Image# 14960572744 PAGE 1 / 25

## FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

									Office Us	se Only	
1.	NAME OF COMMITTEE (in full)		PE OR F	PRINT <b>▼</b>		mple: If typir r the lines.	ng, type	12FE4	M5		
K	entucky Medica	l Associ	ation I	PAC(Ker	ntucky Phy	sicians P	AC Feder	al-KPF	PAC Fede	eral)	
Ш											
Α <u>D</u>	DRESS (number and st	reet)	4965 US	Hwy 42							
_	Check if differer		Suite 200	0							
L	than previously reported. (ACC)		Louisville					KY	46220		
2.	FEC IDENTIFICATI	ON NUME	BER ▼		CITY ▲		S	STATE 🛦		ZIP COI	DE 🛦
	C C00016444				3. IS THIS REPORT		NEW OR	×	AMENDED (A)		
4.	TYPE OF REPOR	RT	(b) Mon Repo	ort	Feb 20 (M2)		May 20 (M5)	_ /	Aug 20 (M8)		Nov 20 (M11) (Non-Election Year Only)
	(a) Quarterly Reports	s:	Due		Mar 20 (M3)		Jun 20 (M6)	5	Sep 20 (M9)		Dec 20 (M12) (Non-Election Year Only)
	April 15				Apr 20 (M4)		Jul 20 (M7)		Oct 20 (M10)		Jan 31 (YE)
	Quarterly Ro		(c)	12-Day	on	Primary (12P	)	Gene	ral (12G)		Runoff (12R)
	Quarterly Ro	eport (Q2)		Report for t		Convention (	12C)	Spec	ial (12S)		
	Quarterly Ro  January 31  Year-End Ro			E	Election on	M M /	D   D /	YIYIY	Y	in the State of	f .
	July 31 Mid Report (Nor Year Only)	-Year n-election	(d)	30-Day POST-Elect		General (300	G)	Runo	ff (30R)		Special (30S)
	Termination (TER)	Report		Report for t	the: Election on	M - M /	D = D /	Y " Y " Y	Y	in the State of	f ,
5.	Covering Period	M M 07	/ 01		012	through	09	/ D D D 30	/ Y Y 20°	12	
l ce	ertify that I have exam	nined this F	Report a	nd to the be	est of my kno	wledge and b	pelief it is true	e, correct	and comple	te.	
	pe or Print Name of Tr		David R.								
Sig	nature of Treasurer	David R.	Watkins			[Electronically	Filed] Da	ate 0	4 02	D /	2014
NO	TE: Submission of false	e, erroneous	s, or inco	omplete infor	mation may su	bject the pers	son signing th	is Report	to the penalti	es of 2 L	J.S.C. §437g.
	Office Use Only					•	-		FEC	FOR lev. 12/20	M 3X

## SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

#### Kentucky Medical Association PAC(Kentucky Physicians PAC Federal-KPPAC Federal)

2012 09 30 2012 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 70145.00 January 1, 2012 (b) Cash on Hand at 76247.69 Beginning of Reporting Period..... 36658.01 9253.54 Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 85501.23 106803.01 6(a) and 6(c) for Column B)..... 26913.05 48214.83 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 58588.18 58588.18 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) .....

For further information contact:

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

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. 06/2004)

Write or Type Committee Name

### Kentucky Medical Association PAC(Kentucky Physicians PAC Federal-KPPAC Federal)

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	5925.00	21025.00
(i) Itemized (use Schedule A)	3323.00	21020.00
(ii) Unitemized	3325.00	14120.00
(iii) TOTAL (add	, , , , , , , , , , , , , , , , , , , ,	
Lines 11(a)(i) and (ii)▶	9250.00	35145.00
(1) P.1111 1.P. 1. O. 1111	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	1500.00
(d) Total Contributions (add Lines	7	7
11(a)(iii), (b), and (c)) (Carry		
Totals to Line 33, page 5)	9250.00	36645.00
2. Transfers From Affiliated/Other		
Party Committees	0.00	0.00
	0.00	200
3. All Loans Received	0.00	0.00
4. Loan Repayments Received	0.00	0.00
Offsets To Operating Expenditures	7	0.00
(Refunds, Rebates, etc.)		
(Carry Totals to Line 37, page 5)	0.00	0.00
6. Refunds of Contributions Made		
to Federal Candidates and Other		
Political Committees	0.00	0.00
7. Other Federal Receipts		
(Dividends, Interest, etc.)	3.54	13.01
Transfers from Non-Federal and Levin Fund     Non-Federal Assessment	IS	
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(IIOIII Ochedule 110)	0.00	0.00
(b) Lovin Funds (from Schodulo HE)	0.00	0.00
(b) Levin Funds (from Schedule H5)		5.00
(c) Total Transfers (add 18(a) and 18(b))	0.00	0.00
9. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	9253.54	36658.01
0. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	9253.54	36658.01

#### **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			
Operating Expenditures: –  (a) Allocated Federal/Non-Federal	10101 11110 1 61100	Calcilual Teal-10-Date			
Activity (from Schedule H4)					
(i) Federal Share	0.00	0.00			
(I)	0.00	0.00			
(ii) Non-Federal Share(b) Other Federal Operating	0.00	0.00			
(b) Other Federal Operating  Expenditures	0.00	8202.09			
(c) Total Operating Expenditures					
(add 21(a)(i), (a)(ii), and (b))▶	0.00	8202.09			
Transfers to Affiliated/Other Party					
CommitteesContributions to	0.00	0.00			
Federal Candidates/Committees and Other Political Committees	0.00	0.00			
Independent Expenditures	7 7				
(use Schedule E)	0.00	0.00			
Coordinated Party Expenditures (2 U.S.C. §441a(d))	200				
(2 U.S.C. §441a(d)) use Schedule F)	0.00	0.00			
Loan Panaymenta Mada	0.00	0.00			
Loan Repayments Made		5.00			
Loans Made	0.00	0.00			
Refunds of Contributions To: (a) Individuals/Persons Other					
Than Political Committees	0.00	0.00			
(h) Political Party Committees	0.00	0.00			
(b) Political Party Committees	0.00	5.00			
(such as PACs)	0.00	0.00			
- (I) T. (O) (II) II D. (					
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))▶	0.00	0.00			
(add Lines 20(a), (b), and (c))					
Other Disbursements	26913.05	40012.74			
L	7				
Federal Election Activity (2 U.S.C. §431(20))					
(a) Allocated Federal Election Activity					
(from Schedule H6) (i) Federal Share	0.00	0.00			
(i) I ederal chare		7 7			
(ii) "Levin" Share	0.00	0.00			
(b) Federal Election Activity Paid Entirely					
With Federal Funds	0.00	0.00			
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0.00	0.00			
Lines 30(a)(i), 30(a)(ii) and 30(b))	3.00	0.00			
Total Disbursements (add Lines 21(c), 22,					
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	26913.05	48214.83			
Total Federal Disbursements					
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	26913.05	48214.83			

#### **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		
3. Total Contributions (other than loans) (from Line 11(d), page 3)	9250.00	36645.00		
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00		
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9250.00	36645.00		
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	0.00	8202.09		
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00		
8. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	8202.09		

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

FOR	PAGE	6	OF	25				
(che	ck only	or	ne)					
×	11a		11b		11c	12		
	13		14		15	16	6	17

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 t	o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  Kentucky Medical Associatio	n PAC(Kentucky Physicians PAC Fe	ederal-KPPAC Federal)
Full Name (Last, First, Middle Initial)  A. Doctor John W. Collins MD		Date of Receipt
Mailing Address		09 18 2012
City	State Zip Code	Transaction ID : SA11AI.4807
FEC ID number of contributing		Amount of Each Receipt this Period
federal political committee.	C	500.00
Name of Employer	Occupation	
Lexington clinic Receipt For: 2012	Physician	-
Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)  3. Doctor Douglas Crutcher MD		Date of Receipt
Mailing Address 1210 KY Hwy 36E		M M / D D / Y Y Y Y Y
011	7.01	09 18 2012
City Cynthiana	State Zip Code KY 41031	Transaction ID : SA11AI.4792
		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer	Occupation	1
Harrison Memorial Hospital	Physician	
Receipt For: 2012  Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	300.00	
Full Name (Last, First, Middle Initial)  Doctor Robert Emslie MD		Date of Receipt
Mailing Address 936 Fairway Street		09 18 2012
City	State Zip Code	Transaction ID : SA11AI.4794
Bowling Green	KY 42103	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	300.00
Name of Employer	Occupation	-
Graves Gilbert Clinic	Physician	
Receipt For: 2012	Aggregate Year-to-Date ▼	
Primary X General Other (specify) ▼	300.00	
SUBTOTAL of Receipts This Page (optional	)	1100.00
	·	
TOTAL This Period (last page this line num	ber only)	

Use separate schedule(s) for each category of the

	FOR LINE NUMBER:						7	OF	25
(che	ck only	or	ne)						
×	11a		11b		11c		12		
	13		14		15		16	,	17

**Detailed Summary Page** 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) Kentucky Medical Association PAC(Kentucky Physicians PAC Federal-KPPAC Federal) Full Name (Last, First, Middle Initial) Doctor Gregory A. Hood MD Date of Receipt Mailing Address 2101 Nicholasville Rd Ste 106 2012 City Zip Code State Transaction ID: SA11AI.4749 Lexington KY 40503 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation **Drs Borders & Associates** Physician Receipt For: 2012 Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Doctor John Johnstone MD Date of Receipt Mailing Address 793 Eastern Byp Ste 201 09 18 2012 City State Zip Code Transaction ID: SA11AI.4805 KY Richmond 40475 Amount of Each Receipt this Period FEC ID number of contributing 25.00 federal political committee. Name of Employer Occupation Information Requested Physician Receipt For: 2012 Aggregate Year-to-Date ▼ X General Primary 225.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mr. Patrick T. Padgett Date of Receipt Mailing Address 4965 US Hwy 42 07 12 2012 City Zip Code State Transaction ID: SA11AI.4746 KY Louisville 40222 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation EVP Kentucky Medical Association Receipt For: 2012 Aggregate Year-to-Date ▼ Primary X General Other (specify) 500.00 1025.00 SUBTOTAL of Receipts This Page (optional).....

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

Use separate schedule(s) for each category of the

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	X	11a		11b		11c		12		
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**Detailed Summary Page** 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) Kentucky Medical Association PAC(Kentucky Physicians PAC Federal-KPPAC Federal) Full Name (Last, First, Middle Initial) Doctor Tracy Ragland MD Date of Receipt Mailing Address 7101 W Hwy 22 2012 City Zip Code State Transaction ID: SA11AI.4797 Crestwood KY 40014 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Information Requested Physician Receipt For: 2012 Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Doctor K. Thomas Reichard MD Date of Receipt Mailing Address 2425 Cherokee Pkwy 80 22 2012 City State Zip Code Transaction ID: SA11AI.4754 KY Louisville 40204 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Information Requested Physician Receipt For: 2012 Aggregate Year-to-Date ▼ X General Primary 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mrs. Mary-Stuart Reichard Date of Receipt Mailing Address 2425 Cherokee Pkwy 80 22 2012 City Zip Code State Transaction ID: SA11AI.4752 KY Louisville 40204-2216 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Homemaker Receipt For: 2012 Aggregate Year-to-Date ▼ Primary General Other (specify) 500.00 1500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

Use separate schedule(s) for each category of the

FOR	LINE I	PAGE	9	OF	25			
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	11a		11b		11c	12		
	13		14		15	16	,	17

**Detailed Summary Page** 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) Kentucky Medical Association PAC(Kentucky Physicians PAC Federal-KPPAC Federal) Full Name (Last, First, Middle Initial) Doctor John L. Roberts MD Date of Receipt Mailing Address 6007 Two Springs Lane 2012 City Zip Code State Transaction ID: SA11AI.4799 Louisville KY 40207 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Neonatal Associates PSC Physician Receipt For: 2012 Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Doctor Gordon R. Tobin MD Date of Receipt Mailing Address 1505 Northwind Rd 09 18 2012 City State Zip Code Transaction ID: SA11AI.4796 KY Louisville 40207 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation University Surgical Associates PSC Physician Receipt For: 2012 Aggregate Year-to-Date ▼ Primary ✓ General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Doctor John White MD Date of Receipt Mailing Address 712 Tamarack Ct 09 18 2012 City Zip Code State Transaction ID: SA11AI.4802 KY Richmond 40475 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation **Pulmonary Associates** Physician Receipt For: 2012 Aggregate Year-to-Date ▼ Primary X General Other (specify) 1000.00 1800.00 SUBTOTAL of Receipts This Page (optional).....

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

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

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(0	che	ck only	or	ne)					
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		13		14		15	16		17

**Detailed Summary Page** 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) Kentucky Medical Association PAC(Kentucky Physicians PAC Federal-KPPAC Federal) Full Name (Last, First, Middle Initial) Doctor Russell Williams MD Date of Receipt Mailing Address 3416 Glenview Ave 2012 City Zip Code State Transaction ID: SA11AI.4801 Louisville KY 40222 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Name of Employer Occupation Information Requested Physician Receipt For: 2012 Aggregate Year-to-Date ▼ Primary ✓ General 500.00 Other (specify) Full Name (Last, First, Middle Initial) В. Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 500.00 SUBTOTAL of Receipts This Page (optional)..... 5925.00 TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 11 OF 2					
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one)  22 23 24 25 26  28a 28b 28c X 29 30				
Any information copied from such Reports and Statem or for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full)	le and address of any politica	i committee to	solicit contributions from such committee.				
Kentucky Medical Association PAC	(Kentucky Physician	s PAC Fe	deral-KPPAC Federal)				
Full Name (Last, First, Middle Initial)							
A. Adam Haas Campaign Fund			Date of Disbursement				
Mailing Address 643 Monroe Street			09 11 2012				
City	State Zip Code		Transaction ID : SB29.4673				
Newport	KY 41071		Transaction ib . Ob25.4075				
Purpose of Disbursement General Election Contribution to Adam Haas Campa	aign Fund	011	Amount of Each Disbursement this Period				
Candidate Name		Category/ Type	1000.00				
Senate	nent For: 2012  Primary						
State: District:							
Full Name (Last, First, Middle Initial)  3. Addia Wuchner Campaign Fund			Date of Disbursement				
Mailing Address PO Box 911			09 11 2012				
City	State Zip Code						
Burlington	KY 41005		Transaction ID : SB29.4676				
Purpose of Disbursement General Election Contribution to Addia Wuchner Ca	mpaign Fund	011	Amount of Each Disbursement this Period				
Candidate Name	1	Category/ Type	500.00				
Senate President	nent For: 2012 Primary						
State: District:  Full Name (Last, First, Middle Initial)							
Bill Barron Campaign Fund			Date of Disbursement				
Mailing Address 3201 Veach Road			09 11 2012				
•	State Zip Code KY 42303		Transaction ID : SB29.4678				
Purpose of Disbursement General Election Contribution to Bill Barron Campai	gn Fund	011	Amount of Each Disbursement this Period				
Candidate Name		Category/	Amount of Each Disbursement this Period				
Senate President	nent For: 2012  Primary General  Other (specify)	Туре					
State: District:							
SUBTOTAL of Disbursements This Page (optional)		·····•	2500.00				
TOTAL This Desired (feet seems that the							
TOTAL This Period (last page this line number only)							

	CHEDULE B (FEC Form 3X)	Use separate schedule(s	\ I	NUMBER: PAGE 12 OF 25				
ITI	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one)  22 23 24 25 26  28a 28b 28c X 29 30b				
	y information copied from such Reports and Statem for commercial purposes, other than using the nam							
$\setminus$	NAME OF COMMITTEE (In Full)  Kentucky Medical Association PAC	(Kentucky Physicia	ans PAC Fe	deral-KPPAC Federal)				
Α.	Full Name (Last, First, Middle Initial)  Bob DeWeese, MD, Re-Election Ca	ampaign Fund		Date of Disbursement				
	Mailing Address 6206 Glen Hill Road			09 11 2012				
	Louisville	State Zip Code KY 40222		Transaction ID : SB29.4680				
	Purpose of Disbursement General Election Contribution to Bob DeWeese Car	npaign Fund	011	Amount of Each Disbursement this Period				
	Candidate Name		Category/ Type	1000.00				
	Senate President	nent For: 2012  Primary						
В.	State: District:  Full Name (Last, First, Middle Initial)  Brian Linder Campaign Fund			Date of Disbursement				
	Mailing Address 16 Ridgeview Circle			09 30 2012				
	Dry Ridge	State Zip Code KY 41035		Transaction ID : SB29.4714				
	Purpose of Disbursement General Election Contribution to Brian Linder Camp	aign Fund	011	Amount of Each Disbursement this Period				
	Candidate Name		Category/ Type	500.00				
	Senate	nent For: 2012  Primary General  Other (specify)						
С.	Full Name (Last, First, Middle Initial)  Campaign For Givens for KY Sena	te		Date of Disbursement				
	Mailing Address PO Box 12			09 30 2012				
	Greensburg	State Zip Code KY 42743		Transaction ID : SB29.4706				
	Purpose of Disbursement General Election Contribution to David Givens Cam Candidate Name	paign Fund	011 Category/ Type	Amount of Each Disbursement this Period 500.00				
	Senate	nent For: 2012 Primary General Other (specify)	70.5					
H	UBTOTAL of Disbursements This Page (optional)  OTAL This Period (last page this line number only)			2000.00				

SCHEDULE B (FEC Form 3X)		oparato cabadula/a	FOR LINE NUMBER: PAGE 13							
ITEMIZED DISBURSEI	VIENIS for each	eparate schedule(s ch category of the ed Summary Page	(check only 21b 27	one) 22 23 23 28a 28b	24 25 26 28c X 29 30b					
Any information copied from such or for commercial purposes, other										
NAME OF COMMITTEE (In File Kentucky Medical As	•	ucky Physicia	ans PAC Fe	deral-KPPAC F	ederal)					
Full Name (Last, First, Middle	,									
A. Campaign Fund of M				Date of Disbursem	/ Y Y Y Y Y					
Mailing Address 5318 Westhall				09 30	2012					
City Louisville	State KY	Zip Code 40214		Transaction ID:	SB29.4725					
Purpose of Disbursement General Election Contribution	to Mike Nemes Campaign Fur	nd	011	Amount of Each D	isbursement this Period					
Candidate Name			Category/ Type		1000.00					
Office Sought: House Senate Preside		: 2012 ☐ General specify) ▼								
State: District:  Full Name (Last, First, Middle	Initial\									
B. Carroll Gibson Camp	·			Date of Disbursem	ent					
Mailing Address 436 Shaw Sta	ation Road			09 11	2012					
City Leitchfield	State KY	Zip Code 42754		Transaction ID :	SB29.4681					
Purpose of Disbursement General Election Contribution	to Carroll Gibson Campaign F	und	011	Amount of Each D	isbursement this Period					
Candidate Name			Category/ Type		1000.00					
Office Sought:  House Senate Preside State: District:	,	Equation : 2012 General specify) ▼								
Full Name (Last, First, Middle C. Chris McDaniel Cam	·			Date of Disbursem						
Mailing Address 500 Mason Ro	pad			09 / 11	2012					
City Taylor Mill	State KY	Zip Code 41015		Transaction ID :	SB29.4682					
Purpose of Disbursement General Election Contribution to	to Chris McDaniel Campaign F	Fund	011	Amount of Foots D	talanna ann an Albia Barian					
Candidate Name			Category/ Type	Amount of Each D	isbursement this Period 1000.00					
Office Sought:  House Senate Preside State: District:			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
Diotrot.										
SUBTOTAL of Disbursements TI  TOTAL This Period (last page the					3000.00					

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 14 O							
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)						
	Detailed Summary Page	21b 27	22 23 24 25 26 28a 28b 28c X 29 30b						
Any information copied from such Reports and Statem	l nents may not be sold or use								
or for commercial purposes, other than using the nam									
NAME OF COMMITTEE (In Full)									
$ \; angle$ Kentucky Medical Association PAC	(Kentucky Physicia	ns PAC Fe	deral-KPPAC Federal)						
Full Name (Last, First, Middle Initial)									
A. Chris Thieneman Campaign Fund			Date of Disbursement						
Mailing Address 7650 Dixie Highway			09 30 2012						
•	State Zip Code KY 40258		Transaction ID : SB29.4719						
Purpose of Disbursement	40256								
General Election Contribution to Chris Thieneman C	ampaign Fund	011	Amount of Each Disbursement this Period						
Candidate Name		Category/	1000.00						
Office Sought: House Disbursem	nent For: 2012	Туре	7						
	Primary Seneral								
	Other (specify) ▼								
State: District: Full Name (Last, First, Middle Initial)									
B. Damon Thayer Campaign Fund			Date of Disbursement						
			M M / D D / Y Y Y Y						
Mailing Address 102 Grayson Way			09 11 2012						
	State Zip Code		Transaction ID : SB29.4684						
Georgetown Purpose of Disbursement	KY 40324								
General Election Contribution to Damon Thayer Car	mpaign Fund	011	Amount of Each Disbursement this Period						
Candidate Name		Category/ Type	500.00						
Office Sought: House Disbursem	nent For: 2012	.,,,,,	,						
	Primary General								
President State: District:	Other (specify) ▼								
Full Name (Last, First, Middle Initial)									
C. David A. Watkins Campaign Fund			Date of Disbursement						
Mailing Address 5000 Till Di			M M / D D / Y Y Y Y						
Mailing Address 5600 Timberlane Drive			09 11 2012						
,	State Zip Code		Transaction ID : SB29.4686						
Henderson Purpose of Disbursement	KY 42420								
General Election Contribution to David A. Watkins C	ampaign Fund	011	Amount of Each Disbursement this Period						
Candidate Name		Category/	1000.00						
Office Sought: House Disbursem	ant Fore 2010	Туре	1000.00						
	nent For: 2012 Primary X General								
	Other (specify) ▼								
State: District:									
			2500.00						
SUBTOTAL of Disbursements This Page (optional)		·····	200.00						
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SCHEDULE B (FEC Form 3X)			FOR LINE NUMBER: PAGE 15 OF 2							
	EMIZED DISBURSEMENTS	Use separate schedule(s	(check only	OWDEN.						
		for each category of the Detailed Summary Page	21b	22 23 24 25 26						
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	y information copied from such Reports and Staten									
or	for commercial purposes, other than using the name	e and address of any politi	cal committee to	solicit contributions from such committee.						
	NAME OF COMMITTEE (In Full)									
/	Kentucky Medical Association PAC	(Kentucky Physicia	ans PAC Fe	deral-KPPAC Federal)						
<u></u>	Full Name (Last, First, Middle Initial)									
Α.	David Floyd Campaign Fund			Date of Disbursement						
				M M / D D / Y Y Y Y						
	Mailing Address 102 Maywood Avenue			09 11 2012						
	City	State Zip Code								
	Bardstown	KY 40004		Transaction ID: SB29.4687						
	Purpose of Disbursement	.000.								
	VOIDED CHECK - Filled out incorrectly		011	Amount of Each Disbursement this Period						
	Candidate Name		Category/	0.00						
			Type	0.00						
		nent For: 2012								
	Senate President	Primary								
	State: District:	Other (speeliy)								
_	Full Name (Last, First, Middle Initial)									
В.	David Floyd Campaign Fund			Date of Disbursement						
				M M / D D / Y Y Y Y						
	Mailing Address 102 Maywood Avenue			09 30 2012						
	City	State Zip Code								
	Bardstown	KY 40004		Transaction ID : SB29.4713						
	Purpose of Disbursement									
	General Election Contribution to David Floyd Camp	aign Fund	011	Amount of Each Disbursement this Period						
	Candidate Name		Category/	500.00						
	Office Cought. House Dishurses	ant Fam. 2016	Type	000.00						
	Office Sought: House Disbursen Senate	nent For: 2012 Primary X General								
	President	Other (specify)								
	State: District:	<b>₹</b>								
	Full Name (Last, First, Middle Initial)									
C.	David Meade Campaign Fund			Date of Disbursement						
				M M / D D / Y Y Y Y						
	Mailing Address 2900 Old US Hwy 150 East			09 30 2012						
	City	State Zip Code								
	Stanford	KY 40484		Transaction ID : SB29.4718						
	Purpose of Disbursement General Election Contribution to David Meade Cam	naign Fund	1							
	Candidate Name	paign r unu	011	Amount of Each Disbursement this Period						
	Candidate Name		Category/	500.00						
	Office Sought: House Disbursen	nent For: 2012	Туре							
		Primary Seneral								
	President	Other (specify)								
	State: District:									
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SCHEDULE B (FEC Form 3X)				FOR LINE NUMBER: PAGE 16 OF							
ΙT	EMIZED DISBURSEMENTS	Use separate for each cated		(check only	one)						
		Detailed Sumi		21b 27	22 23 28a 28b	24 25 26 28c × 29 30b					
Ar	ly information copied from such Reports and Staten	l nents may not b	e sold or use								
	for commercial purposes, other than using the name										
$\setminus$	NAME OF COMMITTEE (In Full)				_						
/	Kentucky Medical Association PAC	(Kentucky	Physiciar	ns PAC Fe	deral-KPPAC	Federal)					
<u></u>	Full Name (Last, First, Middle Initial)										
Α.	Elect Jonathan Shell				Date of Disburser	ment					
	Mailing Address PO Box 138				09 30						
	City S Lancaster		Code 444		Transaction ID	: SB29.4710					
	Purpose of Disbursement	40	444								
	General Election Contribution to Jonathan Shell Car	npaign Fund		011	Amount of Each	Disbursement this Period					
	Candidate Name			Category/		500.00					
	Office Sought: House Disbursen	nent For: 2012		Туре		7					
	Senate	Primary X	General								
	President	Other (specify)	▼								
_	State: District:										
В.	Full Name (Last, First, Middle Initial)  F.L. Waide Campaign Fund				Date of Disburse	ment					
					M = M / D =	D / Y Y Y Y Y					
	Mailing Address 352 Calumet lane				09 30	2012					
			Code		Transaction ID	: SB29.4721					
	Madisonville Purpose of Disbursement	N1 42	431								
	General Election Contribution to F.L. Waide Campa	ign Fund		011	Amount of Each	Disbursement this Period					
	Candidate Name			Category/		1000.00					
	Office Sought: House Disbursen	nent For: 2012		Туре							
			General								
		Other (specify)	▼								
_	State: District:										
C.	Full Name (Last, First, Middle Initial)  House Republican Caucus Campa	an Commit	ltee		Date of Disburse	ment					
					M M / D	D / Y Y Y Y					
	Mailing Address PO Box 1068				09 30	2012					
	City	State Zip	Code		Transaction ID	- CD00 4704					
	Frankfort		502		Transaction ID	. 3DZ9.4134					
	Purpose of Disbursement General Election Caucus Support			011	Amount of Fools	Disbursement this Period					
	Candidate Name			Category/	Amount of Each						
				Type		1000.00					
		nent For: 2012	General								
	President	Primary XOther (specify)	General								
	State: District:	(1 )/	•								
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s	UBTOTAL of Disbursements This Page (optional)			·····•		2500.00					
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SCHEDULE B (FEC Form 3X)	Line concrete calculates	FOR LINE NUMBER: PAGE 17							
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only 21b	one) 22 23 24 25 26						
	Detailed Summary Page	27	28a 28b 28c X 29 30b						
Any information copied from such Reports and State or for commercial purposes, other than using the na									
NAME OF COMMITTEE (In Full)									
Kentucky Medical Association PA	C(Kentucky Physicia	ns PAC Fe	deral-KPPAC Federal)						
Full Name (Last, First, Middle Initial)			Date of Disbursement						
A. Jim DeCesare Campaign Fund			M M / D D / Y Y Y Y						
Mailing Address PO Box 122			09 30 2012						
City	State Zip Code		Transaction ID : SB29.4729						
Rockfield Purpose of Disbursement	KY 42274								
Genreal Election Contribution to Jim DeCesare Co	ampaign Fund	011	Amount of Each Disbursement this Period						
Candidate Name		Category/	250.00						
Office Sought: House Disburs	ement For: 2012	Туре							
Senate	Primary General								
State: District:	Other (specify) ▼								
Full Name (Last, First, Middle Initial)									
B. Jimmie Lee Campaign Fund			Date of Disbursement						
Mailing Address 901 Dogwood Drive			09 11 2012						
City Elizabethtown	State Zip Code KY 42701		Transaction ID : SB29.4692						
Purpose of Disbursement General Election Contribution to Jimmie Lee Cam	paign Fund	011	Amount of Each Disbursement this Period						
Candidate Name		Category/ Type	500.00						
Senate President	ement For: 2012 Primary								
State: District:  Full Name (Last, First, Middle Initial)									
C. John Schickel Campaign fund			Date of Disbursement						
Mailing Address 2147 Natchez Trace			09 11 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
City	State Zip Code		Transaction ID : SB29,4693						
Union Purpose of Disbursement	KY 41091		Transaction is . Ob25.4055						
General Election Contribution to John Schickel Ca	ımpaign Fund	011	Amount of Each Disbursement this Period						
Candidate Name		Category/ Type	500.00						
	ement For: 2012								
Senate President	Primary								
State: District:	Ctrici (Specify)								
SUBTOTAL of Disbursements This Page (optional)		······	1250.00						
TOTAL This Period (last page this line number onl	y)								

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 18 OF 25								
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	(check only	_ NOMBEN.							
II LIVIIEED DIODOITOLIVIEIVIO	for each category of the Detailed Summary Page	21b	22 23 24 25 26							
	Detailed Suffillary Page	27	28a 28b 28c X 29 30b							
Any information copied from such Reports and Statem	ents may not be sold or use	d by any perso	on for the purpose of soliciting contributions							
or for commercial purposes, other than using the name										
NAME OF COMMITTEE (In Full)										
$ \; angle$ Kentucky Medical Association PAC	(Kentucky Physician	s PAC Fe	deral-KPPAC Federal)							
Full Name (Look First Middle Lettel)		-	*							
Full Name (Last, First, Middle Initial)			Date of Disbursement							
A. Joseph Fischer Campaign Fund										
Mailing Address 126 Dixie Place			09 30 2012							
,	tate Zip Code		Transaction ID : SB29.4731							
	KY 41075		11alisaction iD . 3B25.4731							
Purpose of Disbursement General Election Contribution to Joseph Fischer Car	mpaign Fund	011	Amount of Fook Dishurasment this Davied							
Candidate Name	1 3	011	Amount of Each Disbursement this Period							
Candidate Humo		Category/ Type	250.00							
Office Sought: House Disbursem	nent For: 2012	.,,,,								
	Primary Seneral									
President	Other (specify)									
State: District:										
Full Name (Last, First, Middle Initial)										
B. Kelly Flood Campaign Fund			Date of Disbursement							
Mailian Address (CA)			M M / D D / Y H Y H Y H Y							
Mailing Address 121 Arcadia Park			09 30 2012							
City	tate Zip Code									
· ·	KY 40503		Transaction ID: SB29.4732							
Purpose of Disbursement	ing Found									
General Election Contribution to Kelly Flood Campa	ign Fund	011	Amount of Each Disbursement this Period							
Candidate Name		Category/								
Office Sought: House Disbursem	ent For: 2012	Туре								
	Primary X General									
	Other (specify)									
State: District:	<b>₹</b>									
Full Name (Last, First, Middle Initial)										
C. Kentucky Medical Association (KM)	4)		Date of Disbursement							
	<u>'</u>		M M / D D / Y M Y M Y							
Mailing Address 4965 US Hwy 42			07 15 2012							
Suite 2000	tata Zin Cada									
,	itate Zip Code KY 40222		Transaction ID: SB29.4663							
Purpose of Disbursement	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,									
July Administration Fee		001	Amount of Each Disbursement this Period							
Candidate Name		Category/	575.00							
		Туре	575.00							
	nent For: 2012									
	Primary General									
State: District:	Other (specify) ▼									
Side. District.										
SUBTOTAL of Disbursements This Page (optional)			1075.00							
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TOTAL This Period (last page this line number only).			1							

SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 19 OF 25								
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	No.							
	Detailed Summary Page	270	28a 28b 28c X 29 30b							
Any information copied from such Reports and State			on for the purpose of soliciting contributions							
or for commercial purposes, other than using the na	me and address of any politi	cal committee to	solicit contributions from such committee.							
NAME OF COMMITTEE (In Full)  Kentucky Medical Association PA	C/Kontucky Physicis	ne DAC Eo	doral-KPPAC Fodoral)							
Reflictly Medical Association FA	C(Nemucky Physicia		delai-NFFACT edelai)							
Full Name (Last, First, Middle Initial)	4.4.\		Date of Disbursement							
A. Kentucky Medical Association (KN	/IA)		M M / D D / Y Y Y Y							
Mailing Address 4965 US Hwy 42			07 15 2012							
Suite 2000 City	State Zip Code									
Louisville	KY 40222		Transaction ID : SB29.4664							
Purpose of Disbursement Fedex postage, conference call, check reorder, an	d domain name renewal	204								
Candidate Name	d domain name renewal	001	Amount of Each Disbursement this Period							
Canadato Hamo		Category/ Type	211.55							
	ement For: 2012									
Senate President	Primary									
State: District:	Other (specify)									
Full Name (Last, First, Middle Initial)										
B. Kentucky Medical Association (KN	ЛA)		Date of Disbursement							
Mailing Address 4965 US Hwy 42 Suite 2000			08 15 2012							
City Louisville	State Zip Code KY 40222		Transaction ID: SB29.4667							
Purpose of Disbursement August Administration Fee		001	Amount of Each Disbursement this Period							
Candidate Name		Category/	575.00							
Office Sought: House Disburse	ement For: 2012	Туре	373.00							
Senate Disburse	Primary General									
President	Other (specify) ▼									
State: District:	-									
Full Name (Last, First, Middle Initial)  C. Kentucky Medical Association (KN	<b>4</b>		Date of Disbursement							
- Remucky Medical Association (Kil	nA)		M M / D D / Y Y Y Y							
Mailing Address 4965 US Hwy 42 Suite 2000			08 15 2012							
City	State Zip Code		Transaction ID : SB29.4668							
Louisville Purpose of Disbursement	KY 40222									
Postage and Printing		001	Amount of Each Disbursement this Period							
Candidate Name		Category/ Type	139.50							
Office Sought: House Disburse	ement For: 2012									
Senate	Primary General									
State: District:	Other (specify) ▼									
State. District.										
SUBTOTAL of Disbursements This Page (optional).			926.05							
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SCHEDULE B (FEC Form 3X)	Harrison to the term	FOR LINE NUMBER: PAGE 20 OF							
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one)  22 23 24 25 26  28a 28b 28c X 29 36						
Any information copied from such Reports and Statem or for commercial purposes, other than using the name									
NAME OF COMMITTEE (In Full)									
Kentucky Medical Association PAC	(Kentucky Physicia	ns PAC Fe	deral-KPPAC Federal)						
Full Name (Last, First, Middle Initial)	• >		Date of Disharanana						
A. Kentucky Medical Association (KM	A)		Date of Disbursement						
Mailing Address 4965 US Hwy 42 Suite 2000			09 15 2012						
	State Zip Code		Transaction ID : SB29.4671						
Louisville	KY 40222		Transaction ib . Obzo.4071						
Purpose of Disbursement September Administration Fee		001	Amount of Each Disbursement this Period						
Candidate Name		Category/ Type	575.00						
Senate	nent For: 2012 Primary General Other (specify)	.,,,,							
State: District:									
Full Name (Last, First, Middle Initial)  KY House Democratic Caucus Car	npaign Committee		Date of Disbursement						
Mailing Address 29 Timberlawn Circle			09 30 2012						
City S Frankfort	State Zip Code KY 40601		Transaction ID : SB29.4736						
Purpose of Disbursement General Election Caucus Support		011	Amount of Each Disbursement this Period						
Candidate Name		Category/ Type	1000.00						
Senate President	nent For: 2012 Primary								
State: District: Full Name (Last, First, Middle Initial)									
M.J. Pickerill Campaign Fund			Date of Disbursement						
Mailing Address 322 North Spalding Avenue			09 30 2012						
Lebanon	State Zip Code KY 40033		Transaction ID : SB29.4723						
Purpose of Disbursement General Election Contribution to M.J. Pickerill Camp	aign Fund	011	Amount of Each Disbursement this Period						
Candidate Name		Category/	1000.00						
Senate	nent For: 2012  Primary General  Other (specify)	Туре							
State: District:									
SUBTOTAL of Disbursements This Page (optional)		·····	2575.00						
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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s	FOR LINE I	
II LIVIIZED DISDUNSEIVIEN IS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 26 28a 28b 28c X 29 30
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NAME OF COMMITTEE (In Full)  Kentucky Medical Association PAC	•		
Full Name (Last, First, Middle Initial)			Date of Disbursement
Matt Lockett Campaign Fund			09 30 2012
Mailing Address 901 Cannonball Drive			09 30 2012
Nicholasville	State Zip Code KY 40356		Transaction ID : SB29.4712
Purpose of Disbursement General Election Contribution to Matt Lockett Campa	aign Fund	011	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	500.00
Senate President	nent For: 2012  Primary	,,	
State: District:			
Full Name (Last, First, Middle Initial)  B. Mike Harmon Campaign Fund			Date of Disbursement
Mailing Address PO Box 458			09 11 2012
Junction City	State Zip Code KY 40440		Transaction ID : SB29.4698
Purpose of Disbursement General Election Contribution to Mike Harmon Cam	paign Fund	011	Amount of Each Disbursement this Period
Candidate Name		Category/ Type	500.00
Senate	nent For: 2012 Primary General Other (specify)		
Full Name (Last, First, Middle Initial)  C. PNC Bank			Date of Disbursement
Mailing Address 2500 Lime Kiln Lane	Mailing Address 2500 Lime Kiln Lane		
Louisville	State Zip Code KY 40222		Transaction ID : SB29.4666
Purpose of Disbursement Credit Card Merchant Fees		004	
Candidate Name		001 Category/ Type	Amount of Each Disbursement this Period 23.00
Senate	nent For: 2012 Primary General Other (specify)	Туро	
SUBTOTAL of Disbursements This Page (optional)  TOTAL This Period (last page this line number only).			1023.00

SCHEDULE B (FEC Form 3X)		l		FOR LINE NUMBER: PAGE 22 OF							
ITEMIZED DISBURSEMENTS			arate schedule(s) category of the	(check only	nly one)						
			Summary Page	21b 27	22 23 28a 28b	24 25 26 28c × 29 30b					
۸۰	ry information copied from such Reports and Staten	ante may	not he sold or us								
	for commercial purposes, other than using the nam										
$\setminus$	NAME OF COMMITTEE (In Full)										
$ \rangle$	Kentucky Medical Association PAC	(Kentud	cky Physicia	ns PAC Fe	deral-KPPAC	Federal)					
_	Full Name (Last, First, Middle Initial)										
A.	PNC Bank				Date of Disburser						
	Mailing Address 2500 Lime Kiln Lane				08 31						
	City	State	Zip Code		Transaction ID :	SP20 4670					
	Louisville	KY	40222		Transaction ID	. 3D29.407U					
	Purpose of Disbursement Credit Card Merchant Fees			001	Amount of Each I	Disbursement this Period					
	Candidate Name			Category/		23.00					
	Office Sought: House Disbursen	nent For: 2	2012	Туре	7	7					
		Primary	General								
	President	Other (spe	cify) 🔻								
_	State: District:										
D	Full Name (Last, First, Middle Initial)				Data of Diahumaan						
D.	PNC Bank				Date of Disburser						
	Mailing Address 2500 Lime Kiln Lane				09 30						
	City S Louisville	State KY	Zip Code 40222		Transaction ID	: SB29.4672					
	Purpose of Disbursement Credit Card Merchant Fees			001	Amount of Each I	Disbursement this Period					
	Candidate Name			Category/ Type		23.00					
	Office Sought: House Disbursen	nent For:	2012	туре		, , , , , ,					
		Primary	General								
		Other (spec	cify) 🔻								
_	State: District:										
C.	Full Name (Last, First, Middle Initial) Richard Marrs Campaign Fund				Date of Disburser	ment					
٠.					M M / D						
	Mailing Address 1929 Blairmore Road				09 30						
	,	State	Zip Code		Transaction ID	· SB29 4727					
		KY	40502		Transaction ID	. 0023.7121					
	Purpose of Disbursement General Election Contribution to Richard Marrs Cam	npaign Fund	i	011	Assessment of Early 1	Distance and Mile Deviced					
	Candidate Name				Amount of Each I	Disbursement this Period					
				Category/ Type		1000.00					
		nent For: 2			,						
		Primary	General								
	State: District:	Other (spe	CIIY) ▼								
	District.										
s	UBTOTAL of Disbursements This Page (optional)					1046.00					
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SCHEDULE B (FEC Form 3X)		FOR LINE NUMBER: PAGE 23 OF							
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only							
	Detailed Summary Page	27	22 23 24 25 26 28a 28b 28c X 29 30l						
Any information copied from such Reports and Star			on for the purpose of soliciting contributions						
or for commercial purposes, other than using the n	ame and address of any politi	cal committee to	o solicit contributions from such committee.						
NAME OF COMMITTEE (In Full)  Kentucky Medical Association PA	C(Kontucky Physicis	ne DAC Fo	odoral KPPAC Fodoral)						
Reflicky Medical Association FA	C(Nemucky Physicia	IIIS PAC FE	ederal-REFAC Federal)						
Full Name (Last, First, Middle Initial)	ı		Date of Disbursement						
A. Robert Benvenuti Campaign Fun	đ		M M / D D / Y Y Y Y						
Mailing Address 2384 Abbyewood Road			09 11 2012						
City	State Zip Code								
Lexington	KY 40515		Transaction ID : SB29.4700						
Purpose of Disbursement General Election Contribution to Robert Benvenu	ti Compoian Fund	1							
Candidate Name	u Campaign Fund	011	Amount of Each Disbursement this Period						
Candidate Name		Category/ Type	1000.00						
Office Sought: House Disburs	sement For: 2012	71	, ,						
Senate	Primary General								
State: District:	Other (specify) ▼								
Full Name (Last, First, Middle Initial)									
B. Ron Crimm Campaign Fund			Date of Disbursement						
Mailing Address BOD 1991			M M / D D / Y Y Y Y Y						
Mailing Address PO Box 43244			09 30 2012						
City	State Zip Code		Transaction ID : SB29.4708						
Louisville Purpose of Disbursement	KY 40253								
General Election Contribution to Ron Crimm Can	npaign Fund	011	Amount of Each Disbursement this Period						
Candidate Name		Category/	500.00						
Office Sought: House Disburs	sement For: 2012	Туре	, , , , ,						
Senate	Primary Seneral								
President	Other (specify)								
State: District:									
Full Name (Last, First, Middle Initial)	noign Committee		Date of Disbursement						
C. Senate Democratic Caucus Cam	paign Committee		M M / D D / Y Y Y Y						
Mailing Address 467 Indian Gap Road			09 30 2012						
City	State Zip Code								
Frankfort	KY 40601		Transaction ID: SB29.4738						
Purpose of Disbursement General Election Caucus Support		044							
Candidate Name		011	Amount of Each Disbursement this Period						
		Category/ Type	1000.00						
	sement For: 2012								
Senate President	Primary General								
State: District:	Other (specify) ▼								
SUBTOTAL of Disbursements This Page (optional	)		2500.00						
TOTAL This Period (last page this line number on	ly)								

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SCHEDULE B (FEC Form 3X)											24 OF 25		
ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the			(chec	k only		٦	o4				
			Summary Page			21b 27	22 282		23 28b	24 28		25 29	26 30l
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or	for commercial purposes, other than using the nam	ne and add	dress of any politi	ical co	ommit	tee to	solicit o	ontri	butions	from s	such co	ommitt	ee.
	NAME OF COMMITTEE (In Full)												
$ \rangle$	Kentucky Medical Association PAC	(Kentu	cky Physicia	ans	PAC	) Fe	deral-	KP	PAC	Fed	eral)		
	Full Name (Last, First, Middle Initial)												
Α.	Senate Republican Caucus Campa	aign Co	mmittee				Date	of D	isburser		Y	T Y	Υ
	Mailing Address PO Box 1068						09		30		_ 20	012	
	City	State	Zip Code				Trai	neac	tion ID :	SR20	4740		
	Frankfort	KY	40602				IIai	1340		ODZ	,.47 40		
	Purpose of Disbursement General Election Caucus Support				011		Amou	ınt of	Each [	Disbur	sement	this F	Period
	Candidate Name				ategor Type	y/		I	1			1000	0.00
	Office Sought: House Disbursen	nent For:	2012						,				
		Primary	Meneral General										
		Other (spe	ecify) 🔻										
_	State: District:												
B.	Full Name (Last, First, Middle Initial)  Stan Lee Campaign Fund						Date	of D	isburser	nent			
	Starr Lee Campaign rund						M	M. /	D 1		V V	Y	Y
	Mailing Address PO Box 2090						09	)	11			012	
	City	State	Zip Code				Tra	nsac	tion ID :	SB29	4701		
	Lexington	KY	40588				110	1540		ODZ			
	Purpose of Disbursement General Election Contribution to Stan Lee Campaig	n Fund		011			Amou	ınt of	Each [	Disbur	sement	this F	Period
	Candidate Name				ategor Type	y/			40 1			500	0.00
	Office Sought: House Disbursen	nent For:	2012		- 7				,		,		
	Senate	Primary	General										
		Other (spe	ecify) 🔻										
	State: District:												
_	Full Name (Last, First, Middle Initial)						Data	of D	isburser	nont			
О.	Susan Westrom Campaign Fund						Date	W			V	Y	V
	Mailing Address P.O. Box 22778						09		11	_		012	Ť
	City	State	Zip Code										
	Lexington	KY	40522				ıra	nsac	tion ID :	SB29	9.4703		
	Purpose of Disbursement VOIDED CHECK - Filled out incorrectly				011	$\neg$							
	Candidate Name			L	011		Amou	int of	Each [	Disbur	sement	this F	Period
	Candidate Name				ategor Type	·y/						0	0.00
	Office Sought: House Disbursen	nent For:	2012	<u> </u>	.,,,,			_	7		,		
		Primary	General										
	President	Other (spe	ecify) 🔻										
_	State: District:												
s	SUBTOTAL of Disbursements This Page (optional)					•				1 4		1500	.00
$\vdash$								=	,	_		-	_
T	OTAL This Period (last page this line number only)					•			7				

SCHEDULE B (FEC Form 3X)		EOD LINE	NUMBER: PAGE 25 OF 25
ITEMIZED DISBURSEMENTS	Use separate schedule(s)	FOR LINE NUMBER: PAGE 25 OF 25 (check only one)	
II LIVIIZED DIODONOLIVILIVIO	for each category of the Detailed Summary Page	21b	22 23 24 25 26
	Detailed Sulfilliary Fage	27	28a 28b 28c X 29 30b
Any information copied from such Reports and Staten			
or for commercial purposes, other than using the name	ne and address of any politic	al committee to	solicit contributions from such committee.
NAME OF COMMITTEE (In Full)			
$ \; angle$ Kentucky Medical Association PAC	(Kentucky Physicia	ns PAC Fe	deral-KPPAC Federal)
Full Name (Last, First, Middle Initial)		ı	
A. Susan Westrom Campaign Fund			Date of Disbursement
			M M / D D / Y Y Y
Mailing Address P.O. Box 22778			09 30 2012
City	State Zip Code		
City State Zip Code Lexington KY 40522		Transaction ID: SB29.4717	
Purpose of Disbursement			
General Election Contribution to Susan Westrom Ca	ampaign Fund	011	Amount of Each Disbursement this Period
		Category/	500.00
Office Cought	ant Fam. 2012	Type	300.00
	nent For: 2012 Primary X General		
	Other (specify)		
State: District:	- · · · (-p-20.1)		
Full Name (Last, First, Middle Initial)			
B. Thomas M. McKee Campaign Fund			Date of Disbursement
			M M / D D / Y Y Y Y
Mailing Address 162 Culpepper Drive			09 30 2012
City	State Zip Code		
Cynthiana	KY 41031		Transaction ID : SB29.4716
Purpose of Disbursement		$\overline{}$	
General Election Campaign Fund  Ondidate Name  Ondidate Name			Amount of Each Disbursement this Period
Candidate Name		Category/	500.00
Office Sought: House Disbursen	nent For: 2012	Туре	
	Primary General		
	Other (specify) ▼		
State: District:			
Full Name (Last, First, Middle Initial)			
C. Tim Kline Campaign Fund			Date of Disbursement
Mailing Address 5390 Rooch Hill Lang			09 30 2012
Mailing Address 5380 Beech Hill Lane			03 00 2012
City	State Zip Code		Transaction ID : SB29.4707
	KY 42301		Transaction iD . 3023.4707
Purpose of Disbursement General Election Contribution to Tim Kline Campaign Fund  011			
Candidate Name			Amount of Each Disbursement this Period
		Category/ Type	500.00
Office Sought: House Disbursen	nent For: 2012		
	Primary General		
	Other (specify) ▼		
State: District:			
CURTOTAL of Distance and Till D. ( )			1500.00
SUBTOTAL of Disbursements This Page (optional)		·····•	1000.00
TOTAL This Period (last page this line number only)			26895.05