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FEC	
FORM	•

FEC FORM 1			I EMER SANIZ <i>I</i>						Office U	se Only		
1. NAME OF COMMITTEE (in	n full)	(Checl	k if name nged)	Example: over the	If typing, tylines.	ре	12FE	4M5				
New Powe	er PAC											
ADDRESS (number a	nd street)	PO Box 1450										
(Check if ac is changed)		London					KY	4	0743-14	450		
			(CITY			STATE			ZIP CC	DE	
COMMITTEE'S E-MA (Check if is change	address	S (Please provi heather@kfto	-	-mail address								
COMMITTEE'S WEB	PAGE ADD	RESS (URL)	erky ora									
(Check if is change												
2. DATE 02		201										
3. FEC IDENTIFIC	CATION NU	MBER	C co	00489252								
4. IS THIS STATE!	MENT X	NEW (N)	OR		AMENDED	(A)						
I certify that I have e	examined thi	is Statement an	d to the best	of my knowl	edge and b	elief it is	true, co	orrect a	nd com	plete.		
Type or Print Name	of Treasurer	Ms Heather F	Roe Mahoney									
Signature of Treasure	Ms Heat er	her Roe Mahoney		[Elec	tronically Fi	iled] D	ate	м — м О1	/ D	23)12
NOTE: Submission of		ous, or incomple				-			ne penal	Ities of 2	2 U.S.C.	§437g.
Office					urther inform al Election Co		act:		FE	C FO	RM 1	

Office Use Only					For further information contact: Federal Election Commission Toll Free 800-424-9530 Local 202-694-1100	FEC FORM 1 (Revised 02/2009)	
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	FFC Fo	rm 1 (Revised 02/2009)	Page 2
		OMMITTEE	i aye Z
Can	ndidate	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. (Con information below.)	nplete the candidate
Nam Cand	e of didate		
	didate / Affiliati	Office Sought: House Senate President	State
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Nam Cand	e of didate		
Par	ty Con	nmittee:	
(d)		This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Poli	tical A	ction Committee (PAC):	
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nnected 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)	X	This committee supports/opposes more than one Federal candidate, and is NOT a separate s committee. (i.e., nonconnected committee)	egregated fund or party
		In addition, this committee is a Lobbyist/Registrant PAC.	
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Join	t Fund	Iraising Representative:	
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for transmittees/organizations, at least one of which is an authorized committee of a federal candidate.	wo or more political
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
	Com	mittees Participating in Joint Fundraiser	
	1.	FEC ID number	
	2.	FEC ID number	
	3.	FEC ID number	
	4.		

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Write or Type Committee Name	12000)	r uge v
New Power PAC	<u> </u>	
	rganization, Affiliated Committee, Joint Fundraising Representative, or Leadershi	p PAC Sponsor
Kentuckjans For The C	ommonwealth	
	PO Box 1450	
Mailing Address	FO BOX 1430	
	London KY 40743	
	CITY STATE Z	IP CODE
Relationship: X Connected	Organization Affiliated Committee Joint Fundraising Representative Lead	lership PAC Sponsor
7. Custodian of Records: Ident books and records.	ify by name, address (phone number optional) and position of the person in posse	ession of committee
	Roe Mahoney	1
Full Name	,250 Plaza Drive	
Mailing Address	Suite 4	
	Lexington KY 40503	
Title or Position	CITY STATE Z	IP CODE
Treasurer	Telephone number 859 - 27	76 0563
3. Treasurer: List the name and any designated agent (e.g., as	address (phone number optional) of the treasurer of the committee; and the name ssistant treasurer).	e and address of
Full Name Ms Heather of Treasurer	Roe Mahoney	
Mailing Address	250 Plaza Drive	
	Suite 4	
	Lexington KY 40503	
Title or Position	CITY STATE ZI	P CODE
Treasurer	Telephone number 859 - 27	76 0563

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Full Name of		
Designated Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
Name of Bank, I	oxes or maintains funds. Depository, etc.	
Name of Bank, I	Pepository, etc. First National Bank and Trust 202 South Main Street, PO Box 100	ZIP CODE
Name of Bank, I	Pepository, etc. First National Bank and Trust 202 South Main Street, PO Box 100 London KY 40743 CITY STATE	ZIP CODE
Name of Bank, I	Pepository, etc. First National Bank and Trust 202 South Main Street, PO Box 100 London CITY STATE Depository, etc.	ZIP CODE
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