

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

RECEIVED FEDERAL MAIL OPERATIONS CENTER

2004 APR 15 A 9:46 Calif. Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. KY PROLIFE POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 3101 SO. RA. AVE. Check if different than previously reported. (ACC) LOUISVILLE KY 40213

2. FEC IDENTIFICATION NUMBER 000164004 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X] NEW (N) [] AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) [X] July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Transition Report (TR) (b) Monthly Report Due On: Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only) Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on: In the State of: (d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on: In the State of:

5. Covering Period 01/01/2004 through 03/31/2004

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 SUSAN K KENNEY Signature of Treasurer [Signature] Date

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 278 (Rev. 02/2003)

Page 2

Write or Type Committee Name

Ky ProLife Political Action Committee

Report Covering the Period:

From:

01 01 2004

To:

03 31 2004

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

| | | |
|---|------------------|------------------|
| 6. (a) Cash on Hand January 1, <i>2004</i> | | |
| (b) Cash on Hand at Beginning of Reporting Period | <i>3,372.90</i> | |
| (c) Total Receipts (from Line 18) | <i>14,458.00</i> | <i>14,458.00</i> |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | <i>17,830.90</i> | <i>17,830.90</i> |
| 7. Total Disbursements (from Line 31) | <i>6,000.94</i> | <i>6,000.94</i> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | <i>11,829.96</i> | <i>11,829.96</i> |
| 9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D) | | |
| 10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D) | | |

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

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

FED Form 8X (Rev. 02/2005)

Page 3

Write or Type Committee Name

KY PRO LIFE POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

01/01/2004

To:

03/31/2004

| I. Receipts | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From: | | |
| (a) Individuals/Persons Other | | |
| Than Political Committees | | |
| (i) Itemized (use Schedule A)..... | 259,000 | |
| (ii) Unitemized..... | 986,800 | |
| (ii) TOTAL (add | | |
| Lines 11(a)(i) and (ii)..... ▶ | 1,445,800 | 1,445,800 |
| (b) Political Party Committees..... | | |
| (c) Other Political Committees | | |
| (such as PACs)..... | | |
| (d) Total Contributions (add Lines | | |
| 11(a)(ii), (b), and (c)) (Carry | | |
| Totals to Line 33, page 5)..... ▶ | 1,445,800 | 1,445,800 |
| 12. Transfers From Affiliated/Other | | |
| Party Committees..... | | |
| 13. All Loans Received..... | | |
| 14. Loan Repayments Received..... | | |
| 15. Offsets To Operating Expenditures | | |
| (Funds, Rebates, etc.) | | |
| (Carry Totals to Line 37, page 5)..... | | |
| 16. Refunds of Contributions Made | | |
| to Federal Candidates and Other | | |
| Political Committees..... | | |
| 17. Other Federal Receipts | | |
| (Dividends, Interest, etc.)..... | | |
| 18. Transfers from Non-Federal and Levin Funds | | |
| (a) Non-Federal Account | | |
| (from Schedule H3)..... | | |
| (b) Levin Funds (from Schedule H5)..... | | |
| (c) Total Transfers (add 18(a) and 18(b))..... | | |
| 19. Total Receipts (add Lines 11(d), | | |
| 12, 13, 14, 15, 16, 17, and 18(c))..... ▶ | 1,445,800 | 1,445,800 |
| 20. Total Federal Receipts | | |
| (subtract Line 16(c) from Line 19)..... ▶ | 1,445,800 | 1,445,800 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 08/2002)

Page 4

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | | |
| (ii) Non-Federal Share | | |
| (b) Other Federal Operating Expenditures | 1,647.71 | 1,647.71 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 1,647.71 | 1,647.71 |
| 22. Transfers to Affiliated/Other Party Committees | | |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees | 1,000.00 | 1,000.00 |
| 24. Independent Expenditures (see Schedule E) | 3,353.23 | 3,353.23 |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(f)) (see Schedule F) | | |
| 26. Loan Repayments Made | | |
| 27. Loans Made | | |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| (b) Political Party Committees | | |
| (c) Other Political Committees (such as PADs) | | |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) | | |
| 29. Other Disbursements | | |
| 30. Federal Election Activity (2 U.S.C. §431(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | | |
| (ii) "Levy" Share | | |
| (b) Federal Election Activity Paid Entirely With Federal Funds | | |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii), and 30(b)) | | |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) | 6,000.94 | 6,000.94 |
| 32. Total Federal Disbursements (subtract Line 21(a)(i) and Line 30(a)(i) from Line 31) | 6,000.94 | 6,000.94 |

DETAILED SUMMARY PAGE

of Disbursements

Page 5

FEC Form 300 (Rev. 02/2003)

| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 14,458.00 | 14,458.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | - | - |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 14,458.00 | 14,458.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 1,647.71 | 1,647.71 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | - | - |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 1,647.71 | 1,647.71 |

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

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

| | | | | | |
|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|
| FOR LINE NUMBER: | | PAGE | | OF | |
| <input type="checkbox"/> 10 | <input type="checkbox"/> 11 | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |
| <input type="checkbox"/> 16 | <input type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19 | <input type="checkbox"/> 20 | <input type="checkbox"/> 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)
KY PROLIFE POLITICAL ACTION COMMITTEE

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) A. BORDERS, JULIE | | Date of Receipt 01 03 2007 |
| Mailing Address 2004 SUMMER FIELD DR | | Amount of Each Receipt This Period 250.00 |
| City Louisville | State KY Zip Code 40220 | |
| FEC ID number of contributing federal political committee C | | |
| Name of Employer N/A | Occupation | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date 250.00 | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) B. RAELIN, RICHARD | | Date of Receipt 01 03 2007 |
| Mailing Address 3240 ELLIS WAY | | Amount of Each Receipt This Period 240.00 |
| City Louisville | State KY Zip Code 40220 | |
| FEC ID number of contributing federal political committee C | | |
| Name of Employer DOFL | Occupation COMPUTER PROGRAMMER | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date 240.00 | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) C. LECHLITER, RICHARD | | Date of Receipt 01 03 2007 |
| Mailing Address 1001 CLUB LN | | Amount of Each Receipt This Period 250.00 |
| City Louisville | State KY Zip Code 40207 | |
| FEC ID number of contributing federal political committee C | | |
| Name of Employer ANDERSON HEALTH CARE | Occupation CHIEF FINANCIAL OFFICER | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date 250.00 | |

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional) | 740.00 |
| TOTAL This Period (see page this line number only) | |

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

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

FOR LINE NUMBER:
(check only one)

PAGE 2 OF 4

| | | | |
|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17 | | | |

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NAME OF COMMITTEE (in full)

KY PROLIFE POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. **FLYNN, JESSIE + FELAINIE**

Mailing Address

1085 STREGLER FARM LN

City

LEBANON KY

State

Zip Code

40150

FEC ID number of contributing federal political committee.

C

Date of Receipt

03 09 2009

Amount of Each Receipt this Period

50000

Name of Employer

RETIRED

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

50000

Full Name (Last, First, Middle Initial)

B. **KOKALIS, PAUL**

Mailing Address

P.O. Box 24660

City

Louisville

State

Zip Code

40224

FEC ID number of contributing federal political committee.

C

Date of Receipt

03 09 2009

Amount of Each Receipt this Period

20000

Name of Employer

MATERIAL HAND

Occupation

SALES

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

20000

Full Name (Last, First, Middle Initial)

C. **McINTYRE, ROBERT + MARY**

Mailing Address

620 GARDEN DR

City

Louisville

State

Zip Code

40202

FEC ID number of contributing federal political committee.

C

Date of Receipt

03 07 2009

Amount of Each Receipt this Period

20000

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

20000

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

90000

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

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

FOR LINE NUMBER: PAGE 3 OF 4
(check only one)

| | | | | |
|------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 17 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | |

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NAME OF COMMITTEE (in Full)
KY POLICE POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Simon, Nicholas

Mailing Address
7032 Taylorsville Rd

City **Louisville** State **KY** Zip Code **40220**

FEC ID number of contributing federal political committee: **C**

Date of Receipt
03 / 09 / 2007

Amount of Each Receipt this Period
500.00

Name of Employer: **PUBLISHERS PRINTING** Occupation: _____

Receipt For:
 Primary General Other (specify) _____

Aggregate Year-to-Date
500.00

B. Full Name (Last, First, Middle Initial)
MONAGHERY, ROBERT + DIANNE

Mailing Address
1709 GRIFFIN GATE

City **Louisville** State **KY** Zip Code **40205**

FEC ID number of contributing federal political committee: **C**

Date of Receipt
03 / 12 / 2007

Amount of Each Receipt this Period
250.00

Name of Employer: **CORBIN + ALLEN** Occupation: **CIA**

Receipt For:
 Primary General Other (specify) _____

Aggregate Year-to-Date
250.00

C. Full Name (Last, First, Middle Initial)
CORLIAR, ROBERT

Mailing Address
1909 FOLMERE ST

City **Louisville** State **KY** Zip Code **40216**

FEC ID number of contributing federal political committee: **C**

Date of Receipt
03 / 31 / 2007

Amount of Each Receipt this Period
1000.00

Name of Employer: _____ Occupation: _____

Receipt For:
 Primary General Other (specify) _____

Aggregate Year-to-Date
1000.00

SUBTOTAL of Receipts This Page (optional) **1750.00**

TOTAL This Period (last page this line number only) **1750.00**

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

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

FOR LINE NUMBER: (check only one)

PAGE 4 OF 4

| | | | |
|------------------------------|------------------------------|------------------------------|-----------------------------|
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (in Full)

PROLIFE Political Action Committee

Full Name (Last, First, Middle Initial)

A. WILMOUR, DON & TINA

Mailing Address

531 RIDGEWOOD RD

City **Louisville**

State **KY**

Zip Code **40220**

FEC ID number of contributing federal political committee

C

Name of Employer

SELF

Occupation

REALTOR

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

03 31 2004

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. LECHLESTER, RICHARD

Mailing Address

601 CLUB LN

City **Louisville**

State **KY**

Zip Code **40207**

FEC ID number of contributing federal political committee

C

Name of Employer

KENNEDY HEALTH CARE

Occupation

Chief Financial Officer

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

03 31 2004

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. WAGNER, Camille

Mailing Address

6007 BENTHILL RD

City **Louisville**

State **KY**

Zip Code **40222**

FEC ID number of contributing federal political committee

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

03 31 2004

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

1,200.00

TOTAL This Period (last page this line number only)

4,590.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE / OF 3

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | <input type="checkbox"/> 26 |
| <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 | <input type="checkbox"/> 30c |

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NAME OF COMMITTEE (in Full)

KY PROLIFE Political Action Committee

Full Name (Last, First, Middle Initial)

A. KEAR ALICE

Mailing Address: **3274 BONDCLAY DR**

City: **LEXINGTON** State: **KY** Zip Code: **40513**

Purpose of Disbursement: **CONTRIBUTION**

Candidate Name: **Alice Forsy KEAR** Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **KY** District:

Date of Disbursement:

01 20 2004

Amount of Each Disbursement this Period

1,000.00

B. U.S. POSTMASTER

Mailing Address: **ST MATTHEWS**

City: **Louisville** State: **KY** Zip Code: **40207**

Purpose of Disbursement: **KEAR MAILING (510)**

Candidate Name: **Alice Forsy KEAR** Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

02 09 2004

Amount of Each Disbursement this Period

84.15

C. ALLEGRA

Mailing Address: **2680 Technology DR**

City: **Louisville** State: **KY** Zip Code: **40299**

Purpose of Disbursement: **POSTAGE FOR (2) KEAR MAILINGS**

Candidate Name: **Alice Forsy KEAR** Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

02 10 2004

Amount of Each Disbursement this Period

1,484.52

SUBTOTAL of Disbursements This Page (optional) ▶

2,568.67

TOTAL This Period (next page this line number only) ▶

SCHEDULE B (FEC Form 3X)

ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 2 OF 3

21a 22 23 24 25 26
 27 28a 28b 29 30a

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NAME OF COMMITTEE (In Full)

KY PROLIFE Political Action Committee

Full Name (Last, First, Middle Initial)

A. U.S. POSTMASTER

Mailing Address

ST. MATTHEWS

City

Louisville

State

KY

Zip Code

40207

Purpose of Disbursement

2nd KERR Mailing

Candidate Name

Alice Faye Kerr

Category/Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

Date of Disbursement

02 12 2004

Amount of Each Disbursement this Period

80.82

B.

U.S. POSTMASTER

Mailing Address

ST. MATTHEWS

City

Louisville

State

KY

Zip Code

40207

Purpose of Disbursement

MAILING MARCH FUNDRAISER

Candidate Name

Category/Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

Date of Disbursement

02 25 2004

Amount of Each Disbursement this Period

412.71

C.

U.S. POSTMASTER

Mailing Address

ST. MATTHEWS

City

Louisville

State

KY

Zip Code

40207

Purpose of Disbursement

BE Act Permit 104

Candidate Name

Category/Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

Date of Disbursement

03 02 2004

Amount of Each Disbursement this Period

200.00

SUBTOTAL of Disbursements This Page (optional)

693.53

TOTAL This Period (last page this line number only)

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

| | | | | | |
|---|-----------------------------|-----------------------------------|------------------------------|------------------------------|-----------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | | PAGE 3 OF 3 | |
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input type="checkbox"/> 23 | <input type="checkbox"/> 24 | <input type="checkbox"/> 25 | |
| <input type="checkbox"/> 26 | <input type="checkbox"/> 27 | <input type="checkbox"/> 28a | <input type="checkbox"/> 28b | <input type="checkbox"/> 28c | <input type="checkbox"/> 29 |

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NAME OF COMMITTEE (in Full)
KY POLICE Political Action Committee

A. **U.S. POSTMASTER**
 Mailing Address: **ST MATTHEWS**
 City: **Louisville** State: **KY** Zip Code: **40207**
 Purpose of Disbursement: **DR. ARON DEPOSIT FRANCHISE #104**
 Candidate Name: _____
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) _____
 State: _____ District: _____

Date of Disbursement: **03 22 2004**
 Amount of Each Disbursement this Period: **100.00**

B. **ALLEGRA PRINTING**
 Mailing Address: **2080 TECHNOLOGY DR**
 City: **Louisville** State: **KY** Zip Code: **40399**
 Purpose of Disbursement: **(2) KERR MAILINGS**
 Candidate Name: **ALICE JOSEY KERR**
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) _____
 State: _____ District: _____

Date of Disbursement: **03 26 2004**
 Amount of Each Disbursement this Period: **1703.74**

C. **PENNANT LITHO**
 Mailing Address: **7701 PINELWOOD RD**
 City: **Louisville** State: **KY** Zip Code: **40218**
 Purpose of Disbursement: **800 ENVELOPES + MAIL 3984 KERRS**
 Candidate Name: _____
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) _____
 State: _____ District: _____

Date of Disbursement: **03 26 2004**
 Amount of Each Disbursement this Period: **935.00**

SUBTOTAL of Disbursements This Page (optional) **2738.74**
TOTAL This Period (last page this line number only) **6000.94**

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

PAGE _____ OF _____
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) **KY PRO-LIFE POLITICAL ACTION COMMITTEE** FEC IDENTIFICATION NUMBER **000164004**

Check if 24-hour notice 48-hour notice

| | | |
|---|-----------------------------|---|
| Full Name (Last, First, Middle Initial) of Payee U.S. POSTMASTER | | Date 02-12-2004 |
| Mailing Address ST MATTHEWS | | Amount 80.82 |
| City Louisville | State KY | Zip Code 40207 |
| Purpose of Expenditure 2nd KERR MAILING | Category/Type 004 | Office Sought: <input checked="" type="checkbox"/> House State: KY <input type="checkbox"/> Senate District: 6 <input type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure: ALICE FORSY KERR | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose |
| Calendar Year-To Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) SPECIAL ALIAS |

| | | |
|---|-----------------------------|---|
| Full Name (Last, First, Middle Initial) of Payee ALLEGRA PRINTING | | Date 03-26-2004 |
| Mailing Address 2680 TECHNOLOGY DR. | | Amount 1,703.77 |
| City Louisville | State KY | Zip Code 40299 |
| Purpose of Expenditure 2. KERR MAILINGS | Category/Type 004 | Office Sought: <input checked="" type="checkbox"/> House State: KY <input type="checkbox"/> Senate District: 6 <input type="checkbox"/> President |
| Name of Federal Candidate Supported or Opposed by Expenditure: ALICE FORSY KERR | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose |
| Calendar Year-To Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) SPECIAL ELECT. |

| | |
|---|-----------------|
| (a) SUBTOTAL of Itemized Independent Expenditures | 1,784.56 |
| (b) SUBTOTAL of Unitemized Independent Expenditures | . |
| (c) TOTAL Independent Expenditures | 1,784.56 |

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.

Signature *Susan K Kenney* Date **04-07-2004**

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

PAGE 01 OF 01
FOR LINE 24 OF FORM 3X

| | |
|---|---|
| NAME OF COMMITTEE (In Full) KY PRO-LIFE POLITICAL ACTION COMMITTEE | FEC IDENTIFICATION NUMBER 000164004 |
| Check <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice | |

| | |
|--|---------------------------|
| Full Name (Last, First, Middle Initial) of Payor U.S. POSTMASTER | Date 02 09 2004 |
| Mailing Address ST. MATTHEWS | Amount 84.15 |
| City State Zip Code Louisville KY 40207 | |

| | | |
|---|-----------------------------|---|
| Purpose of Expenditure Mailing for Alice Forgy Kerr | Category Type 004 | Office Sought: <input checked="" type="checkbox"/> House State: KY <input type="checkbox"/> Senate District: 6 <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose |
| Name of Federal Candidate Supported or Opposed by Expenditure: Alice Forgy Kerr | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) SPECIAL ELECTION |
| Calendar Year-To-Date Per Election for Office Sought 84.15 | | |

| | |
|--|---------------------------|
| Full Name (Last, First, Middle Initial) of Payor Allegria Printing | Date 02 10 2004 |
| Mailing Address 2100 Technology Dr | Amount 1,484.52 |
| City State Zip Code Louisville KY 40299 | |

| | | |
|---|-----------------------------|--|
| Purpose of Expenditure Printing for 2 Kerr Mailings | Category Type 004 | Office Sought: <input type="checkbox"/> House State: KY <input type="checkbox"/> Senate District: 6 <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose |
| Name of Federal Candidate Supported or Opposed by Expenditure: Alice Forgy Kerr | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) SPECIAL ELECTION |
| Calendar Year-To-Date Per Election for Office Sought 1,568.67 | | |

| | |
|---|-----------------|
| (a) SUBTOTAL of Itemized Independent Expenditures | 1,568.67 |
| (b) SUBTOTAL of Unitemized Independent Expenditures | |
| (c) TOTAL Independent Expenditures | 1,568.67 |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, concert, 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.

Signature: *Susan K. Kennedy* Date: **04 07 2004**

Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
 FOR INCOMING DOCUMENTS**

The FEC addend this page to the end of this filing to indicate how it was received.

| | |
|--|-------------------------------|
| <input type="checkbox"/> Hand Delivered | Date of Receipt |
| <input checked="" type="checkbox"/> USPS First Class Mail | Postmarked |
| <input type="checkbox"/> USPS Registered/Certified/Priority/Express Mail | Postmarked (R/C) |
| <input type="checkbox"/> Postmark Illegible | |
| <input checked="" type="checkbox"/> No Postmark | |
| <input type="checkbox"/> Overnight Delivery Service (Specify): | Shipping Date |
| <input type="checkbox"/> Received from House Records & Registration Office | Date of Receipt |
| <input type="checkbox"/> Received from Senate Public Records Office | Date of Receipt |
| <input type="checkbox"/> Received from Electronic Filing Office | Date of Receipt |
| <input type="checkbox"/> Other (Specify): | Date of Receipt or Postmarked |
| <i>AK</i> | 4-15-04 |
| PREPARER | DATE PREPARED |

(2/2004)