### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT ₩ over the lines Kentucky Educational Medical PAC Suite 2000 ADDRESS (number and street) 4965 US Highway 42 Check if different than previously Louisville ΚY 40222 reported. (ACC) FEC IDENTIFICATION NUMBER STATE. ZIPCODE 🛋 CITY A IS THIS **AMENDED** NEW C00016444 Х REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 Χ PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: **Termination Report** (TER) in the Election on State of 04 0 1 2006 06 30 2006 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Mary-Stuart Reichard Type or Print Name of Treasurer Electronically Filed by Mary-Stuart Reichard 07 11 2006 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 02/2003) Only

### Image# 26950218652

### **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Kentucky Educational Medical PAC <sup>®</sup> D " D 0 4 0 1 2006 0.6 3 0 2006 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand <sup>°</sup>2006 110462.09 January 1 (b) Cash on Hand at 105207.94 Begining of Reporting Period ..... 15707.18 54581.49 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 120915.12 165043.58 6(a) and 6(c) for Column B) ..... 34413.37 78541.83 7. Total Disbursements (from Line 31) ...... Cash on Hand at Close of Reporting Period 86501.75 86501.75 (subtract Line 7 from Line 6(d)) ..... 9. Debts and Obligations owed the committee (Itemize all on Schedule C and/or Schedule D) ..... 0.00 10. Debts and Obligations owed the committee (Itemize all on 0.00 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

FEC Form 3X (Rev. 02/2003) Page 3

Write or Type Committee Name Kentucky Educational Medical PAC

Report Covering the Period:

From:

01

м м 0 4

2006

To:

м м 0 6 <sup>D</sup> 3 0

2006

	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	11000.00
	(ii) Unitemized	9900.00	42800.00
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	15400.00	53800.00
	(b) Political Party Committees	0.00	0.00
	<ul><li>(c) Other Political Committees</li><li>(such as PACs)</li></ul>	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	15400.00	53800.00
2.	Transfers From Affiliated/Other Party Committees	0.00	0.00
3.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
Ο.	to Federal candidates and Other Political Committees	0.00	0.00
7.	Other Federal Receipts (Dividends, Interest, etc.)	307.18	781.49
8.			
	(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))	15707.18	54581.49
20.	Total Federal Receipts (subtract Line 18(c) from Line 19)	15707.18	54581.49

### **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
<ul><li>Operating Expenditures:</li><li>(a) Shared Federal/Non-Federal</li></ul>		-
Activity (from Schedule H4)		0.00
(i) Federal Share		5.00
(ii) Non-Federal Share		0.00
(b) Other Federal Operating	10213.37	24991.83
Expenditures(c) Total Operating Expenditure		24931.03
(add 21(a)(i), (a)(ii) and (b))		24991.83
. Transfers to Affiliated/Other Par		14550.00
Committees	2700.00	14550.00
Federal Candidates/Committees and Other Political Committees	0.00	0.00
. Independent Expenditure	0.00	0.00
(use Schedule E)	by Party	0.00
Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
Loan Repayments Made	0.00	0.00
. Loan пераушенть маче		
Loans Made Refunds of Contributions To:	0.00	0.00
(a) Individuals/Persons Other	0.00	1000.00
Than Political Committees		
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds		100000
(add Lines 28(a), (b), and (	s)) <b>&gt;</b>	1000.00
Other Disbursements	21500.00	38000.00
). Federal Election Activity (2 U.S.	C 431(20))	
(a) Shared Federal Election Ac		
(from Schedule H6)	0.00	0.00
(i) Federal Share		
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Pai With Federal Funds	0.00	0.00
(c) Total Federal Election Activi	b. / Add	
Lines 30(a)(i), 30(a)(ii) and	0.00	0.00
. Total Disbursements (add Lines	· ·	
23, 24, 25, 26, 27, 28(d), 29 and	130(c)) 34413.37	78541.83
. Total Federal Disbursements		
(subtract Line 21(a)(ii) from Line from Line 31)		78541.83
	34413.37	= 70E/11 00

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	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)	15400.00	53800.00
34.	Total Contribution Refunds (from Line 28(d))	0.00	1000.00
85.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	15400.00	52800.00
86.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	10213.37	24991.83
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	10213.37	24991.83

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 6 / 23
			Use separate schedule(s) or each category of the	(check only one)
11	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
Ar or	ly information copied from such Reports and Stator commercial purposes, other than using the r	atements may name and ado	r not be sold or used by any perso lress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
\	NAME OF COMMITTEE (In Full)			
/	Kentucky Educational Medical PAC			
۹.	Full Name (Last, First, Middle Initial) David J. Bensema, MD			Date of Receipt
	Mailing Address 2108 Woodmont Dr			05 18 7 2006
	City	State	Zip Code	Transaction ID: R7501
	Lexington	KY	40502-3062	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Central Internal Medicine	Occupation Physician		Check
	Receipt For:		Year-to-Date ▼	
	Primary General		500.00	1
	Other (specify)	0 0	500.00	
3.	Full Name (Last, First, Middle Initial) Baretta R. Casey, MD			Date of Receipt
	Mailing Address 171 Cedar Hills Dr			06 27 7 2006
	City	State	Zip Code	Transaction ID: R7554
	<u>Pikeville</u>	KY	41501-8704	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		350.00
	Name of Employer UK Center for Rural Health	Occupation Physician		Check
	Receipt For:		Year-to-Date ▼	_
	Primary General	199.09		1
	Other (specify) ▼	0 0	500.00	
).	Full Name (Last, First, Middle Initial) John W. Collins, MD			Date of Receipt
	Mailing Address 1014 Richmond Rd			04 27 2006
	City	State	Zip Code	Transaction ID: R7493
	Lexington	KY	40502-1610	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Lexington Clinic	Occupation		Check
	Receipt For:	Physician	Year-to-Date ▼	$\dashv$
	Primary General	Aggregate		1
	Other (specify) ▼	0 0	500.00	
s	UBTOTAL of Receipts This Page (optional)			1350.00
			·	
T	OTAL This Period (last page this line number o	nly)	<b>)</b>	

S	CHEDULE A (FEC Form 3X)			FOR LINE NUMBER: PAGE 7 / 23
	· ·		Use separate schedule(s) or each category of the	(check only one)
Ш	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			Detailed Carrinary Fage	13 14 15 16 17
Ar	y information copied from such Reports and Sta for commercial purposes, other than using the i	atements may	not be sold or used by any perso	on for the purpose of soliciting contributions
or	for commercial purposes, other than using the i	name and add	lress of any political committee to	solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)			
$  \rangle$	Kentucky Educational Medical PAC			
	•			
	Full Name (Last, First, Middle Initial)			
Α.	J. Gregory Cooper, MD			Date of Receipt
	Mailing Address 386 Culpepper Dr			M M / D D / Y Y Y Y
				04 13 2006
	City	State	Zip Code	Transaction ID: R7472
	Cynthiana	KY	41031-5916	Amount of Each Receipt this Period
	FEC ID number of contributing			500.00
	federal political committee.	C		500.00
		10 11		Credit Card
	Name of Employer Family Care Associates PSC	Occupation		
		Physiciar		
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	' '	500.00	
	Other (specify) ▼			
_				
ь	Full Name (Last, First, Middle Initial)			Date of Descipt
В.	Carolyn B. Daley			Date of Receipt
	Mailing Address 3111 Maria Dr			04 20 2006
	City	State	Zip Code	
	•		·	Transaction ID: R7483
	Lexington	KY	40516	Amount of Each Receipt this Period
	FEC ID number of contributing	C		500.00
	federal political committee.			
	Name of Employer	Occupation	1	— Check
	•	Homema	ker	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General	00 0		1
	Other (specify) ▼		500.00	
				1
	Full Name (Last, First, Middle Initial)			
C.	Robert J. Emslie, MD			Date of Receipt
	Mailing Address 936 Fairway St			M M / D D / Y Y Y Y
				04 27 2006
	City	State	Zip Code	Transaction ID: R7494
	Bowling Green	KY	42101-2400	Amount of Each Receipt this Period
	FEC ID number of contributing			500.00
	federal political committee.	С		300.00
	Name of Employer	Occupation		Check
	Name of Employer Graves Gilbert Clinic			
	Pagaint For:	Physician		$\dashv$
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼	' '	500.00	
	☐ Other (specify) ♥	1 1		1
1.				1500.00
LS	<b>JBTOTAL</b> of Receipts This Page (optional)	······	<u> </u>	1300.00

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

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 8 / 23
	EMIZED RECEIPTS		or each category of the	(check only one)
•••	LIVIIZED RECEIP 13		Detailed Summary Page	X 11a 11b 11c 12
				13 14 15 16 17
or	y information copied from such Reports and S for commercial purposes, other than using the	name and add	not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
$\setminus$	NAME OF COMMITTEE (In Full)			
	Kentucky Educational Medical PAC			
A.	Full Name (Last, First, Middle Initial) Martin Alan Kassan, MD			Date of Receipt
	Mailing Address 2725 Auburn Ave			06 08 7 2006
	City	State	Zip Code	Transaction ID: R7540
	Ashland	KY	41102-6169	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Martin Kassan, MD	Occupation Self-emp	n loyed physician	Check
	Receipt For:		Year-to-Date ▼	
	Primary General		500.00	7
	Other (specify) ▼		500.00	
В.	Full Name (Last, First, Middle Initial) Andrew R. Pulito, MD			Date of Receipt
	Mailing Address 809 Westchester Dr			0 4
	City	State	Zip Code	Transaction ID: R7462
	Lexington	KY	40502-3327	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer UKMC, Dept of Ped Surgery	Occupation Physician		Check
	Receipt For:		Year-to-Date ▼	
	Primary General		500.00	7
	Other (specify) ▼	0 0	500.00	
C.	Full Name (Last, First, Middle Initial) K. Thomas Reichard, MD			Date of Receipt
	Mailing Address 2425 Cherokee Pkwy			04 11 2006
	City	State	Zip Code	Transaction ID: R7464
	Louisville	KY	40204-2216	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Louisville Bone & Joint	Occupation	1	Check
	Specialists PS	Physiciar	1	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General		500.00	7
	Other (specify) ▼	0 0		1
s	UBTOTAL of Receipts This Page (optional)			1500.00
			•	
T	OTAL This Period (last page this line number	only)		

S	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: PAGE 9 / 23
			or each category of the	(check only one)
П	EMIZED RECEIPTS		Detailed Summary Page	X 11a 11b 11c 12
			,	13 14 15 16 17
Ar or	ny information copied from such Reports and State for commercial purposes, other than using the na	ements may me and add	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
abla	NAME OF COMMITTEE (In Full)			
$\rangle$	Kentucky Educational Medical PAC			
A.	Full Name (Last, First, Middle Initial) Mary-Stuart Reichard			Date of Receipt
	Mailing Address 2425 Cherokee Pkwy			04 11 2006
	City	State	Zip Code	Transaction ID: R7465
	Louisville	KY	40204-2216	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer	Occupation Homema		Check
	Receipt For:		Year-to-Date ▼	_
	Primary General	riggrogate	real to Bate V	1
	Other (specify) ▼		500.00	
В.	Full Name (Last, First, Middle Initial) K. Eric Ruby, MD			Date of Receipt
	Mailing Address 76 N Linnwood Dr			05 18 2006
	City	State	Zip Code	Transaction ID: R7522
	Somerset	KY	42501-1101	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Commonwealth Urology PSC	Occupation Physician		Check
	Receipt For:		e Year-to-Date ▼	
	Primary General	1.55.15		1
	Other (specify) ▼	0 0	500.00	
<u> </u>	Full Name (Last, First, Middle Initial) Judah L. Skolnick, MD			Date of Receipt
	Mailing Address 3023 Wickland Rd			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: R7525
	Louisville	KY	40205-2769	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	102002700	150.00
	Name of Employer	Occupation	<u> </u>	Check
	Name of Employer Kentuckiana Pulmonary Ass-	Physiciar		
	ociates PLLC Receipt For:		Year-to-Date ▼	-
	Primary General	, iggi egale	Tour to Date ¥	1
	Other (specify)	' '	300.00	
	Outer (openity) \		0 0 0 0 0 0 0	1
s	UBTOTAL of Receipts This Page (optional)			1150.00
			<u> </u>	-

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

5500.00

	CHEDULE A (FEC Form 3X)		Use separate schedule(s)	FOR LINE NUMBER: (check only one)	PAGE 10 / 23
IT	EMIZED RECEIPTS		or each category of the Detailed Summary Page	11a 11b 11b 13 14	11c 12 15 16 X 17
Ar or	ly information copied from such Reports and State for commercial purposes, other than using the nam	ments may me and add	not be sold or used by any person dress of any political committee to	n for the purpose of solicit solicit contributions from s	ing contributions such committee.
$\overline{\ \ }$	NAME OF COMMITTEE (In Full) Kentucky Educational Medical PAC				
۸.	Full Name (Last, First, Middle Initial) Kentucky Telco Federal Credit Union			Date of Receipt	
	Mailing Address 3740 Bardstown Road			0 4 / D D D 2 8	2006
	City	State	Zip Code	Transaction ID: R7	498
	Louisville	KY	40218	Amount of Each Red	ceipt this Period
	FEC ID number of contributing federal political committee.	С			157.01
	Name of Employer	Occupation	1	Cash	
		Aggregate	Year-to-Date ▼		
	Primary General Other (specify) ▼		781.49		
3.	Full Name (Last, First, Middle Initial) Kentucky Telco Federal Credit Union			Date of Receipt	
	Mailing Address 3740 Bardstown Road			05 / 31	2006
	City	State	Zip Code	Transaction ID: R7	553
	Louisville	KY	40218	Amount of Each Red	ceipt this Period
	FEC ID number of contributing federal political committee.	C			150.17
	Name of Employer	Occupation	1	- Cash	
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 781.49		

SUBTOTAL of Receipts This Page (optional)	•	307.18
TOTAL This Period (last page this line number only)	<b>•</b>	307.18

	CHEDULE B (FECFOIII 3X)	Use seperate schedule(s)		OR LIN	E NUMBE	R:	Р	AGE	11 / 23	3
ΙT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	1 –	21b 27	22 28a	23 28b	24 28c	-	25 29	26 30b
	y Information copied from such Reports and S or commercial purposes, other than using the									
$\rangle$	NAME OF COMMITTEE (In Full) Kentucky Educational Medical PAC	,,								
۹.	Full Name (Last, First, Middle Initial) American Medical Association PAC					of Disbur			0 Ó 6	Y
	Mailing Address 1101 Vermont Aven	ue NW			0 4		20	2 (	000	
	City Washington	State Zip Code DC 20005			Amou	ınt of Eac	h Disburs	ement	this Pe	eriod
	Purpose of Disbursement Transfer to Federal-Affiliated PAC				<u> </u>			14	100.00	0
	Candidate Name			egory/ ype						
	Office Sought: House Dis Senate President State: District:	bursement For:  Primary General  Other (specify) ▼								
3.	Full Name (Last, First, Middle Initial) Kentucky Medical Association						<b>D</b> : D1333			
	Mailing Address Suite 2000				M 0 4	of Disbur		ÝŽ	o ŏ 6	Y
	4965 US Highway 4				ļ .					
	City Louisville	State Zip Code KY 40222			Amou	int of Eac	h Disburs	ement		-
	Purpose of Disbursement Inovice #DL06056 (Phone 16.34; Postage								96.68	3
	Candidate Name			egory/ ype						
	Office Sought: House Dis Senate President State: District:	bursement For:  Primary General  Other (specify) ▼			80.34	-)				
Э.	Full Name (Last, First, Middle Initial) Kentucky Medical Association				Date	of Disbur				
	Mailing Address Suite 2000 4965 US Highway 4	2			0 <sup>M</sup> 4	M / D	28 /	ž	o ð 6	Y
	City Louisville	State Zip Code KY 40222			Amou	ınt of Eac	h Disburs	ement	this Pe	eriod
	Purpose of Disbursement 4/06 Admin Fee (Rent, Phone, Mail,				T L.			15	586.00	0
	Candidate Name			egory/ ype						
	Office Sought: House Dis Senate President State: District:	bursement For:  Primary General  Other (specify) ▼			Supp	lies)				
SI	UBTOTAL of Disbursements This Page (opti	onal)		. •				30	82.68	3
T	OTAL This Period (last page this line number	only)		. •						

SCILDOLL B (I LCI OIIII 3X)	Use seperate schedule(s)		OR LIN check o	E NUMBE	:K:	L	PAGE	12 / 2	3
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X	_	22 28a	23		4 8c	25 29	26 30b
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name.									
<ul> <li>NAME OF COMMITTEE (In Full)</li> </ul>	e and address or any political	COITHI	ilee io s	SOIICIL COM	ibulion	5 11UIII SU(	JII COIIII	muee	
Kentucky Educational Medical PAC									
Full Name (Last, First, Middle Initial)						ID: D135	57		
Kentucky Medical Association						ursement	Υ ,	/ Y	Υ
Mailing Address Suite 2000 4965 US Highway 42				0 <sup>M</sup> 5		31	2	0 0 6	
City Louisville	State Zip Code KY 40222			Amou	ınt of E	ach Disbu	irsemer	nt this P	eriod
Purpose of Disbursement	40222							1586.0	0
5/06 Admin Fee (Rent, Phone, Mail,									
Candidate Name		Cate Ty	gory/ pe						
Office Sought: House Disburs Senate	ement For: Primary General			Supp	lies)				
President	Other (specify)								
State: District: Full Name (Last, First, Middle Initial)				<u> </u>		ID D40	-0		
3. Kentucky Medical Association						ID: D135 ursement	08		
Mailing Address Suite 2000 4965 US Highway 42				0 <sup>M</sup> 5	M /	31	Y	0 0 6	Y
City Louisville	State Zip Code KY 40222			Amou	ınt of E	ach Disbu	irsemer	nt this P	eriod
Purpose of Disbursement Reimburse for Printing 999.23; Postage			•	T L.				2730.4	8
Candidate Name		Cate	gory/ pe						
Senate President	ement For:  Primary General  Other (specify) ▼		-	1,689	).57; S	upplies 4	41.68		
State: District: Full Name (Last, First, Middle Initial)				_		D.(0)			
Kentucky Medical Association					of Disb	ID: D136 ursement			
Mailing Address Suite 2000 4965 US Highway 42				0 6	M /	<sup>D</sup> 30 /	Y 2	0 0 6	Y
City Louisville	State Zip Code KY 40222			Amou	ınt of E	ach Disbu	irsemer	nt this P	eriod
Purpose of Disbursement 06/06 Admin Fee (Rent, phone, mail,			•	T L.				1586.0	0
Candidate Name		Cate	gory/ pe						
Office Sought: House Senate President State: District:	ement For: Primary General Other (specify)			suppl	ies)				
SUBTOTAL of Disbursements This Page (optional)			•		• •	•	5	902.4	8
						-	-	-	
TOTAL This Period (last page this line number only	)		•						

SCHEDOLL B (I LOT OHII 3X)	Use seperate schedule(s)			E NUMBE nly one)	:H:		LPA	GE	13 / 2	3
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X		22 28a	$\vdash$	3 8b	24 28c	$\vdash$	25 29	26 30l
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name										•
NAME OF COMMITTEE (In Full)	e and address of any political c	OHIIIII	.100 10 5	Oncit COIII	ibuliol	1011	Sucii	JUITIO	ill <del>et</del>	
Kentucky Educational Medical PAC										
Full Name (Last, First, Middle Initial)				Trans	action	n ID: D	1367			
Kentucky Medical Association						oursem		· · · ·	V	V
Mailing Address Suite 2000 4965 US Highway 42				0 <sup>M</sup> 6	, , , , , , , , , , , , , , , , , , ,	3 0		2 (	0 ŏ 6	
City Louisville	State Zip Code KY 40222			Amou	ınt of E	Each D	isburse	ment	this P	eriod
Purpose of Disbursement	40222			- [					335.7	5
Reimburse for Advertising										
Candidate Name		Cateo Typ								
Office Sought: House Disburs Senate	ement For:  Primary General									
President	Other (specify)									
State: District:										
Full Name (Last, First, Middle Initial)						n ID: D				
Kentucky Medical Association				Date M		oursem	ent	· · v	· v	V
Mailing Address Suite 2000 4965 US Highway 42				0 6	M /	້3 0		Ž	0 ŏ 6	
City Louisville	State Zip Code KY 40222			Amou	ınt of E	Each D	isburse	ment	this P	eriod
Purpose of Disbursement	10222		-	1 i					303.6	7
Reimburse for Mail 53.77; phone 64.91,		L.								
Candidate Name		Cateo Typ								
	ement For:			KEMI	PAC V	Vebsi	te 184	.99		
Senate President	Primary General Other (specify) ▼									
State: District:	eulei (epeelly) V									
Full Name (Last, First, Middle Initial)  Kentucky State Treasurer						n ID: D				
				0 <sup>M</sup> 4	M /	28	_	Ý	0 ŏ 6	Y
Mailing Address				<u> </u>						
City Frankfort	State Zip Code KY 40601			Amou	ınt of E	Each D	isburse	ment	this P	eriod
Purpose of Disbursement 2005 Income Taxes									175.0	0
Candidate Name	'	Cateo								
Office Sought: House Disburs	ement For:									
Senate	Primary General									
President State: District:	Other (specify)									
2.5										-
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TOTAL This Period (last page this line number only			•							
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	y Information copied from such Reports and Statem for commercial purposes, other than using the name									3
	NAME OF COMMITTEE (In Full) Kentucky Educational Medical PAC									
_	Full Name (Last, First, Middle Initial)				Transa	ction ID	: D135	5		
Α.	Kentucky Telco Federal Credit Union					Disburs			V	V
	Mailing Address 3740 Bardstown Road				0 4	] / [ 2	28 /	ž	o ŏ 6	Y
	City	State Zip Code			Amoun	t of Each	n Disbur	sement	this P	eriod
	Louisville Purpose of Disbursement	KY 40218					•		50.8	36
	Credit Card Processing Fee				-		•			
	Candidate Name			ategory/ Type						
	Office Sought:    House   Disburse     Senate   President     State: District:	ment For: Primary General Other (specify)		Туре						
	Full Name (Last, First, Middle Initial)				Transa	ction ID	: D136	1		
В.	Kentucky Telco Federal Credit Union				Date of	Disburs	ement	VV	V	V
	Mailing Address 3740 Bardstown Road				0 5	] / [ ] (	3 1	' 2 (	o ŏ 6	
	,	State Zip Code KY 40218			Amoun	t of Each	n Disbur	sement	this P	eriod
	Purpose of Disbursement	K1 40216							38.6	64
	Credit Card Processing Fee		L							
	Candidate Name		ı	ategory/ Type						
	Office Sought: House Senate President State: District:	ment For: Primary General Other (specify)								
C.	Full Name (Last, First, Middle Initial) Kentucky Telco Federal Credit Union				Date of	ction ID Disburs	ement			
	Mailing Address 3740 Bardstown Road				0 <sup>M</sup> 6 M	] <sup>/</sup> [ <sup>D</sup> (	3 0 /	Ý Ž (	o ģ 6	Y
		State Zip Code KY 40218			Amoun	t of Each	n Disbur	sement	this P	eriod
	Purpose of Disbursement Credit Card Processing Fee	10-10		• •					24.2	29
	Candidate Name		ı	ategory/ Type						
	Office Sought:  Senate President  State:  Disburse	ment For: Primary General Other (specify)								
Г	oraco. District.									
s	UBTOTAL of Disbursements This Page (optional) .			<u> </u>	<u></u>			. 1	13.7	9
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	y Information copied from such Reports and Statem for commercial purposes, other than using the name									
	NAME OF COMMITTEE (In Full) Kentucky Educational Medical PAC		<b>)</b>							
Α.	Full Name (Last, First, Middle Initial) Marshall E. White					nction ID: f Disburse		2		
	Mailing Address 1304 S. Sixth Street				0 <sup>M</sup> 4	<sup>D</sup> 2	8	y žo	ó 6	Y
			Code 206-2248		Amour	nt of Each	Disbur	-		-
	Purpose of Disbursement 4/06 Political Consultant Fee							1	00.0	0
	Candidate Name			Category/ Type						
	Senate President	ment For: Primary Other (specify)	General ▼							
	State: District: Full Name (Last, First, Middle Initial)				Tropos	ation ID:	D126	0		
В.	Marshall E. White					action ID: f Disburse			Y	Υ
	Mailing Address 1304 S. Sixth Street				-				ó 6	
	Louisville		Code 206-2248		Amoun	nt of Each	Disbur		his Pe	-
	Purpose of Disbursement 5/06 Political Consultant Fee							1	00.0	0
	Candidate Name			Category/ Type						
	Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (specify)	General ▼							
С.	Full Name (Last, First, Middle Initial) Marshall E. White					action ID:		9		
	Mailing Address 1304 S. Sixth Street				0 6	<sup>1</sup> / <sup>D</sup> 3	0 /	y žo	ó6	Y
			Code 206-2248		Amour	nt of Each	Disbur			
	Purpose of Disbursement 06/06 Political Consultant Fee							1	00.0	0
	Candidate Name			Category/ Type						
	Senate President	ment For: Primary Other (specify)	General ▼							
	State: District:							24	00.04	0
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		Detailed	Summary Page	27	$\frac{1}{28a}$ $\frac{23}{28b}$ $\frac{1}{28b}$	28c 29	30b
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	for commercial purposes, other than using						
$\setminus$	NAME OF COMMITTEE (In Full)						
1)	Kentucky Educational Medical PAG	C					
$\mathbb{L}$							
	Full Name (Last, First, Middle Initial)				Transaction ID: D1	1356	
Α.	American Medical Association PAG	C			Date of Disburseme	ent	
	Mailing Address 1101 Vermont A	vonue NIM			05 31	<sup>'</sup> 2006	Y
	Maining Address	venue invv					
	City	State	Zip Code		Amount of Each Dis	sbursement this P	eriod
	Washington	DC	20005			• • • • •	-
	Purpose of Disbursement					1650.0	00
	Transfer to Federal- Affiliated PAC				1		
	Candidate Name			Category/	1		
				Туре	1		
	Office Sought: House	Disbursement For:			1		
	Senate   President	Primary Other (spe	General		1		
	State: District:	Other (spe	city) 🔻		1		
_	Full Name (Last, First, Middle Initial)						
В.	American Medical Association PA	C.			Transaction ID: D1 Date of Disburseme		
	American Medical Association 1 A	O			M M / D D		Y
	Mailing Address 1101 Vermont A	venue NW			0 6 3 0	Ž 0 0 6	
	City Washington	State DC	Zip Code 20005		Amount of Each Dis	sbursement this P	eriod
	Purpose of Disbursement	ЪС	20003			1050.0	00
	Transfer to Federal-affiliated PAC						
	Candidate Name			Category/	1		
				Type	1		
	Office Sought: House	Disbursement For:	I		1		
	Senate	Primary	General		1		
	President	Other (spe	cify)		1		
	State: District:				1		

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or for commercial purposes, other than using the na										
NAME OF COMMITTEE (In Full)										
Kentucky Educational Medical PAC										
Full Name (Last, First, Middle Initial)				Trans	sactio	on ID:	D1345			
Adam Koenig Campaign Fund				Date	of Dis	sburse		Y Y	Υ .	Y
Mailing Address 3346 Canterbury Ct.				0 4		2	<b>4</b> /	2	0 Ď 6	
City	State Zip Code KY 41018			Amo	unt of	Each	Disburse	ment	this P	eriod
Erlanger Purpose of Disbursement	K1 41016			1 [					500.0	00
2006 Primary Election Adam Koenig		·			-				000.0	
Candidate Name	١,	Categ								
Office Sought: House Disbu	sement For:				20 D	`				
Senate	Primary General			(KY-6	ָח-פּנ	,				
President State: District:	Other (specify)									
State: District: Full Name (Last, First, Middle Initial)										
3. Bill Farmer Campaign Fund						<b>on ID:</b> sburse	D1338 ment			
Mailing Address 3361 Squire Oak Drive				0 <sup>M</sup> 4	M /	<sup>D</sup> 2	<b>d</b> / (	ź	0 ŏ 6	Y
<u></u>										
City Lexington	State Zip Code KY 40515			Amoi	unt of	Each	Disburse	ment	this P	eriod
Purpose of Disbursement 2006 Primary Election William P. Farmer		0		T L.	_			_	500.0	00
Candidate Name		Categ	-							
		Тур	е	_						
Office Sought: House Disbut	sement For:  Primary General			(KY-8	38-R	)				
President	Other (specify)									
State: District:										
Full Name (Last, First, Middle Initial)							D1348			
Bob DeWeese Campaign Fund						sburse	_			_
Mailing Address 6206 Glen Hill Rd				0 <sup>M</sup> 4	M /	<sup>D</sup> 2	4	ž	0 Ď 6	Y
City	State Zip Code			Amo	unt of	Each	Disburse	ment	this P	eriod
Louisville Purpose of Disbursement	KY 40222			-				1	000.0	00
2006 Primary Election Bob M. DeWeese					_					
Candidate Name		Categ	-							
Office Sought: House Disbu	sement For:			(KY-4	18-P	)				
Senate	Primary General			(101)	יו סיו	,				
President State: District:	Other (specify)									
oldio. District.										
SUBTOTAL of Disbursements This Page (optional	l)		•					20	0.00	0
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	y Information copied from such Reports and Statem for commercial purposes, other than using the name														IS	
abla	NAME OF COMMITTEE (In Full)															
$ \rangle$	Kentucky Educational Medical PAC															
Α.	Full Name (Last, First, Middle Initial) Charles L. Siler Campaign Fund							<b>Trans</b> Date				-				
	Mailing Address 3570 Tackett Creek Road	d						0 <sup>M</sup> 4	М	/ D	24	/	ž	οŏ	3 Y	
		State KY	Zip Code 40769-7880					Amou	ınt o	f Eac	h Di	sburs	emen	-	Period	_
	Purpose of Disbursement 2006 Primary Election Charles L. Siler				v			L.						500.	00	_
	Candidate Name			С		egory/ /pe										
	Office Sought: House Disburse Senate President	ement For: Primary Other (spe	General ♥					(KY-8	32-F	R)						
_	State: District: Full Name (Last, First, Middle Initial)											4050				
В.	SA Creative							Trans Date	of D	isbur	seme					
	Mailing Address 10801 Electron Drive, Su	iite 102						0 5	М	/ D	3 1	]	ž	οŏ	3 <sup>Y</sup>	
		State KY	Zip Code 40299-3880					Amou	ınt o	f Eac	h Di	sburs	emen	t this	Period	_
	Purpose of Disbursement Independent Expenditure (Watkins (R-11)			Г				L.	_	_			10	000.	00	
	Candidate Name			С		egory/ /pe	1									
	Office Sought: House Senate President State: District:	ement For: Primary Other (spe	General ecify) ▼			-		Hous	e) lı	nvoid	ce #	6905	j			
C.	Full Name (Last, First, Middle Initial) David A. Watkins Campaign Fund							Trans Date								
	Mailing Address 1413 N Elm St Ste 106							0 <sup>M</sup> 4	М	/ D	24	/	ž	οŏ	3 Y	
		State KY	Zip Code 42420					Amou	ınt o	f Eac	h Di	sburs		-	Period	_
	Purpose of Disbursement 2006 Primary Election David A. Watkins,			Г				L.		_	-		1	000.	00	_
	Candidate Name			С		egory/ /pe										
	Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spe	General ecify) ▼					MD (I	<b>〈Υ</b> -	11-D	<i>i</i> )					
	· · · · · · · · · · · · · · · · · · ·								_			•	11:	500.	00	7
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_	NAME OF COMMITTEE (In Full)	o and address of any pomiss			
I \	Kentucky Educational Medical PAC				
	Full Name (Last, First, Middle Initial) David L. Williams Campaign Fund			Transaction ID: D1354 Date of Disbursement	
	Mailing Address PO Box 666			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 2 & 4 \end{smallmatrix} \end{bmatrix} /$	2006
	City Burkesville	State Zip Code KY 42717-0666		Amount of Each Disburs	ement this Period
	Purpose of Disbursement 2006 Primary Election David L. Williams				1000.00
	Candidate Name		Category/ Type		
	Office Sought: House Disburse Senate President State: District:	ement For:  Primary General  Other (specify) ▼		(KY-16-R)	
_	Full Name (Last, First, Middle Initial) David Osborne Campaign Fund			Transaction ID: D1347 Date of Disbursement	
	Mailing Address 11410 Covered Bridge F	oad		$\begin{bmatrix} 0 & 4 & M \\ 0 & 4 & M \end{bmatrix}$	<sup>Y</sup> 2006 <sup>Y</sup>
	City Prospect	State Zip Code KY 40059		Amount of Each Disburs	ement this Period
	Purpose of Disbursement 2006 Primary Election David Osborne				500.00
	Candidate Name		Category/ Type		
	Senate President	ement For: Primary General Other (specify)		(KY-59-R)	
	State: District: Full Name (Last, First, Middle Initial)			<b>T</b> .: <b>ID</b> D4050	
_	Jimmie Lee Campaign Fund			Transaction ID: D1350 Date of Disbursement	YYYYY
	Mailing Address 901 Dogwood Dr			$\begin{bmatrix} 0 & 4 & M \\ 0 & 4 & M \end{bmatrix} / \begin{bmatrix} 0 & 2 & 4 \\ 2 & 4 & M \end{bmatrix} / \begin{bmatrix} 0 & 0 & M \\ 0 & 4 & M \end{bmatrix}$	<sup>°</sup> 2006
	City Elizabethtown	State Zip Code KY 42701		Amount of Each Disburs	
	Purpose of Disbursement 2006 Primary Election Jimmie Lee				500.00
-	Candidate Name		Category/ Type		
	Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)		(KY-25-D)	
	2.50.000				2000.00

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or for commercial purposes, other than using the na										•
NAME OF COMMITTEE (In Full)										
Kentucky Educational Medical PAC										
Full Name (Last, First, Middle Initial)				Tra	nsac	tion ID:	D1343			
John Will Stacy Campaign Fund				Dat M		Disburse		Y Y	Y	Υ
Mailing Address PO Box 135				0	4	2	4	2	0 Ď 6	
City West Liberty	State Zip Code KY 41471			Am	ount	of Each	Disburse	ement	t this P	eriod
Purpose of Disbursement	114/1	_	_	-					500.0	0
2006 Primary Election John Will Stacy										
Candidate Name		Cate Ty <sub>l</sub>	gory/ pe							
Office Sought: House Disbu Senate President	rsement For: Primary General Other (specify)			(KY	-71-	D)				
State: District:	(1 ), <del>1</del>									
Full Name (Last, First, Middle Initial)				Tra	nsac	tion ID:	D1353			
3. Julie Denton Campaign Fund					e of [	Disburse	ement	Y Y	Y	Υ
Mailing Address 1708 Golden Leaf Way	/			0		2	4 /	2	0 Ď 6	
City Louisville	State Zip Code KY 40245			Am	ount	of Each	Disburse	ement	t this P	eriod
Purpose of Disbursement 2006 Primary Election Julie Rose Denton				ŢL				1	000.0	00
Candidate Name		Cate	gory/ pe							
Office Sought: House Disbu Senate President State: District:	rsement For: Primary General Other (specify)			(KY	-36-1	₹)				
Full Name (Last, First, Middle Initial)										
Marie L. Rader Campaign Fund				Dat	e of D	Disburse				_
Mailing Address PO Box 323				O	4 <sup>M</sup>	<sup>/</sup> 2	4	ž	0 0 6	Y
City McKee	State Zip Code KY 40447-0323			Am	ount	of Each	Disburse	emen	t this P	eriod
Purpose of Disbursement 2006 Primary Election Marie L. Rader			.	1 L					500.0	00
Candidate Name		Cate	gory/ pe							
Office Sought: House Disbu Senate President State: District:	rsement For: Primary General Other (specify)			(KY	-89-1	<b>R</b> )				
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	y Information copied from such Reports and Statem for commercial purposes, other than using the nam														าร	
abla	NAME OF COMMITTEE (In Full)															
$\rangle$	Kentucky Educational Medical PAC															
Α.	Full Name (Last, First, Middle Initial) Ralph A. Alvarado Campaign Fund							Trans Date		-	_		2			
	Mailing Address 120 Casa Landa Way							0 <sup>M</sup> 4	М	/ [	2 4	/	Y	ÓOÓ	6 <sup>Y</sup>	
	City Winchester	State KY	Zip Code 40391-8768					Amou	ınt c	f Ea	ch D	isbur	semer	nt this	Perio	nd .
	Purpose of Disbursement 2006 Primary Election Ralph A. Alvarado			Γ	ů		1							500.	00	
	Candidate Name			С		egory/ /pe										
	Office Sought: House Disburse Senate President	ement For: Primary Other (spe	General ccify) ▼					(KY-7	73-F	R)						
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В.	Rick G. Nelson Campaign Fund							Date		isbu	_	ent		Y Y Y	Y	
	Mailing Address Route 3, Box 686							0 4		Ĺ	2 4		2	žοŏ	6	
	City Middlesboro	State KY	Zip Code 40965					Amou	ınt c	f Ea	ch D	isbur	semer	nt this		od .
	Purpose of Disbursement 2006 Primary Election Rick G. Nelson			Т	-		1	L.		_	_			500.	00	
	Candidate Name			С		egory/	1									
	Office Sought:  Senate President  State:  Disburse	ement For: Primary Other (spe	General cify) ▼					(KY-8	37-E	D)						
C.	Full Name (Last, First, Middle Initial) Sal Santoro Campaign Fund							Trans Date				-	6			
	Mailing Address 596 Waterlot Ct							0 <sup>M</sup> 4	М	/ [	2 4	) /	Y	δοδ	6 <sup>Y</sup>	
	City Florence	State KY	Zip Code 41041					Amou	ınt c	f Ea	ch D	isbur	semer	nt this	Perio	nd .
	Purpose of Disbursement 2006 Primary Election Sal Santoro						]	L.	-	-	-	•		500.	00	
	Candidate Name			С		egory/ vpe										
	Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spe	General ecify) ▼					(KY-6	60-F	₹)						
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		Detailed	Summary Page		╟	27		28a		28b	Н	28c	Х	29	Н	30b
	y Information copied from such Reports and State														ıs	
or	for commercial purposes, other than using the nar NAME OF COMMITTEE (In Full)	ne and addre	ess of any political	CON	nn	iittee	to son	CIT COUL	ibut	ions ir	om s	ucn	comn	nittee		
$ \rangle$	Kentucky Educational Medical PAC															
L	Tromasity Eddourisma Medical 1710															
A.	Full Name (Last, First, Middle Initial)									ion ID						
Λ.	Tanya Pullin Campaign Fund								of D м	isburs		nt , r	v · v	V	V	
	Mailing Address 1026 Johnson Lane							0 4	IVI	′	24	Ĺ	<u>'</u> 2	0 ŏ	6 '	
	City	State	Zip Code					Amou	int o	f Each	n Dis	burse	emen	t this	Perio	d
	South Shore	KY	41175							-	-			500.	00	
	Purpose of Disbursement 2006 Primary Election Tanya Pullin									-				500.	00	
	Candidate Name			C	at	egory/	/									
						уре										
		sement For:	C					(KY-9	8-E	<b>)</b> )						
	Senate President	Other (spe	General													
	State: District:		<i>3</i> , <b>\</b>													
_	Full Name (Last, First, Middle Initial)							Trans	act	ion ID	: D1	340				
В.	Thomas Turner Campaign Fund									isburs		nt 	., • .,			
	Mailing Address 175 Clifty Grove Church	h Rd.						0 <sup>M</sup> 4	М	/ D	2 4	'L	ž	0 ŏ	3 <sup>Y</sup>	
	City	State	Zip Code					Amou	int o	f Each	ı Dis	burse	emen	t this	Perio	d
	Somerset	KY	42501								-			500.	00	$\neg$
	Purpose of Disbursement 2006 Primary Election Thomas Turner								-	-				500.	00	_
	Candidate Name			С	at	egory/										
					Т	ype										
	Office Sought: House Disbur	sement For: Primary	General					(KY-8	5-F	R)						
	President	Other (spe														
	State: District:		<i>3</i> , <b>\</b>													
_	Full Name (Last, First, Middle Initial)							Trans	act	ion ID	: D1	349				
C.	Tim Moore Campaign Fund								_	isburs		nt 	., • .,			
	Mailing Address 417 Bates Rd							0 <sup>M</sup> 4	М	/ D2	2 4	L	ž	0 Ŏ	3 <sup>Y</sup>	
	City	State	Zip Code					Amou	int o	f Each	ı Dis	burse	emen	t this	Perio	d
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۹.	Travis Calhoun Campaign Fund						Disburs						
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