

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

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Phone or Fax: (606) 596-0360

Email: kenneth_stepp@yahoo.com

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

JAN. 30, 2015

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

Re: Stepp Committee
Kenneth Stepp
U.S. House, Kentucky-05

Dear Federal Election Commission:

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

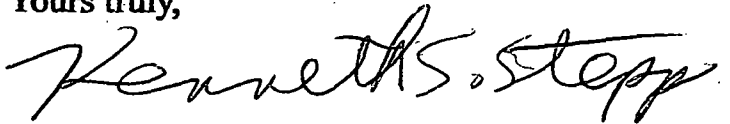
I have organized a committee, the Stepp Committee.

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

I understand that Kentucky has specifically waived having duplicate copies of FEC forms filed in the State or locally, and for that reason, yours is the only office where I will be filing FEC forms or copies of FEC forms.

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

Yours truly,



KENNETH STEPP

KSS/ks
Enclosures

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

STEPP COMMITTEE

Report Covering the Period:

From:

11 / 25 / 2014

To:

12 / 31 / 2014

COLUMN A
This Period

COLUMN B
Election Cycle-to-Date

6. Net Contributions (other than loans)

- (a) Total Contributions (other than loans) (from Line 11(e))
- (b) Total Contribution Refunds (from Line 20(d))
- (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))

0 3,927.52
0 0
0 3,927.52

7. Net Operating Expenditures

- (a) Total Operating Expenditures (from Line 17)
- (b) Total Offsets to Operating Expenditures (from Line 14)
- (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))

19.99 3,904.75
12.75 12.75
7.24 3,892.00

8. Cash on Hand at Close of Reporting Period (from Line 27)

0 0

9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)

0 0

10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)

0 0

PARTIALLY PAID AND REMAINDER FORGIVEN.

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 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

STEPP COMMITTEE

Report Covering the Period: From: MM / DD / YYYY 11 / 25 / 2014 To: MM / DD / YYYY 12 / 31 / 2014

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0	1,681.30
(ii) Unitemized.....	0	0
(iii) TOTAL of contributions from individuals	<u>0</u>	<u>1,681.30</u>
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs).....	0	750.00
(d) The Candidate.....	0	1,496.22
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(i), (b), (c), and (d))..	<u>0</u>	<u>3,927.52</u>
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0	0
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0	50.00
(b) All Other Loans.....	0	0
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	<u>0</u>	<u>50.00</u>
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	12.75	12.75
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0	0
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4).....	<u>12.75</u>	<u>3,990.27</u>

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DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	19.99	3,904.75
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0	0
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	40.52	40.52
(b) Of All Other Loans	0	0
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	40.52	40.52
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees.....	0	0
(c) Other Political Committees (such as PACs)	0	0
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0	0
21. OTHER DISBURSEMENTS	0	0
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	60.51	3,945.27

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	47.76
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	12.75
25. SUBTOTAL (add Line 23 and Line 24).....	60.51
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	60.51
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	0

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 5 OF 11	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14

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) **STEPP COMMITTEE**

Full Name (Last, First, Middle Initial)		Date of Receipt
A. WYMT TELEVISION GRAY TELEVISION		12 08 2014
Mailing Address		Amount of Each Receipt this Period
199 BLACK GOLD BOULEVARD		
City	State Zip Code	12.75
HAZARD, KENTUCKY	41701	
FEC ID number of contributing federal political committee. C		REFUND FOR OVERPAYMENT OF ADVERTISING EXPENSES, PREVIOUS STATEMENT
Name of Employer	Occupation	
WYMT TELEVISION	TELEVISION STATION	
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	
12.75		

Full Name (Last, First, Middle Initial)		Date of Receipt
B. _____		
Mailing Address		Amount of Each Receipt this Period

City	State Zip Code	
_____	_____	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
_____	_____	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial)		Date of Receipt
C. _____		
Mailing Address		Amount of Each Receipt this Period

City	State Zip Code	
_____	_____	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation	
_____	_____	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

SUBTOTAL of Receipts This Page (optional).....	
TOTAL This Period (last page this line number only).....	12.75

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

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

FOR LINE NUMBER:
(check only one)

PAGE **6** OF **11**

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
---	------------------------------------	-------------------------------------	------------------------------------

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)
STEPP COMMITTEE

Full Name (Last, First, Middle Initial) A. POSTMASTER		Date of Disbursement M M / D D / Y Y Y Y 12 08 2014
Mailing Address HIGHWAY 421		Amount of Each Disbursement this Period 19.99
City MCKEE State KENTUCKY Zip Code 40447-9998		
Purpose of Disbursement POSTAGE TO REPORT TO F.E.C. OVERNIGHT	Category/Type 001	CAMPAIGN ACCOUNT
Candidate Name KENNETH S. STEPP		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: KY District: 05		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State 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) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State 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).....	
TOTAL This Period (last page this line number only).....	19.99

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

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

FOR LINE NUMBER:
(check only one)

PAGE 7 OF 11

17 18 19a 19b
 20a 20b 20c 21

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)

STEPP COMMITTEE

Full Name (Last, First, Middle Initial)

A. KENNETH S. STEPP

Mailing Address

7750 North Highway 421

City
MANCHESTER

State
KENTUCKY

Zip Code
40962

Purpose of Disbursement

campaign loan repayment

006

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y

12 24 2014

Amount of Each Disbursement this Period

40.52

TO CLOSE CAMPAIGN ACCOUNT

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify)

State:

District:

Date of Disbursement

M M / D D / Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....

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

40.52

P. 9 of 11

SCHEDULE C-1 (FEC Form 3)
LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for
information found on
Page 1 of Schedule C

Federal Election Commission, Washington, D.C. 20463

NAME OF COMMITTEE (in Full) STEPPE COMMITTEE	FEC IDENTIFICATION NUMBER C 00556803
--	--

LENDING INSTITUTION (LENDER) Full Name	Amount of Loan	Interest Rate (APR) \$
Mailing Address	Date Incurred or Established	
City State Zip Code	Date Due	

A. Has loan been restructured? No Yes **if yes, date originally incurred**

B. If line of credit, **Total Outstanding Balance:**
Amount of this Draw:

C. Are other parties secondarily liable for the debt incurred? No Yes (Endorsers and guarantors must be reported on Schedule C.)

D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? No Yes **if yes, specify:**

What is the value of this collateral?

Does the lender have a perfected security interest in it? No Yes

E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? No Yes **if yes, specify:**

What is the estimated value?

A depository account must be established pursuant to 11 CFR 100.82(a)(2) and 100.142(a)(2).

Date account established: **Location of account:**
Address:
City, State, Zip:

F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.

G. COMMITTEE TREASURER

Typed Name **DATE**
Signature

H. Attach a signed copy of the loan agreement.

I. TO BE SIGNED BY THE LENDING INSTITUTION:

I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of the loan are accurate as stated above.

II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness.

III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.

AUTHORIZED REPRESENTATIVE	DATE
Typed Name	
Signature Title	

LONG 10011 W0011

**SCHEDULE D (FEC Form 3)
DEBTS AND OBLIGATIONS**

(Use separate
schedules(s)
for each
numbered line)

PAGE 10 OF 11

FOR LINE NUMBER:
(check only one)

9
 10

Excluding Loans

NAME OF COMMITTEE (in Full)
STAPP COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Nature of Debt (Purpose):
Mailing Address		
City	State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)	▶
2) TOTALS This Period (last page this line number only)	▶
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	▶
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶

p. 11 of 11

EFFECTIVE DECEMBER 25, 2014

Effective December 25, 2014, Kenneth S. Stepp, individually did forgive all debts owed him by STEPP COMMITTEE, AND KENNETH S. STEPP, THE CANDIDATE. THE DEBT FORGIVEN WAS APPROXIAMTELY \$9.48.



KENNETH S. STEPP, INDIVIDUALLY

CONFIDENTIAL

EXTREMELY URGENT

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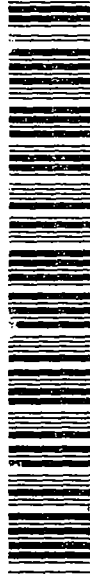
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1007

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2/2/15
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