Image# 29933400057

STATEMENT OF

| FORM 1 | ORGANIZ (See instructi | | | Office use only |
|---|---|---|-----------------------------------|---------------------------------|
| NAME OF COMMITTEE (in f | (Check if name is changed) | Example: If typying, type over the lines | 12FE4M5 | |
| Political Hall o | f Fame PAC | | | |
| ADDRESS (number and s | PO Box 75167 | | | |
| (Check if address is changed) | Fort Thomas | | <u> </u> <u> </u> <u> </u> | 41075 _ 0167 |
| | | CITY▲ | STATE▲ | ZIP CODE ▲ |
| (Check if address is changed) | L ADDRESS (Please provide only one e | | | |
| COMMITTEE'S WEB I | PAGE ADDRESS (URL) | | | |
| (Check if address is changed) | | | | |
| 2. DATE 0.3 | / D D / Y Y Y Y Y Y 2009 | | | |
| 3. FEC IDENTIFICA | TION NUMBER | C C00408146 | | |
| 4. IS THIS STATEM | ENT X NEW (N) OR | AMENDED (A | A) | |
| I certify that I have examine Type or Print Name of | ned this Statement and to the best of my kn | owledge and belief it is true, cor | rect and complete | |
| Signature of Treasurer | Electronically Filed by Amy Tow | rles | Date 0,3 | 27 Y 2009 |
| NOTE: Submission of fal | se, erroneous, or incomplete information m | ay subject the person signing thi | · | - |
| Office Use Only | | For further informa Federal Election Co Toll Free 800-424-9 | mmission 1530 | FEC FORM 1 (Revised 02/2009) |

| | FEC | Form 1 (Revised 02/2009) | Page 2 | | | | |
|--|-----------------------------------|---|---|--|--|--|--|
| 5. | | COMMITTEE (Check One) Committee: | | | | | |
| | (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 th information below.) | e candidate | | | | |
| | Name of Candidate | | | | | | |
| | Candidate Party Affilia | | State District | | | | |
| | (c) | This committee supports/opposes only one candidate, and is NOT an authorized committee. | | | | | |
| | Name of Candidate | | | | | | |
| | Party Con | (Nethernal Otels | | | | | |
| | (d) | (National, State This committee is a (or subordinate) committee of the | (Democratic, Republican,etc.) Party. | | | | |
| | Political A | ction Committee (PAC): | | | | | |
| (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organ | | | | | | | |
| | | Corporation Corporation w/o Capital Stock Lab | or Organization | | | | |
| | | Membership Organization Trade Association Co | operative | | | | |
| | | In addition, this committee is a Lobbyist/Registrant PAC. | | | | | |
| | (f) X | This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated committee. (i.e., nonconnected committee) | fund or party | | | | |
| | | In addition, this committee is a Lobbyist/Registrant PAC. | | | | | |
| | | In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.) | | | | | |
| | Joint Fundraising Representative: | | | | | | |
| | (g) | This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, at least one of which is an authorized committee of a federal candidate. | more political | | | | |
| | (h) | This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate. | more political | | | | |
| | Co | mmittees Participating in Joint Fundraiser | | | | | |
| | | 1. FEC ID number | | | | | |
| | | 2. FEC ID number | | | | | |
| | | 3. Hilling FEC ID number C | | | | | |
| | | EEC ID number C | | | | | |

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|----|--|--|----------------------------------|---------------------|------------------------|
| W | rite or Type Committee Name | | | | |
| | Political Hall of Fame P | AC | | | |
| 6. | Name of Any Connected Org | ganization, Affiliated Committee, | Joint Fundraising Representative | ve, or Lea | adership PAC Sponsor |
| L | NONE | | | | |
| | | | | | |
| | Mailing Address | | | | |
| | | | | | |
| | | | | ப | |
| | | CITY | STA | ATE 🛕 | ZIP CODE |
| | Relationship: | | _ | | |
| | Connected Organization | Affiliated Committee | Joint Fundraising Represer | ntative | Leadership PAC Sponsor |
| 7. | Custodian of Records: Idea possession of Committee Full Name Mailing Address | | ne number optional), and po | osition of | f the person in |
| | | Fort Thomas | | <u>(Y</u> | 41075 |
| | Title or Position ▼ Treasurer | CITY A | STA Telephone number | ATE ∆ 859 | ZIP CODE A |
| 8. | | and address (phone number - designated agent (e.g., assis | | the com | mittee; and the |
| | Full Name of Treasurer Amy T | owles | | | |
| | Mailing Address | PO BOX 75167 | | | |
| | | Fort Thomas | | KY_ | 41075 |
| | Title or Position ♥ | CITY A | ST | ATE. | ZIP CODE A |
| | Treasurer | | Telephone number | 859 | _ 750 _ 0192 |
| | - | | . Totophone number | | |

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|--|---|-----------------|-------------|--|--|--|
| Full Name of Designated Agent | | | | | | |
| Mailing Address | | | | | | |
| | | | | | | |
| Title or Position ▼ | CITY A | STATE A | ZIP CODE A | | | |
| | Te | elephone number | | | | |
| 9. Banks or Other Depositor safety deposit boxes or mair | 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, 6 | Name of Bank, Depository, etc. | | | | | |
| Fifth | n Third Bank | | | | | |
| Mailing Address | 1701 Dixie Highway | | | | | |
| | | | | | | |
| | Fort Wright | KY L | 41011 _ [| | | |
| | CITY 🗻 | STATE △ | ZIP CODE 🛕 | | | |
| Name of Bank, Depository, e | etc. | | | | | |
| | | | | | | |
| Mailing Address | | | | | | |
| | | | | | | |
| | | | | | | |
| | CITY 🙇 | STATE ⊿ | ZIP CODE 🛕 | | | |