REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

MAY 15 12 19 PM '98

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)

KY Educational Medical PAC

ADDRESS (number and street) ☐ Check if different than previously reported

4965 US Hwy 42, Suite 2000

CITY, STATE and ZIP CODE

Louisville, KY 40222

2. FEC IDENTIFICATION NUMBER

C00016444

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

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report

☐ July 15 Quarterly Report

☐ October 15 Quarterly Report

☐ January 31 Year End Report

☐ July 31 Mid Year Report (Non-election Year Only)

☐ Termination Report

Monthly Report Due On:

☐ February 20 ☐ June 20 ☐ October 20
☐ March 20 ☐ July 20 ☐ November 20
☐ April 20 ☐ August 20 ☐ December 20
☐ May 20 ☐ September 20 ☐ January 31

☒ Twelfth day report preceding Primary (Type of Election) election on 5/26/98 in the State of Kentucky

☐ Thirtieth day report following the General Election on _____ in the State of _____.

(b) Is this Report an Amendment? ☐ YES ☒ NO

SUMMARY

5. Covering Period 4/1/98 through 5/6/98

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 1998		$120,111.23
(b) Cash on Hand at Beginning of Reporting Period	$ 133,390.34	
(c) Total Receipts (from Line 19)	$ 6,226.02	$ 38,141.81
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 139,616.36	$158,253.04
7. Total Disbursements (from Line 30)	$ 32,858.94	$ 51,495.62
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 106,757.42	$106,757.42
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ -0-	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ -0-	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer
Michael W. Dee, MD

Signature of Treasurer
Michael W. Dee MD

Date
5/11/98

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

FEC FORM 3X
(revised 9/93)

FE6AN089

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE: KY Educational Medical PAC

REPORT COVERING PERIOD FROM TO: 5/6/98

	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)			11(a)(i)
ii. Unitemized	5,630.00	35,465.00	11(a)(ii)
iii. Total (add i and ii) ➤	5,630.00	35,465.00	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a iii, b and c) ➤	5,630.00	35,465.00	11(d)
12. Transfers From Affiliated/Other Party Committees	207.52	1,582.52	12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)	388.50	1,094.29	17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	6,226.02	38,141.81	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	6,226.02	38,141.81	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures	2,053.94	8,056.62	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	2,053.94	8,056.62	21(c)
22. Transfers to Affiliated/Other Party Committees	2,805.00	17,510.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees			23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) ➤			28(d)
29. Other Disbursements	28,000.00	25,929.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	32,858.94	51,495.62	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	32,858.94	51,495.62	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	5,630.00	35,465.00	32
33. Total Contribution Refunds (from line 28d)	-0-	-0-	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	5,630.00	35,465.00	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	2,053.94	8,056.62	35
36. Offsets to Operating Expenditures (from line 15)	-0-	-0-	36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	2,053.94	8,056.62	37

FE8AN060

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

KY Educational Medical PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Kentucky Telco FCU 3740 Bardstown Rd Louisville, KY 40218 Receipt For: [ ] Primary [ ] General [x] Other (specify): Interest	Aggregate Year-to-Date $1,099.29	4/1/98	393.50
B. Kentucky TElco FCU (Same as Above) Receipt For: [ ] Primary [ ] General [x] Other (specify): bank charges	Aggregate Year-to-Date $	4/30/98	(5.00)
C. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $		
D. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $		
E. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $		
F. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $		
G. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date $		

SUBTOTAL of Receipts **This Page** (optional) 388.50

TOTAL This Period (last page this line number only) 388.50

FE8AN^'99

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 12

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NAME OF COMMITTEE (In Full)

Kentucky Educational Medical PAC

A. Full Name, Mailing Address and ZIP Code AMPAC 1101 Vermont Avenue NW Washington, DC 20005	Name of Employer	Date (month, day, year) 4/14/98	Amount of Each Receipt this Period 207.52
Receipt For: ☐ Primary ☐ General ☒ Other (specify): Joint Fundraising	Occupation Aggregate Year-to-Date > $1,582.52		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date > $		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date > $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional) 207.52

TOTAL This Period (last page this line number only) 207.52

FE6ANY'98

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 22

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NAME OF COMMITTEE (In Full)

Kentucky Educational Medical PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
AMPAC 1101 Vermont Avenue NW Washington, DC 20005	Transfer to Federal PAC Disbursement for: [ ] Primary [ ] General [x] Other (specify) Transfer	4/30/98	2,805.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) 2,805.00

TOTAL This Period (last page this line number only) 2,805.00

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 21 (b)

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NAME OF COMMITTEE (In Full)

Kentucky Educational Medical PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
KY Medical Association 4965 US Hwy 42, Ste 2000 Louisville, KY 40222	Administration Fee X Other (specify) Admin Fee	4/30/98	1,953.94
B. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for: Primary General Other (specify)**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Don R. Chasteen 4965 US Hwy 42, Ste 2000 Louisville, KY 40222	Consultant Fee X Other (specify) Consultant Fee	4/30/98	100.00
C. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for: Primary General Other (specify)**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
D. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for: Primary General Other (specify)**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
E. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for: Primary General Other (specify)**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
F. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for: Primary General Other (specify)**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
G. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for: Primary General Other (specify)**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
H. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for: Primary General Other (specify)**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
I. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement / Disbursement for: Primary General Other (specify)**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**

SUBTOTAL of Disbursements This Page (optional)	2,053.94
TOTAL This Period (last page this line number only)	2,053.94

FE6ANKE6

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 29

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NAME OF COMMITTEE (in Full)

Kentucky Educational Medical PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Robert Leeper Campaign Fund 2295 S. Friendship Rd Paducah, KY 42003	Candidate Support Senate District 2 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/30/98	1,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Paul Herron Campaign Fund 2382 Wood Dr, Apt B Henderson, KY 42420	Candidate Support Senate District 4 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/30/98	1,000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Alicy Forgy Kerr Campaign Fund PO Box 8581 Lexington, KY 40533	Candidate Support Senate District 12 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/30/98	1,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
David Williams Campaign Fund PO Box 666 Burkesville, KY 42717	Candidate Support Senate District 16 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/30/98	500.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Charlie Borders Campaign Fund 330 Seaton Dr Russell, KY 41169	Candidate Support Senate District 18 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/30/98	500.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Marshall Long Campaign Fund 1204 Washington St Shelbyville, KY 40065	Candidate Support Senate District 20 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/30/98	1,000.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Katie K. Stine Campaign Fund 15 Cliffview Ft. Thomas, KY 41075	Candidate Support Senate District 24 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/30/98	1,000.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ed Miller Campaign Fund 300 Queensway Dr Cynthiana, KY 41031	Candidate Support Senate District 30 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/30/98	1,000.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ed Worley Campaign Fund PO Box 659 Richmond, KY 40475	Candidate Support Senate District 34 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/30/98	1,000.00

SUBTOTAL of Disbursements This Page (optional) 8,000.00

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)

Kentucky Educational Medical PAC

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Mark Metcalf Campaign Fund 102 Danville St Lancaster, KY 40444	Candidate Support Senate District 34 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/30/98	1,000.00
B. Charles Geveden Campaign Fund PO Box 518 Wickliffe, KY 42087	Candidate Support House District 1 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/30/98	500.00
C. Fred Nesler Campaign Fund PO Box 323 Mayfield, KY. 42066	Candidate Support House District 2 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/30/98	500.00
D. John Arnold Campaign Fund 1301 North Lee Sturgis, KY 42459	Candidate Support House District 7 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/30/98	1,000.00
E. John W. Adams Campaign Fund 6255 Huffman Mill Rd Hopkinsville, KY 42240	Candidate support House District 8 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/30/98	250.00
F. Dwight Butler Campaign Fund PO Box 194 Harned, KY 40144	Candidate Support House District 18 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/30/98	500.00
G. Dottie Sims Campaign Fund 459 Violet Ave Horse Cave, KY 42749	Candidate Support House District 19 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/30/98	250.00
H. Rob Wilkey Campaign Fund PO Box 305 Franklin, KY 42135	Candidate Support House District 22 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/30/98	500.00
I. Stephen Nunn Campaign Fund 121 E Main St Glasgow, KY 42141	Candidate Support House District 23 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/30/98	500.00

SUBTOTAL of Disbursements This Page (optional) 5,000.00

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 3 OF 5

FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)

Kentucky Educational Medical PAC

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Jimmie Lee Campaign Fund 901 Dogwood Dr Elizabethtown, KY 42701	Candidate Support House District 25 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/30/98	500.00
B. John Michael Weaver Campaign Fund 329 S. Boundary Rd Elizabethtown, KY 42071	Candidate Support HOUSE District 26 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/30/98	250.00
C. Steven Riggs Campaign Fund 8102 Thornwood Dr Louisville, KY 40220	Candidate Support House District 31 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/30/98	1,000.00
D. Mary Lou Marzian Campaign Fund 2007 Tyler Lane Louisville, KY 40205	Candidate Support House District 34 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/30/98	500.00
E. Jim Wayne Campaign Fund 1280 Royal Ave Louisville, KY 40204	Candidate Support House District 35 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/30/98	250.00
F. Joni Jenkins Campaign Fund 2010 O'Brien Ct Shively, KY 40216	Candidate Support House District 44 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/30/98	250.00
G. Jodie Haydon Campaign Fund 106 Hillcrest Bardstown, KY 40004	Candidate Support House District 50 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/30/98	250.00
H. Joe Barrows Campaign Fund 152 Stout Ave Versailles, KY 40383	Candidate Support Huse District 56 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/30/98	1,000.00
I. Paul Marcotte Campaign Fund 10674 Palestine Dr Union, KY 41091	Candidate Support House District 60 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/30/98	500.00

SUBTOTAL of Disbursements This Page (optional) 4,500.00

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

FE6AN058

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 4 OF 5

FOR LINE NUMBER 29

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NAME OF COMMITTEE (in Full)

Kentucky Educational Medical PAC

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Royce Adams Campain Fund 580 Bannister Rd Dry Ridge, KY 41035	Candidate Support House District 66 Disbursement for: [x] Primary [ ] General [ ] Other (specify)	4/30/98	500.00
B. Jim Callahan Campaign Fund 10 Colonel Point Dr Wilder, KY 40176	Candidate Support House District 67 Disbursement for: [xx] Primary [ ] General [ ] Other (specify)	4/30/98	500.00
C. Marty Wallingford Campaign Fund 6051 Cahill Rd Maysville, KY 41056	Candidate Support House District 70 Disbursement for: [x] Primary [ ] General [ ] Other (specify)	4/30/98	1,000.00
D. Jim Lovell Campaign Fund 625 High Street Paris, KY 40361	Candidate Support House District 72 Disbursement for: [XX] Primary [ ] General [ ] Other (specify)	4/30/98	500.00
E. Ruth ann Palumbo Campaign Fund 10 Deepwood Drive Lexington, KY 40505	Candidate Support House District 76 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/30/98	1,000.00
F. Larry Brandstetter Campaign Fund 1941 Long Pond Walk East Lexington, KY 40502	Candidate Support House District 79 Disbursement for: [x] Primary [ ] General [ ] Other (specify)	4/30/98	500.00
G. Harry Moberly Campaign Fund PO Box 721 Richmond, KY 40475	Candidate Support House District 81 Disbursement for: [x] Primary [ ] General [ ] Other (specify)	4/30/98	1,000.00
H. Charles Siler Campaign Fund 3570 Tackett Creek Rd Williamsburg, KY 40769	Candidate Support House District 82 Disbursement for: [x] Primary [ ] General [ ] Other (specify)	4/30/98	500.00
I. Culley Abner Campaign Fund HC 36, Box 155 Buckhorn, KY 41721	Candidate Support House District 84 Disbursement for: [x] Primary [ ] General [ ] Other (specify)	4/30/98	1,000.00

SUBTOTAL of Disbursements This Page (optional)	6,500.00
TOTAL This Period (last page this line number only)	

FE6A4060

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)

Kentucky Educational Medical PAC

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
A. Barbara Colter Campaign Fund 200 Langdon Ave Manchester, KY 40962	Candidate Support House District 90 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/30/98	500.00
B. Jack Howard Campaign Fund 116 Vermillion Ave Whitesburg, KY 41858	Candidate Support House District 91 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/30/98	1,000.00
C. Phillip Childers Campaign Fund PO Box 20 Garner, KY 41817	Candidate Support House District 92 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/30/98	500.00
D. Chris Ratliff Campaign Fund PO Drawer 1379 Pikeville, KY 41502	Candidate Support House District 93 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/30/98	500.00
E. Herman Lester Campaign Fund 138 Cedar Creek Rd Pikeville, KY 41501	Candidate support House District 94 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/30/98	1,000.00
F. Rocky Adkins Campaign Fund PO Box 688 Sandy Hook, KY 41171	Candidate Support House District 99 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	4/30/98	500.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional) 4,000.00

TOTAL This Period (last page this line number only) 28,000.00

FE6ANDBI

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	Date of Receipt
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED 5-11-98
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked _____ and/or Date of Receipt
☐	Electronic Filing	

SEH — PREPARER

5-15-98 — DATE PREPARED

(4/98)