

(See reverse side for instructions)

1. (a) NAME OF COMMITTEE IN FULL Committee To Elect Chad Jennings	<input type="checkbox"/> (Check if name is changed)	2. DATE 8 SEP 99
(b) Number and Street Address 9822 Reynolds Road	<input type="checkbox"/> (Check if address is changed)	3. FEC Identification Number
(c) City, State and ZIP Code Louisville, Kentucky 40223		4. Is This Report An Amendment? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

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SEP 9 2 14 PM '99

5. TYPE OF COMMITTEE (Check one)

(a) This committee is a principal campaign committee. (Complete the candidate information below.)

(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate Chad Jennings	Candidate Party Affiliation Democrat	Office Sought Congress	State/District KY-3
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(c) This committee supports/opposes only one candidate _____ and is NOT an authorized committee.
(name of candidate)

(d) This committee is a _____ committee of the _____ Party.
(National, State or subordinate) (Democratic, Republican, etc.)

(e) This committee is a separate segregated fund.

(f) This committee supports/opposes more than one Federal candidate and is NOT a separate segregated fund or a party committee.

6. Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship
N/A		

Type of Connected Organization
 Corporation Corporation w/o Capital Stock Labor Organization Membership Organization Trade Association Cooperative

7. Custodian of Records: Identify by name, address (phone number - optional) and position of the person in possession of committee books and records.

Full Name	Mailing Address	Title or Position
Treasurer		

8. Treasurer: List the name and address (phone number - optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name	Mailing Address	Title or Position
G. Kenneth Kapp	713 East Market Louisville, KY 40202	CPA

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.	Mailing Address and ZIP Code
The First Capital Bank Of Kentucky	285 N. Hubbards Lane Louisville, KY 40207

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

TYPE OR PRINT NAME OF TREASURER G. Kenneth Kapp	SIGNATURE OF TREASURER <i>G. Kenneth Kapp</i>	DATE 8 SEP 99
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

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.

<input checked="" type="checkbox"/> Hand Delivered	Date of Receipt 9-9-99
<input type="checkbox"/> First Class Mail	POSTMARKED
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<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
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<i>SES</i> PREPARER	9-9-99 DATE PREPARED