

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

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FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Kentuckians for Strong Leadership			FEC IDENTIFICATION NUMBER ▼ C C00543256		
Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on M M M / D D D / Y Y Y Y Y Y Y Y					
Full Name (Last, First, Middle Initial) of Payee Main Street Media			Date M M / D D / Y Y Y Y Y Y Y Y 07 / 01 / 2013		
Mailing Address P.O. Box 2093			Amount 181295.00		
City Alexandria		State VA	Zip Code 22313		
Purpose of Expenditure TV / Media Placement		Category/ Type 		Office Sought: ☐ House State: KY ☒ Senate District: ☐ President	
Name of Federal Candidate Supported or Opposed by Expenditure: Alison Grimes				Check One: ☐ Support ☒ Oppose	
Calendar Year-To-Date Per Election for Office Sought 195020.74			Disbursement For: ☐ Primary ☒ General 2014 ☐ Other (specify) ▶		
Full Name (Last, First, Middle Initial) of Payee Upgrade Films			Date M M / D D / Y Y Y Y Y Y Y Y 07 / 01 / 2013		
Mailing Address 3299 K Street NW, Ste 200			Amount 13725.74		
City Washington		State DC	Zip Code 20007		
Purpose of Expenditure TV / Media Production		Category/ Type 		Office Sought: ☐ House State: KY ☒ Senate District: ☐ President	
Name of Federal Candidate Supported or Opposed by Expenditure: Alison Grimes				Check One: ☐ Support ☒ Oppose	
Calendar Year-To-Date Per Election for Office Sought 195020.74			Disbursement For: ☐ Primary ☒ General 2014 ☐ Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			195020.74		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶			195020.74		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. Caleb Crosby [Electronically Filed] Signature _____ Date M M / D D / Y Y Y Y Y Y Y Y 07 / 03 / 2013					