHEDULE E

ITEMIZED INDEPENDENT EXPENDITURES

(See Reverse Side for Instructions)

Page 1 of 1 Pages

SECRETARY OF THE SENATE

Name of Committee (In Full)

Democratic Senatorial Campaign Committee

Full Name, Mailing Address & ZIP Code of Each Payee	Purpose of Expenditure	Date (month, day, year)	Amount	Name of Federal Candidate supported or opposed by the expenditure & office sought
Greer, Margolis Mitchell, Burns & Associates, Inc. 1010 Wisconsin Avenue, #800 Washington, DC 20007	Media	10/16/98	$54,000.00	Scotty Baesler Kentucky U.S. Senate ☒ Support ☐ Oppose
				Jim Bunning Kentucky U.S. Senate ☐ Support ☒ Oppose
				☐ Support ☐ Oppose
				☐ Support ☐ Oppose
				☐ Support ☐ Oppose
				☐ Support ☐ Oppose

(a) SUBTOTAL of Itemized Independent Expenditures ..... $ _____

(b) SUBTOTAL of Unitemized Independent Expenditures ..... $ _____

(c) TOTAL Independent Expenditures ..... $ _____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, contact with, or at the request or suggestion of any candidate or any authorized committee or agent of such candidate or authorized committee. Furthermore, these expenditures did not involve the financing of dissemination, distribution, or republication in whole or in part of any campaign materials prepared by the candidate, his campaign committee, or their agent.

Signature [signature] Date 10/16/98

Subscribed and sworn to before me this 16th day of October, 1998

My Commission expires: Oct 31 2002

NOTARY PUBLIC [signature]

FE8AN008

GARY L. SISCO
SECRETARY

PAMELA B. GAVIN
SUPERINTENDENT

HART BUILDING
SUITE 232
WASHINGTON, DC 20510-7115
PHONE: 202-224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

✓ HAND DELIVERED OCT 16, 1998
Date of Receipt

____ INSIDE MAIL _____
Date of Receipt

____ RECEIVED FROM THE HOUSE OFFICE OF RECORDS & REGISTRATIONS _____
Date of Receipt

____ RECEIVED FROM THE FEDERAL ELECTION COMMISSION _____
Date of Receipt

____ FIRST CLASS MAIL _____
Postmarked

____ REGISTERED/CERTIFIED MAIL _____
Postmarked

____ NO POSTMARK

____ POSTMARK ILLEGIBLE

____ OTHER (Specify): _____

_____
Postmark and/or Date of Receipt

RD — OCT. 16, 1998
Preparer — Date Prepared

9 8 0 2 0 1 0 5 3 3