

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

SECRETARY OF THE SENATE 10 OCT 19 AM 11:51

Office Use Only

1. NAME OF COMMITTEE (in full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

Friends for Daniel Mongiardo

ADDRESS (number and street) 450 Duncan Road

Check if different than previously reported. (ACC) Frankfort KY 40601

2. FEC IDENTIFICATION NUMBER C00458885 CITY STATE ZIP CODE STATE DISTRICT KY 00

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) [X] October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) Termination Report (TER)

(b) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on in the State of (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on in the State of

5. Covering Period 07 01 2010 through 09 30 2010

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 Mr. Joe Graviss Signature of Treasurer Electronically Filed by Mr. Joe Graviss Date 10 14 2010

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

Table with 7 columns and 1 row for Office Use Only

FEC FORM 3 (Revised 02/2003)

10020793260

**SUMMARY PAGE**  
of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

Friends for Daniel Mongiardo

Report Covering the Period:

From: 

M	M
07	

D	D
01	

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
09	

D	D
30	

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	32400.00	2075296.22
(b) Total Contribution Refunds (from Line 20(d)).....	209899.27	209899.27
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	-177499.27	1865396.95
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	12859.47	1871096.55
(b) Total Offsets to Operating Expenditures (from Line 14).....	36.85	1427.30
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	12822.62	1869669.25
8. Cash on Hand at Close of Reporting Period (from Line 27).....	216.38	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	58572.51	

For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-694-1100

10020793261

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name  
Friends for Daniel Mongiardo

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees	31400.00	1824433.47
(i) Itemized (use Schedule A).....	0.00	199412.75
(ii) Unitemized.....		
(iii) TOTAL of contributions from individuals..... ▶	31400.00	2023846.22
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACS).....	1000.00	51450.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	32400.00	2075296.22
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....</b>	0.00	0.00
<b>13. LOANS</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	12500.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	12500.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....</b>	36.85	1427.30
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	0.00	6488.66
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	32436.85	2095712.18

10020793262

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3 (Revised 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	12859.47	1871096.55
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	2000.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	12500.00	12500.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	12500.00	12500.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	209399.27	209399.27
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	500.00	500.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	209899.27	209899.27
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) >	235258.74	2095495.82

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	203038.27
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	32436.85
25. SUBTOTAL (add Line 23 and Line 24).....	235475.12
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	235258.74
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	216.38

10020793263

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

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

FOR LINE NUMBER: PAGE 5 / 66  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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)  
Friends for Daniel Mongiardo

**A.**

Full Name (Last, First, Middle Initial)  
Courtney Baird

Mailing Address 651 S. Broadway St.

City State Zip Code  
Georgetown KY 40324-0000

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

Name of Employer ANN MASON ELEMENTARY SCHOOL  
Occupation TEACHER

Receipt For: 2010  
 Primary  General  
 Other (specify) Debt Primary

Election Cycle-to-Date 500.00

Date of Receipt  
MM / DD / YYYY  
08 / 11 / 2010

Transaction ID: C3058087

Amount of Each Receipt this Period  
500.00

**B.**

Full Name (Last, First, Middle Initial)  
Charles E. Barnhart, III

Mailing Address 1212 Taborlake Cv

City State Zip Code  
Lexington KY 40502-7720

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

Name of Employer SHERMAN CARTER BARNHART  
Occupation ARCHITECT

Receipt For: 2010  
 Primary  General  
 Other (specify) Debt Primary

Election Cycle-to-Date 500.00

Date of Receipt  
MM / DD / YYYY  
08 / 11 / 2010

Transaction ID: C3058088

Amount of Each Receipt this Period  
500.00

**C.**

Full Name (Last, First, Middle Initial)  
Neville Blakemore, Jr.

Mailing Address 41 Mockingbird Valley Dr.

City State Zip Code  
Louisville KY 40207

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

Name of Employer Great Northern Mfg.  
Occupation President

Receipt For: 2010  
 Primary  General  
 Other (specify) Debt Primary

Election Cycle-to-Date 1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 11 / 2010

Transaction ID: C3058091

Amount of Each Receipt this Period  
1000.00

SUBTOTAL of Receipts This Page (optional) ..... **2000.00**

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

10020793264

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

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

FOR LINE NUMBER: PAGE 6 / 66  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

**A.**

Full Name (Last, First, Middle Initial)  
John Y. Y. Brown, III

Mailing Address 7006 Foxcroft Pl

City Prospect State KY Zip Code 40059-9405

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

Name of Employer BROWN & BATES CONSULTING Occupation CONSULTANT

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼ Debt Primary

Election Cycle-to-Date ▼ 1000.00

Date of Receipt 08 / 11 / 2010  
 Transaction ID: C3058090  
 Amount of Each Receipt this Period 1000.00

**B.**

Full Name (Last, First, Middle Initial)  
Julian M. Carroll

Mailing Address PO Box 1491  
25 Fountain Place

City Frankfort State KY Zip Code 40602-1491

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

Name of Employer Carroll & Associates Occupation Attorney

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼ Debt Primary

Election Cycle-to-Date ▼ 1250.00

Date of Receipt 08 / 11 / 2010  
 Transaction ID: C3058092  
 Amount of Each Receipt this Period 1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Thomas Saluatori Gandolfo

Mailing Address 3255 Maria Dr

City Lexington State KY Zip Code 40516-9661

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

Name of Employer Adesa Occupation Owner

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼ Debt Primary

Election Cycle-to-Date ▼ 2400.00

Date of Receipt 08 / 11 / 2010  
 Transaction ID: C3058096  
 Amount of Each Receipt this Period 1900.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 3900.00

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

10020793265

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

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

FOR LINE NUMBER: PAGE 7 / 66  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

<b>A.</b> Full Name (Last, First, Middle Initial) Philip C. Gayhart Mailing Address 2020 Kenilworth Pl City State Zip Code Louisville KY 40205-1514 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt MM / DD / YYYY 08 / 11 / 2010 Transaction ID: C3058093 Amount of Each Receipt this Period 500.00
Name of Employer Occupation Sherman Carter Barnhart Architect Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Debt Primary Election Cycle-to-Date ▼ 500.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Elmer J. George Mailing Address 105 W Main St 1890 Highway 208 City State Zip Code Lebanon KY 40033-1236 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt MM / DD / YYYY 08 / 11 / 2010 Transaction ID: C3058094 Amount of Each Receipt this Period 1000.00
Name of Employer Occupation Elmer J. George, Attorney at Law Attorney Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Debt Primary Election Cycle-to-Date ▼ 1000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Jonathan Goldberg Mailing Address 9300 Shelbyville Rd. City State Zip Code Louisville KY 40202 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt MM / DD / YYYY 08 / 11 / 2010 Transaction ID: C3058095 Amount of Each Receipt this Period 1000.00
Name of Employer Occupation GOLDBERG AND SIMPSON, PSC ATTORNEY Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Debt Primary Election Cycle-to-Date ▼ 1000.00		
SUBTOTAL of Receipts This Page (optional) .....		2500.00
TOTAL This Period (last page this line number only) .....		

10020793266

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

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

FOR LINE NUMBER: PAGE 8 / 66  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Mike Haydon</p> <p>Mailing Address 153 Lebanon Hill</p>	<p>Date of Receipt MM / DD / YYYY 08 / 25 / 2010</p>
<p>City State Zip Code Springfield KY 40069</p>	<p>Transaction ID: C3070817</p>
<p>FEC ID number of contributing federal political committee. C</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p>Name of Employer Occupation COMMONWEALTH OF KY LEGISLATIVE LIASON</p> <p>Receipt For: 2010  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input checked="" type="checkbox"/> Other (specify) ▼                      Debt Primary</p> <p>Election Cycle-to-Date ▼ 500.00</p>	
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) David R. Houchin</p> <p>Mailing Address 3131 Custer Dr Ste 8</p>	<p>Date of Receipt MM / DD / YYYY 08 / 11 / 2010</p>
<p>City State Zip Code Lexington KY 40517-4006</p>	<p>Transaction ID: C3058097</p>
<p>FEC ID number of contributing federal political committee. C</p>	<p>Amount of Each Receipt this Period 1200.00</p>
<p>Name of Employer Occupation Intech Contracting Engineer</p> <p>Receipt For: 2010  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input checked="" type="checkbox"/> Other (specify) ▼                      Debt Primary</p> <p>Election Cycle-to-Date ▼ 1700.00</p>	
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Margaret J. Houchin</p> <p>Mailing Address 1905 Blairmore Rd</p>	<p>Date of Receipt MM / DD / YYYY 08 / 11 / 2010</p>
<p>City State Zip Code Lexington KY 40502-2432</p>	<p>Transaction ID: C3058098</p>
<p>FEC ID number of contributing federal political committee. C</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p>Name of Employer Occupation N/A Homemaker</p> <p>Receipt For: 2010  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input checked="" type="checkbox"/> Other (specify) ▼                      Debt Primary</p> <p>Election Cycle-to-Date ▼ 1000.00</p>	
<p>SUBTOTAL of Receipts This Page (optional) ..... ▶ 2700.00</p>	
<p>TOTAL This Period (last page this line number only) ..... ▶</p>	



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

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

FOR LINE NUMBER: PAGE 9 / 66  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

<b>A.</b> Full Name (Last, First, Middle Initial) Daniel Logsdon Mailing Address 3348 Commodore Dr Apt 433A City Lexington State KY Zip Code 40502-3636 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt 08 / 11 / 2010 Transaction ID: C3058100 Amount of Each Receipt this Period 1000.00
Name of Employer KY Democratic Party Occupation Chairman Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Debt Primary Election Cycle-to-Date 1000.00		
<b>B.</b> Full Name (Last, First, Middle Initial) Chandrakala Manchikanti Mailing Address 2075 Natchez Ln City Paducah State KY Zip Code 42001-5415 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt 08 / 25 / 2010 Transaction ID: C3070819 Amount of Each Receipt this Period 1000.00
Name of Employer KSA ENTERPRISES, INC. Occupation CEO Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Debt Primary Election Cycle-to-Date 1000.00		
<b>C.</b> Full Name (Last, First, Middle Initial) Laxmaiah Manchikanti Mailing Address 2075 Natchez Ln City Paducah State KY Zip Code 42001-5415 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt 08 / 25 / 2010 Transaction ID: C3070820 Amount of Each Receipt this Period 2000.00
Name of Employer Pain Management Center of Paducah, PS Occupation Medical Director Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Debt Primary Election Cycle-to-Date 2000.00		
SUBTOTAL of Receipts This Page (optional) .....		4000.00
TOTAL This Period (last page this line number only) .....		

10020793268

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

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

FOR LINE NUMBER: PAGE 10 / 66  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

**A.** Full Name (Last, First, Middle Initial)  
Andrew Martin  
Mailing Address PO Box 43453

City State Zip Code  
Louisville KY 40253-0453

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

Name of Employer  
Andrew Martin, Government Relations  
Occupation  
Lobbyist

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
 Debt Primary

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
08 / 11 / 2010  
Transaction ID: C3058102  
Amount of Each Receipt this Period  
1000.00

**B.** Full Name (Last, First, Middle Initial)  
William H. May, II  
Mailing Address 142 S Creek St

City State Zip Code  
Frankfort KY 40601-4844

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

Name of Employer  
Brighton Engineering Co.  
Occupation  
CEO/Marketing

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
 Debt Primary

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
08 / 11 / 2010  
Transaction ID: C3058103  
Amount of Each Receipt this Period  
1000.00

**C.** Full Name (Last, First, Middle Initial)  
Charles E. Moore  
Mailing Address PO Box 549

City State Zip Code  
Owensboro KY 42302-0549

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

Name of Employer  
Moore, Malone & Safreed  
Occupation  
Attorney

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
 Debt Primary

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
08 / 11 / 2010  
Transaction ID: C3058104  
Amount of Each Receipt this Period  
2000.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 4000.00

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

10020793269

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 11 / 66  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

**A.** Full Name (Last, First, Middle Initial)  
David Orwick  
Mailing Address 4301 Palmetto Court

City Lexington State KY Zip Code 40511

FEC ID number of contributing federal political committee. C

Name of Employer Elite Printing Occupation Owner

Receipt For: 2010  
 Primary  General  
 Other (specify) Debt Primary

Election Cycle-to-Date 1000.00

Date of Receipt 08 / 11 / 2010  
Transaction ID: C3058105  
Amount of Each Receipt this Period 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Michael Ritchie  
Mailing Address 585 Wellington Gardens Dr

City Lexington State KY Zip Code 40503-3477

FEC ID number of contributing federal political committee. C

Name of Employer Photo Science, Inc. Occupation Image Analyst

Receipt For: 2010  
 Primary  General  
 Other (specify) Debt Primary

Election Cycle-to-Date 2000.00

Date of Receipt 08 / 11 / 2010  
Transaction ID: C3058106  
Amount of Each Receipt this Period 2000.00

**C.** Full Name (Last, First, Middle Initial)  
Kenneth L. Sales  
Mailing Address 325 Main Street  
1900 Waterfront Plaza

City Louisville State KY Zip Code 40202

FEC ID number of contributing federal political committee. C

Name of Employer Sales, Tillman, and Wallbaum Occupation Attorney

Receipt For: 2010  
 Primary  General  
 Other (specify) Debt Primary

Election Cycle-to-Date 2400.00

Date of Receipt 08 / 11 / 2010  
Transaction ID: C3058107  
Amount of Each Receipt this Period 2400.00

SUBTOTAL of Receipts This Page (optional) 5400.00

TOTAL This Period (last page this line number only)

10020793270

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 12/66  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

**A.** Full Name (Last, First, Middle Initial)  
Charles R. Scroggin  
Mailing Address 3640 Barrow Wood Lane Rd  
City Lexington State KY Zip Code 40502-2442  
FEC ID number of contributing federal political committee. C  
Name of Employer HDR Engineering Occupation President  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Debt Primary  
Election Cycle-to-Date ▼ 2400.00  
Date of Receipt 08 / 11 / 2010  
Transaction ID: C3058108  
Amount of Each Receipt this Period 1900.00

**B.** Full Name (Last, First, Middle Initial)  
Pamela Sherman  
Mailing Address 1776 Eastwood Dr  
City Lexington State KY Zip Code 40502-2828  
FEC ID number of contributing federal political committee. C  
Name of Employer N/A Occupation Homemaker  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Debt Primary  
Election Cycle-to-Date ▼ 500.00  
Date of Receipt 08 / 11 / 2010  
Transaction ID: C3058109  
Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
Michael Smith  
Mailing Address 212 East Bell Court  
City Lexington State KY Zip Code 40508  
FEC ID number of contributing federal political committee. C  
Name of Employer Sherman Carter Barnhart Occupation Architect  
Receipt For: 2010  
 Primary  General  
 Other (specify) ▼ Debt Primary  
Election Cycle-to-Date ▼ 250.00  
Date of Receipt 08 / 11 / 2010  
Transaction ID: C3058110  
Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) 2650.00  
TOTAL This Period (last page this line number only)

10020793271

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

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

FOR LINE NUMBER: PAGE 13 / 66  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

**A.**

Full Name (Last, First, Middle Initial)  
Angela K. Stanfield

Mailing Address 28 Havenwood Court

City State Zip Code  
Brandenburg KY 40108

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

Name of Employer Occupation  
N/A Homemaker

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Debt Primary

Election Cycle-to-Date ▼  
250.00

Date of Receipt  
MM / DD / YYYY  
08 / 11 / 2010

Transaction ID: C3058111

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
David M M Whitehouse

Mailing Address 1201 Raeford Ln

City State Zip Code  
Lexington KY 40513-1863

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

Name of Employer Occupation  
Kentucky American Water Company Vice President/Governmental Affairs O

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Debt Primary

Election Cycle-to-Date ▼  
2000.00

Date of Receipt  
MM / DD / YYYY  
08 / 11 / 2010

Transaction ID: C3058112

Amount of Each Receipt this Period  
2000.00

**C.**

Full Name (Last, First, Middle Initial)  
Steven Wilson

Mailing Address 7001 US Highway 42

City State Zip Code  
Louisville KY 40241

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

Name of Employer Occupation  
21C Hotel Owner

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
Debt Primary

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 25 / 2010

Transaction ID: C3070823

Amount of Each Receipt this Period  
1000.00

SUBTOTAL of Receipts This Page (optional) ..... ▶ 3250.00

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

10020793272

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

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

FOR LINE NUMBER: PAGE 14 / 66  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

**A.** Full Name (Last, First, Middle Initial)  
Joe Wright

Mailing Address 2200 S Highway 259  
HC 60 Box 113

City Harned State KY Zip Code 40144-6121

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

Name of Employer Wright Farm Occupation Farmer

Receipt For: 2010  
 Primary    General  
 Other (specify) ▼  
 Debt Primary

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 25 / 2010

Transaction ID: C3070826

Amount of Each Receipt this Period  
1000.00

SUBTOTAL of Receipts This Page (optional) .....	1000.00
TOTAL This Period (last page this line number only) .....	31400.00

10020793273

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

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

FOR LINE NUMBER: PAGE 15 / 66  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

**A.** Full Name (Last, First, Middle Initial)  
Jim Beam Brands Company PAC

Mailing Address 510 Lake Cook Road

City State Zip Code  
Deerfield IL 60015

FEC ID number of contributing federal political committee. **C** C00194126

Name of Employer Occupation

Receipt For: 2010  
 Primary  General  
 Other (specify) ▼  
 Debt Primary

Election Cycle-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 27 / 2010

Transaction ID: C3076214

Amount of Each Receipt this Period  
1000.00

SUBTOTAL of Receipts This Page (optional) .....	▶	1000.00
TOTAL This Period (last page this line number only) .....	▶	1000.00

10020793274

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 16 / 66

17  18  19a  19b  
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

<p><b>A.</b> Full Name (Last, First, Middle Initial) AT&amp;T</p>	<p>Transaction ID: D232916 Date of Disbursement</p>
<p>Mailing Address PO Box 538641</p>	<p><input type="text" value="08"/> / <input type="text" value="13"/> / <input type="text" value="2010"/></p>
<p>City Atlanta State GA Zip Code 30353-8641</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Pay Debt - AT&amp;T</p> <p>Candidate Name</p>	<p><input type="text" value="119.07"/></p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Citizens Commerce National Bank</p>	<p>Transaction ID: D227832 Date of Disbursement</p>
<p>Mailing Address 108 Sea Hero</p>	<p><input type="text" value="07"/> / <input type="text" value="06"/> / <input type="text" value="2010"/></p>
<p>City Frankfort State KY Zip Code 40601</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Credit Card Fees</p> <p>Candidate Name</p>	<p><input type="text" value="370.94"/></p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Division of Unemployment Insurance</p>	<p>Transaction ID: D232914 Date of Disbursement</p>
<p>Mailing Address PO Box 2003</p>	<p><input type="text" value="07"/> / <input type="text" value="02"/> / <input type="text" value="2010"/></p>
<p>City Frankfort State KY Zip Code 40602</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Payment-KY Unemp. Ins Fnd</p> <p>Candidate Name</p>	<p><input type="text" value="215.78"/></p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Category/ Type</p>

<p>SUBTOTAL of Disbursements This Page (optional) .....</p>	<p><input type="text" value="705.79"/></p>
<p>TOTAL This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

10020793275



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 17 / 66

17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

**A.** Full Name (Last, First, Middle Initial)  
Frankfort Plant Board

Mailing Address PO Box 308

City Frankfort State KY Zip Code 40602

Purpose of Disbursement Utilities  Category/Type

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D235031  
Date of Disbursement 08 / 01 / 2010

Amount of Each Disbursement this Period 101.33

**B.** Full Name (Last, First, Middle Initial)  
Franklin County Clerk

Mailing Address Main Street

City Frankfort State KY Zip Code 40601

Purpose of Disbursement Payment Debt - Franklin Co. Clerk  Category/Type

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D232918  
Date of Disbursement 07 / 02 / 2010

Amount of Each Disbursement this Period 668.90

**C.** Full Name (Last, First, Middle Initial)  
Mr. Kimball G. Geveden

Mailing Address 3224 Mantilla Dr

City Lexington State KY Zip Code 40513-1158

Purpose of Disbursement Consulting- Closing Campaign  Category/Type

Candidate Name

Office Sought:  House  Senate  President Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D231874  
Date of Disbursement 08 / 12 / 2010

Amount of Each Disbursement this Period 1700.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 2470.23

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

10020793276

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 66
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

A. Full Name (Last, First, Middle Initial) Kentucky State Treasurer	Transaction ID: D232919
	Date of Disbursement 07 / 31 / 2010
Mailing Address Department of Revenue	Amount of Each Disbursement this Period 3681.47
City Frankfort State KY Zip Code 40619	
Purpose of Disbursement Payment Debt - KY State Treasurer	Category/Type
Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

B. Full Name (Last, First, Middle Initial) Sally Mucci	Transaction ID: D231872
	Date of Disbursement 08 / 12 / 2010
Mailing Address 450 Duncan Rd	Amount of Each Disbursement this Period 2500.00
City Frankfort State KY Zip Code 40601-7803	
Purpose of Disbursement Accounting Services	Category/Type
Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

C. Full Name (Last, First, Middle Initial) NGP Software, Inc.	Transaction ID: D238781
	Date of Disbursement 08 / 31 / 2010
Mailing Address 1225 Eye Street, NW Suite #1225	Amount of Each Disbursement this Period 1600.00
City Washington State DC Zip Code 20005	
Purpose of Disbursement Final Payment/Debt	Category/Type
Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

SUBTOTAL of Disbursements This Page (optional) .....	7781.47
TOTAL This Period (last page this line number only) .....	

10020793277

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 19 / 66
	<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	
	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

A.	Full Name (Last, First, Middle Initial) Richard Prelopski	Transaction ID: D231873
	Mailing Address 944 Leawood Sq	Date of Disbursement 08 / 12 / 2010
	City Frankfort State KY Zip Code 40601-3327	Amount of Each Disbursement this Period 1700.00
	Purpose of Disbursement Consulting - Closing Campaign	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Venture Bank	Transaction ID: D238782
	Mailing Address 5500 Wayzata Blvd, Suite 140	Date of Disbursement 09 / 07 / 2010
	City Minneapolis State MN Zip Code 55416	Amount of Each Disbursement this Period 67.50
	Purpose of Disbursement Credit Card Fees	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Venture Bank	Transaction ID: D238912
	Mailing Address 5500 Wayzata Blvd, Suite 140	Date of Disbursement 07 / 30 / 2010
	City Minneapolis State MN Zip Code 55416	Amount of Each Disbursement this Period 67.25
	Purpose of Disbursement Credit Card Fees	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional) .....	1834.75
TOTAL This Period (last page this line number only) .....	

10020793278

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 20 / 66
	<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	
	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

A. Full Name (Last, First, Middle Initial) Venture Bank	Transaction ID: D238913																					
	Date of Disbursement																					
Mailing Address 5500 Wayzata Blvd, Suite 140	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td>/</td><td>3</td><td>1</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	8	/	3	1	/	2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y													
0	8	/	3	1	/	2	0	1	0													
City Minneapolis State MN Zip Code 55416	Amount of Each Disbursement this Period																					
Purpose of Disbursement Credit Card Fees	67.23																					
Candidate Name	Category/ Type																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010																					
State: District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General																					
	<input type="checkbox"/> Other (specify) ▼																					

SUBTOTAL of Disbursements This Page (optional) .....	67.23
TOTAL This Period (last page this line number only) .....	12859.47

10020793279

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)					PAGE 21 / 66
	<input type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input checked="" type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21		

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo.

A. Full Name (Last, First, Middle Initial) Daniel Mongiardo	Transaction ID: D234945	
	Date of Disbursement 08 / 26 / 2010	
Mailing Address 200 Medical Center Dr	Amount of Each Disbursement this Period 12500.00	
City Hazard State KY Zip Code 41701-9466	Purpose of Disbursement Repay Loan	
Candidate Name Daniel Mongiardo	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: KY District:		

SUBTOTAL of Disbursements This Page (optional) .....	12500.00
TOTAL This Period (last page this line number only) .....	12500.00

10020793280

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 22 / 66
	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	
	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

**A.**

Full Name (Last, First, Middle Initial) Mr. Scott Alexander	Transaction ID: D235032 Date of Disbursement 08 / 31 / 2010
Mailing Address PO Box 714	Amount of Each Disbursement this Period 2400.00
City Hazard State KY Zip Code 41702	
Purpose of Disbursement Refund - General Contribution Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**B.**

Full Name (Last, First, Middle Initial) Dr. Dwight L. Avery, O.D.	Transaction ID: D235488 Date of Disbursement 08 / 31 / 2010
Mailing Address 138 Pine Trail Rd	Amount of Each Disbursement this Period 2400.00
City London State KY Zip Code 40744-9426	
Purpose of Disbursement Refund- General Contribution Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**C.**

Full Name (Last, First, Middle Initial) Charles J. Baird	Transaction ID: D235033 Date of Disbursement 08 / 31 / 2010
Mailing Address PO Box 351	Amount of Each Disbursement this Period 1600.00
City Pikeville State KY Zip Code 41502-0351	
Purpose of Disbursement Refund - General Contribution Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) .....	6400.00
TOTAL This Period (last page this line number only) .....	

10020793281

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 23 / 66	
	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

A. Full Name (Last, First, Middle Initial) David Bales	Transaction ID: D235034	
	Date of Disbursement 08 / 31 / 2010	
Mailing Address 183 Loudon Ave	Amount of Each Disbursement this Period 2400.00	
City Lexington State KY Zip Code 40505	Purpose of Disbursement Refund - General Contribution	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

B. Full Name (Last, First, Middle Initial) Stanley Barnett	Transaction ID: D235035	
	Date of Disbursement 08 / 31 / 2010	
Mailing Address 6045 Highway 476	Amount of Each Disbursement this Period 100.00	
City Clayhole State KY Zip Code 41317-8904	Purpose of Disbursement Refund - General Contribution	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

C. Full Name (Last, First, Middle Initial) Richard H. Bass	Transaction ID: D235036	
	Date of Disbursement 08 / 31 / 2010	
Mailing Address 601 Cardinal Ln	Amount of Each Disbursement this Period 2200.00	
City Lexington State KY Zip Code 40503-1701	Purpose of Disbursement Refund - General Contribution	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) .....	4700.00
TOTAL This Period (last page this line number only) .....	

10020793282

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 24 / 66
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

A. Full Name (Last, First, Middle Initial) Joyce Bates	Transaction ID: D235037	
	Date of Disbursement MM / DD / YYYY 08 / 31 / 2010	
Mailing Address 406 Mays Branch	Amount of Each Disbursement this Period 600.00	
City Prestonsburg State KY Zip Code 41653	Purpose of Disbursement Refund - General Contribution <input type="checkbox"/> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Candidate Name	

B. Full Name (Last, First, Middle Initial) Elizabeth Beam	Transaction ID: D235038	
	Date of Disbursement MM / DD / YYYY 08 / 31 / 2010	
Mailing Address 13508 Hunters View Ct.	Amount of Each Disbursement this Period 2400.00	
City Prospect State KY Zip Code 40059	Purpose of Disbursement Refund - General Contribution <input type="checkbox"/> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Candidate Name	

C. Full Name (Last, First, Middle Initial) William F. Beam	Transaction ID: D235039	
	Date of Disbursement MM / DD / YYYY 08 / 31 / 2010	
Mailing Address 13508 Hunters View Ct.	Amount of Each Disbursement this Period 2400.00	
City Prospect State KY Zip Code 40059	Purpose of Disbursement Refund - General Contribution <input type="checkbox"/> Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Candidate Name	

SUBTOTAL of Disbursements This Page (optional) .....	5400.00
TOTAL This Period (last page this line number only) .....	

10020793283



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 25 / 66
	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	
	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

A.	Full Name (Last, First, Middle Initial) Mr. Darby P Bennett	Transaction ID: D235040
	Mailing Address 249 Village Center Rd	Date of Disbursement 08 / 31 / 2010
	City Harlan State KY Zip Code 40831-1800	Amount of Each Disbursement this Period 2400.00
	Purpose of Disbursement Refund - General Contribution	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Mr. James H. Booth	Transaction ID: D235041
	Mailing Address PO Box 1387	Date of Disbursement 08 / 31 / 2010
	City Inez State KY Zip Code 41224-1387	Amount of Each Disbursement this Period 2400.00
	Purpose of Disbursement Refund - General Contribution	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Linda D. Booth	Transaction ID: D235042
	Mailing Address PO Box 1387	Date of Disbursement 08 / 31 / 2010
	City Inez State KY Zip Code 41224-1387	Amount of Each Disbursement this Period 2400.00
	Purpose of Disbursement Refund - General Contribution	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional) .....	7200.00
TOTAL This Period (last page this line number only) .....	

10020793284

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 / 66	
	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

A. Full Name (Last, First, Middle Initial) Blanca Brashear	Transaction ID: D235834
	Date of Disbursement 08 / 31 / 2010
Mailing Address 1240 Costa Del Sol	Amount of Each Disbursement this Period 2400.00
City Brownsville State TX Zip Code 78520-7460	
Purpose of Disbursement Refund - General Contribution	Category/ Type
Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

B. Full Name (Last, First, Middle Initial) Eugene Brashear	Transaction ID: D235045
	Date of Disbursement 08 / 31 / 2010
Mailing Address 1240 Costa Del Sol	Amount of Each Disbursement this Period 2400.00
City Brownsville State TX Zip Code 78520-7460	
Purpose of Disbursement Refund - General Contribution	Category/ Type
Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

C. Full Name (Last, First, Middle Initial) Ms. Sherry Brashear	Transaction ID: D235044
	Date of Disbursement 08 / 31 / 2010
Mailing Address 103 N 1st St	Amount of Each Disbursement this Period 2400.00
City Harlan State KY Zip Code 40831-2300	
Purpose of Disbursement Refund - General Contribution	Category/ Type
Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

SUBTOTAL of Disbursements This Page (optional) .....	7200.00
TOTAL This Period (last page this line number only) .....	

10020793285

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 / 66	
	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

A.	Full Name (Last, First, Middle Initial) Thomas Brashear	Transaction ID: D235043
	Mailing Address 28 Hartman Rd	Date of Disbursement 08 / 31 / 2010
	City Amherst State MA Zip Code 01002-1414	Amount of Each Disbursement this Period 2400.00
	Purpose of Disbursement Refund - General Contribution Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Mr. John C. Brewer, II	Transaction ID: D235279
	Mailing Address PO Box 826	Date of Disbursement 08 / 31 / 2010
	City Stanton State KY Zip Code 40380-0826	Amount of Each Disbursement this Period 1025.00
	Purpose of Disbursement Refund - General Contribution Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Teresa M. Brown	Transaction ID: D235282
	Mailing Address 1410 Short Shun Rd	Date of Disbursement 08 / 31 / 2010
	City Nicholasville State KY Zip Code 40356-8978	Amount of Each Disbursement this Period 600.00
	Purpose of Disbursement Refund - General Contribution Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional) .....	4025.00
TOTAL This Period (last page this line number only) .....	

10020793286

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 28 / 66	
	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

A.	Full Name (Last, First, Middle Initial) Dr. Jyotin Chandarana, M.D.	Transaction ID: D235782
	Mailing Address 215 Argyll Cir	Date of Disbursement 08 / 31 / 2010
	City Hazard State KY Zip Code 41701-8933	Amount of Each Disbursement this Period 600.00
	Purpose of Disbursement Refund - General Contribution	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Mr. Henry Chaney	Transaction ID: D235291
	Mailing Address 180 Quail Walk	Date of Disbursement 08 / 31 / 2010
	City Pikeville State KY Zip Code 41501-1430	Amount of Each Disbursement this Period 1600.00
	Purpose of Disbursement Refund - General Contribution	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Dr. James A. Chaney, M.D.	Transaction ID: D235287
	Mailing Address 373 Vista Dr	Date of Disbursement 08 / 31 / 2010
	City Hazard State KY Zip Code 41701-9449	Amount of Each Disbursement this Period 2400.00
	Purpose of Disbursement Refund - General Contribution	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional) .....	4600.00
TOTAL This Period (last page this line number only) .....	

10020793287

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 29 / 66
	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	
	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

A. Full Name (Last, First, Middle Initial) Ms. Lesa Chaney	Transaction ID: D235284	
	Date of Disbursement 08 / 31 / 2010	
Mailing Address 373 Vista Dr	Amount of Each Disbursement this Period 2400.00	
City Hazard State KY Zip Code 41701-9449	Purpose of Disbursement Refund - General Contribution	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

B. Full Name (Last, First, Middle Initial) Katherine H. Coleman	Transaction ID: D235836	
	Date of Disbursement 08 / 31 / 2010	
Mailing Address 2745 Frankfort Rd	Amount of Each Disbursement this Period 2400.00	
City Georgetown State KY Zip Code 40324-8643	Purpose of Disbursement Refund - General Contribution	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

C. Full Name (Last, First, Middle Initial) Mr. Terry N. Coleman	Transaction ID: D235293	
	Date of Disbursement 08 / 31 / 2010	
Mailing Address 2745 Frankfort Rd	Amount of Each Disbursement this Period 2400.00	
City Georgetown State KY Zip Code 40324-8643	Purpose of Disbursement Refund - General Contribution	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) .....	7200.00
TOTAL This Period (last page this line number only) .....	

10020793288

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 66
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

A.	Full Name (Last, First, Middle Initial) Mr. John M. Combs	Transaction ID: D235302
	Mailing Address PO Box 573	Date of Disbursement 08 / 31 / 2010
	City Pineville State KY Zip Code 40977	Amount of Each Disbursement this Period 150.00
	Purpose of Disbursement Refund - General Contribution	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Mr. Clay M. Corman	Transaction ID: D235305
	Mailing Address 2601 Wilmore Rd	Date of Disbursement 08 / 31 / 2010
	City Nicholasville State KY Zip Code 40356-8975	Amount of Each Disbursement this Period 1600.00
	Purpose of Disbursement Refund - General Contribution	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Mr. Jack Dice	Transaction ID: D235307
	Mailing Address 537 Maysville Road	Date of Disbursement 08 / 31 / 2010
	City Mount Sterling State KY Zip Code 40353	Amount of Each Disbursement this Period 2400.00
	Purpose of Disbursement Refund - General Election	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional) .....	4150.00
TOTAL This Period (last page this line number only) .....	

10020793289

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 31 / 66
	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	
	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

A.	Full Name (Last, First, Middle Initial) Mr. David A. Duff	Transaction ID: D235309
	Mailing Address PO Box 305	Date of Disbursement 08 / 31 / 2010
	City Chavies State KY Zip Code 41727-0305	Amount of Each Disbursement this Period 2400.00
	Purpose of Disbursement Refund - General Election	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Ms. Susan Duff	Transaction ID: D235783
	Mailing Address PO Box 305	Date of Disbursement 08 / 31 / 2010
	City Chavies State KY Zip Code 41727	Amount of Each Disbursement this Period 2400.00
	Purpose of Disbursement Refund - General Contribution	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Ms. Lori Ann Fairchild	Transaction ID: D235312
	Mailing Address 117 Olive Ct	Date of Disbursement 08 / 31 / 2010
	City Nicholasville State KY Zip Code 40356-2602	Amount of Each Disbursement this Period 600.00
	Purpose of Disbursement Refund - General Election	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional) .....	5400.00
TOTAL This Period (last page this line number only) .....	

10020793290

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 32 / 66
	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	
	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

**A.**

Full Name (Last, First, Middle Initial)  
Darrell Fannin

Mailing Address 938 Craycraft Rd

City Tollesboro State KY Zip Code 41189-8799

Purpose of Disbursement Refund - General Election

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D235316  
Date of Disbursement 08 / 31 / 2010

Amount of Each Disbursement this Period 2200.00

Category/Type

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Greg Feltner

Mailing Address 1180 Lower McIntosh Road

City Avawam State KY Zip Code 41713

Purpose of Disbursement Refund - General Election

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D235317  
Date of Disbursement 08 / 31 / 2010

Amount of Each Disbursement this Period 500.00

Category/Type

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Samuel S. Francis

Mailing Address PO Box 2042

City Henderson State KY Zip Code 42419-2042

Purpose of Disbursement Refund - General Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D235318  
Date of Disbursement 08 / 31 / 2010

Amount of Each Disbursement this Period 2400.00

Category/Type

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 5100.00

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

10020793291



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 33 / 66	
	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

A. Full Name (Last, First, Middle Initial) Dr. Hassan Hussein Ghazal, M.D.	Transaction ID: D235785	
	Date of Disbursement 08 / 31 / 2010	
Mailing Address 118 Roy Campbell Dr. Ste 100	Amount of Each Disbursement this Period 600.00	
City Hazard	State KY	Zip Code 41701
Purpose of Disbursement Refund - General Contribution	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

B. Full Name (Last, First, Middle Initial) Ms. Joetta Y. Goodpaster	Transaction ID: D235784	
	Date of Disbursement 08 / 31 / 2010	
Mailing Address 29 Barbara Lynn Dr	Amount of Each Disbursement this Period 350.00	
City Owingsville	State KY	Zip Code 40360-2045
Purpose of Disbursement Refund - General Contribution	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

C. Full Name (Last, First, Middle Initial) Ms. Barbara Gould	Transaction ID: D235319	
	Date of Disbursement 08 / 31 / 2010	
Mailing Address 8525 Camargo Club Dr	Amount of Each Disbursement this Period 2400.00	
City Cincinnati	State OH	Zip Code 45243-3342
Purpose of Disbursement Refund - General Election	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) .....	3350.00
TOTAL This Period (last page this line number only) .....	

10020793292

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 66
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

**A.**

Full Name (Last, First, Middle Initial) Mr. Marc I. Graviss	Transaction ID: D235320 Date of Disbursement 08 / 31 / 2010
Mailing Address: 672 Graviss Ct	Amount of Each Disbursement this Period 1000.00
City: Lexington State: KY Zip Code: 40503-4136	
Purpose of Disbursement: Refund - General Election Candidate Name: _____ Category/Type: _____	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____	

**B.**

Full Name (Last, First, Middle Initial) Ms. April Francis Green	Transaction ID: D235327 Date of Disbursement 08 / 31 / 2010
Mailing Address: 1501 Community Way	Amount of Each Disbursement this Period 2400.00
City: Louisville State: KY Zip Code: 40222-6640	
Purpose of Disbursement: Refund - General Election Candidate Name: _____ Category/Type: _____	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____	

**C.**

Full Name (Last, First, Middle Initial) Mr. Perry Lee Greer, II	Transaction ID: D235330 Date of Disbursement 08 / 31 / 2010
Mailing Address: 2035 Hart Rd	Amount of Each Disbursement this Period 415.00
City: Lexington State: KY Zip Code: 40502-2442	
Purpose of Disbursement: Refund - General Election Candidate Name: _____ Category/Type: _____	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____	

SUBTOTAL of Disbursements This Page (optional) .....	3815.00
TOTAL This Period (last page this line number only) .....	

10020793293

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 / 66	
	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

A. Full Name (Last, First, Middle Initial) Ms. Amy Gumz	Transaction ID: D235333	
	Date of Disbursement 08 / 31 / 2010	
Mailing Address 1385 St Rt 56 E	Amount of Each Disbursement this Period 100.00	
City Morganfield State KY Zip Code 42437	Purpose of Disbursement Refund - General Contribution	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

B. Full Name (Last, First, Middle Initial) Kevin Gumz	Transaction ID: D235336	
	Date of Disbursement 08 / 31 / 2010	
Mailing Address 1385 St Rt 56E	Amount of Each Disbursement this Period 100.00	
City Morganfield State KY Zip Code 42437	Purpose of Disbursement Refund - General Election	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

C. Full Name (Last, First, Middle Initial) John M. Haggin	Transaction ID: D235341	
	Date of Disbursement 08 / 31 / 2010	
Mailing Address PO Box 12948	Amount of Each Disbursement this Period 100.00	
City Lexington State KY Zip Code 40583-2948	Purpose of Disbursement Refund - General Contribution	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) .....	300.00
TOTAL This Period (last page this line number only) .....	

10020793294

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 36 / 66	
	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

A.	Full Name (Last, First, Middle Initial) Mr. Lee Hamilton	Transaction ID: D235348 Date of Disbursement 08 / 31 / 2010
	Mailing Address 7800 Lakeridge Dr	Amount of Each Disbursement this Period 2400.00
	City Montgomery State AL Zip Code 36117-5186	
	Purpose of Disbursement Refund - General Contribution	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Sherri Harmon	Transaction ID: D235350 Date of Disbursement 08 / 31 / 2010
	Mailing Address 588 Cecil Way	Amount of Each Disbursement this Period 2400.00
	City Lexington State KY Zip Code 40503-2864	
	Purpose of Disbursement Refund - General Contribution	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Mr. Lawrence Higdon	Transaction ID: D235363 Date of Disbursement 08 / 31 / 2010
	Mailing Address 8044 Montgomery Road - Suite 700	Amount of Each Disbursement this Period 375.00
	City Cincinnati State OH Zip Code 45236-2926	
	Purpose of Disbursement Refund - General Contribution	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional) .....	5175.00
TOTAL This Period (last page this line number only) .....	

10020793295

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)					PAGE 37 / 66
	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 21	
	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c			

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

**A.**

Full Name (Last, First, Middle Initial)  
Mr. David W. Howard

Mailing Address PO Box 271

City Harlan State KY Zip Code 40831

Purpose of Disbursement Refund - General Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D235365  
Date of Disbursement 08 / 31 / 2010

Amount of Each Disbursement this Period 600.00

Category/Type

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Tim Howard

Mailing Address 2550 W Highway 72

City Harlan State KY Zip Code 40831-7133

Purpose of Disbursement REfund - General Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D235370  
Date of Disbursement 08 / 31 / 2010

Amount of Each Disbursement this Period 600.00

Category/Type

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Frank H. Ikerd

Mailing Address 2693 N Highway 1247

City Somerset State KY Zip Code 42503-4604

Purpose of Disbursement Refund - General Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D235371  
Date of Disbursement 08 / 31 / 2010

Amount of Each Disbursement this Period 2400.00

Category/Type

SUBTOTAL of Disbursements This Page (optional) ..... 3600.00

TOTAL This Period (last page this line number only) ..... 3600.00

10020793296

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 38 / 66
	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	
	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

A.	Full Name (Last, First, Middle Initial) Ms. Anita P. Johnson	Transaction ID: D235787
	Mailing Address 110 Caroline Avenue PO Box 231	Date of Disbursement MM / DD / YYYY 08 / 31 / 2010
	City Pikeville State KY Zip Code 41502-0231	Amount of Each Disbursement this Period 2400.00
	Purpose of Disbursement Refund - General Contribution Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Cody Pauley Johnson	Transaction ID: D235775
	Mailing Address 348 Cedar Creek Road	Date of Disbursement MM / DD / YYYY 08 / 31 / 2010
	City Pikeville State KY Zip Code 41501	Amount of Each Disbursement this Period 2400.00
	Purpose of Disbursement Refund - General Contribution Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Mr. Gary C. Johnson	Transaction ID: D235786
	Mailing Address PO Box 231	Date of Disbursement MM / DD / YYYY 08 / 31 / 2010
	City Pikeville State KY Zip Code 41502-0231	Amount of Each Disbursement this Period 2400.00
	Purpose of Disbursement Refund - General Contribution Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional) .....	7200.00
TOTAL This Period (last page this line number only) .....	

10020793297

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

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

FOR LINE NUMBER: (check only one)

17  18  19a  19b  
 20a  20b  20c  21

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

**A.** Full Name (Last, First, Middle Initial)  
Mr. Marty Johnson

Mailing Address 205 Rock Ridge Rd

City Hazard State KY Zip Code 41701-9455

Purpose of Disbursement Refund - General Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D235373  
Date of Disbursement 08 / 31 / 2010

Amount of Each Disbursement this Period 2400.00

**B.** Full Name (Last, First, Middle Initial)  
Ronald Johnson

Mailing Address 848 Laurel Hill Rd.

City Lexington State KY Zip Code 40503

Purpose of Disbursement Refund - General Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D235376  
Date of Disbursement 08 / 31 / 2010

Amount of Each Disbursement this Period 100.00

**C.** Full Name (Last, First, Middle Initial)  
Ms. Theresa Johnson

Mailing Address 205 Rock Ridge Rd

City Hazard State KY Zip Code 41701-9455

Purpose of Disbursement Refund - General Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D235374  
Date of Disbursement 08 / 31 / 2010

Amount of Each Disbursement this Period 2400.00

SUBTOTAL of Disbursements This Page (optional) ..... 4900.00

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

10020793298

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 40 / 66

17  18  19a  19b  
 20a  20b  20c  21

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

**A.**

Full Name (Last, First, Middle Initial)  
Mr. William R. Johnson

Mailing Address 348 Cedar Creek Rd

City Pikeville State KY Zip Code 41501-3762

Purpose of Disbursement  
Refund - General Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: D235788  
Date of Disbursement  
08 / 31 / 2010

Amount of Each Disbursement this Period  
2400.00

Category/Type

**B.**

Full Name (Last, First, Middle Initial)  
Mr. David Jorjani

Mailing Address 282 Dr Jorjani Dr

City Corbin State KY Zip Code 40701-6137

Purpose of Disbursement  
Refund - General Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: D235377  
Date of Disbursement  
08 / 31 / 2010

Amount of Each Disbursement this Period  
100.00

Category/Type

**C.**

Full Name (Last, First, Middle Initial)  
Mr. George Justice

Mailing Address PO Box 467

City Frenchburg State KY Zip Code 40322-0467

Purpose of Disbursement  
Refund - General Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: D235378  
Date of Disbursement  
08 / 31 / 2010

Amount of Each Disbursement this Period  
1100.00

Category/Type

SUBTOTAL of Disbursements This Page (optional) ..... 3600.00

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

10020793299



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 41 / 66
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

A. Full Name (Last, First, Middle Initial) Mr. Haven King	Transaction ID: D235380
	Date of Disbursement 08 / 31 / 2010
Mailing Address 241 Deaton Loop	Amount of Each Disbursement this Period 2400.00
City Chavies State KY Zip Code 41727-9088	
Purpose of Disbursement Refund - General Contribution Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

B. Full Name (Last, First, Middle Initial) Ms. Joan C. King	Transaction ID: D235379
	Date of Disbursement 08 / 31 / 2010
Mailing Address 241 Deaton Loop	Amount of Each Disbursement this Period 2400.00
City Chavies State KY Zip Code 41727-9088	
Purpose of Disbursement Refund - General Contribution Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

C. Full Name (Last, First, Middle Initial) Ms. Leslie Scott King	Transaction ID: D235381
	Date of Disbursement 08 / 31 / 2010
Mailing Address PO Box 446	Amount of Each Disbursement this Period 2400.00
City Chavies State KY Zip Code 41727-0446	
Purpose of Disbursement Refund - General Contribution Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

SUBTOTAL of Disbursements This Page (optional) .....	7200.00
TOTAL This Period (last page this line number only) .....	

10020793300

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 66
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

A. Full Name (Last, First, Middle Initial) Mr. Harold Knight	Transaction ID: D235789
	Date of Disbursement 08 / 31 / 2010
Mailing Address 201 Deer Run Rd	Amount of Each Disbursement this Period 600.00
City Cadiz	State KY
Zip Code 42211-9470	Purpose of Disbursement Refund - General Contribution
Category/Type	Candidate Name
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

B. Full Name (Last, First, Middle Initial) Jessica Lavinder	Transaction ID: D235382
	Date of Disbursement 08 / 31 / 2010
Mailing Address 808 Navaho Dr.	Amount of Each Disbursement this Period 2200.00
City Maysville	State KY
Zip Code 41056	Purpose of Disbursement Refund - General Contribution
Category/Type	Candidate Name
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

C. Full Name (Last, First, Middle Initial) Mr. Ken Ledford	Transaction ID: D235383
	Date of Disbursement 08 / 31 / 2010
Mailing Address 116 Old Farm Rd	Amount of Each Disbursement this Period 744.00
City Richmond	State KY
Zip Code 40475-8545	Purpose of Disbursement Refund - General Contribution
Category/Type	Candidate Name
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

SUBTOTAL of Disbursements This Page (optional) .....	3544.00
TOTAL This Period (last page this line number only) .....	

10020793301

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 43 / 66
	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	
	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

A.	Full Name (Last, First, Middle Initial) Ms. Kellie Wilson Lee	Transaction ID: D235790
	Mailing Address 78 Official Hollow Rd	Date of Disbursement 08 / 31 / 2010
	City Evarts State KY Zip Code 40828-6501	Amount of Each Disbursement this Period 1500.00
	Purpose of Disbursement Refund - General Contribution	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Jamie R. Liebman	Transaction ID: D235384
	Mailing Address 1220 NE 3rd Street #203	Date of Disbursement 08 / 31 / 2010
	City Fort Lauderdale State FL Zip Code 33301	Amount of Each Disbursement this Period 2400.00
	Purpose of Disbursement Refund - General Contribution	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Mr. Herbert Ligon	Transaction ID: D235386
	Mailing Address 204 37th Avenue N #402	Date of Disbursement 08 / 31 / 2010
	City Saint Petersburg State FL Zip Code 33704	Amount of Each Disbursement this Period 2400.00
	Purpose of Disbursement Refund - General Contribution	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional) .....	6300.00
TOTAL This Period (last page this line number only) .....	

10020793302

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 44 / 66

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

A.	Full Name (Last, First, Middle Initial) Patricia Ligon	Transaction ID: D235385
	Mailing Address 4300 Iroquois Avenue	Date of Disbursement 08 / 31 / 2010
	City Nashville State TN Zip Code 37205	Amount of Each Disbursement this Period 2400.00
	Purpose of Disbursement Refund - General Contribution	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Mr. Walter E. May	Transaction ID: D235387
	Mailing Address PO Box 1439	Date of Disbursement 08 / 31 / 2010
	City Pikeville State KY Zip Code 41502-1439	Amount of Each Disbursement this Period 2400.00
	Purpose of Disbursement Refund - General Contribution	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Mr. Greg B. McDonald	Transaction ID: D235388
	Mailing Address 4615 Russell Cave Rd	Date of Disbursement 08 / 31 / 2010
	City Lexington State KY Zip Code 40511-9530	Amount of Each Disbursement this Period 2400.00
	Purpose of Disbursement Refund - General Contribution	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional) .....	7200.00
TOTAL This Period (last page this line number only) .....	

10020793303

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 45 / 66
	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	
	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

A.	Full Name (Last, First, Middle Initial) Mr. Ted McGinnis	Transaction ID: D235389
	Mailing Address PO Box 1417	Date of Disbursement 08 / 31 / 2010
	City Inez State KY Zip Code 41224-1417	Amount of Each Disbursement this Period 2400.00
	Purpose of Disbursement Refund - General Contribution Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

B.	Full Name (Last, First, Middle Initial) Earl M. McGuire	Transaction ID: D235390
	Mailing Address 4706 Kentucky Route 114	Date of Disbursement 08 / 31 / 2010
	City Prestonsburg State KY Zip Code 40031	Amount of Each Disbursement this Period 2200.00
	Purpose of Disbursement Refund - General Contribution Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

C.	Full Name (Last, First, Middle Initial) Mary McGuire	Transaction ID: D235391
	Mailing Address 4706 KY Route 114	Date of Disbursement 08 / 31 / 2010
	City Prestonsburg State KY Zip Code 41653-9086	Amount of Each Disbursement this Period 2400.00
	Purpose of Disbursement Refund - General Contribution Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

SUBTOTAL of Disbursements This Page (optional) .....	7000.00
TOTAL This Period (last page this line number only) .....	

10020793304

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

Use separate schedule(s) for each category of the Detailed Summary Page .	FOR LINE NUMBER: (check only one)				PAGE 46 / 66
	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	
	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

A. Full Name (Last, First, Middle Initial) Jennifer J. Meadows	Transaction ID: D235392	
	Date of Disbursement 08 / 31 / 2010	
Mailing Address PO Box 94	Amount of Each Disbursement this Period 2200.00	
City Tollesboro State KY Zip Code 41189-0094	Purpose of Disbursement Refund - General Contribution	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

B. Full Name (Last, First, Middle Initial) Mr. Vincent J. Mongiardo	Transaction ID: D231871	
	Date of Disbursement 08 / 12 / 2010	
Mailing Address PO Box 230	Amount of Each Disbursement this Period 2000.00	
City Bulan State KY Zip Code 41722-0230	Purpose of Disbursement Refund General Contribution	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

C. Full Name (Last, First, Middle Initial) Mr. McKinnley Morgan, Esq.	Transaction ID: D235791	
	Date of Disbursement 08 / 31 / 2010	
Mailing Address 921 S Main St	Amount of Each Disbursement this Period 1600.00	
City London State KY Zip Code 40741-1524	Purpose of Disbursement Refund - General Contribution	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) .....	5800.00
TOTAL This Period (last page this line number only) .....	

10020793305

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 47 / 66
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

**A.**

Full Name (Last, First, Middle Initial) Keith Murt	Transaction ID: D235393 Date of Disbursement 08 / 31 / 2010
Mailing Address 815 Abell St	Amount of Each Disbursement this Period 2400.00
City Paducah State KY Zip Code 42003-0168	
Purpose of Disbursement Refund - General Contribution Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**B.**

Full Name (Last, First, Middle Initial) Mr. Harvey Napier	Transaction ID: D235394 Date of Disbursement 08 / 31 / 2010
Mailing Address 5471 S US Highway 421	Amount of Each Disbursement this Period 2400.00
City Harlan State KY Zip Code 40831-7257	
Purpose of Disbursement Refund - General Contribution Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**C.**

Full Name (Last, First, Middle Initial) Roger L. Nicholson	Transaction ID: D235395 Date of Disbursement 08 / 31 / 2010
Mailing Address 1557 Quarrier Street	Amount of Each Disbursement this Period 1500.00
City Charleston State WV Zip Code 25311	
Purpose of Disbursement Refund - General Contribution Candidate Name	Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) .....	6300.00
TOTAL This Period (last page this line number only) .....	

10020793306

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 48 / 66	
	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

A. Full Name (Last, First, Middle Initial) Mr. John D. Northcutt	Transaction ID: D235396	
	Date of Disbursement 08 / 31 / 2010	
Mailing Address 400 Fraley Dr	Amount of Each Disbursement this Period 1000.00	
City Morehead State KY Zip Code 40351-8877	Purpose of Disbursement Refund - General Contribution	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

B. Full Name (Last, First, Middle Initial) Mr. Larry O'Bryan	Transaction ID: D231846	
	Date of Disbursement 08 / 12 / 2010	
Mailing Address PO Box 5351	Amount of Each Disbursement this Period 2400.00	
City Louisville State KY Zip Code 40255-0351	Purpose of Disbursement Refund General Contribution	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

C. Full Name (Last, First, Middle Initial) Tommy Overstreet	Transaction ID: D235397	
	Date of Disbursement 08 / 31 / 2010	
Mailing Address 4338 Court Ave	Amount of Each Disbursement this Period 300.00	
City Paducah State KY Zip Code 42001-4856	Purpose of Disbursement Refund - General Contribution	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) .....	3700.00
TOTAL This Period (last page this line number only) .....	

10020793307



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 49 / 66
	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	
	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

A.	Full Name (Last, First, Middle Initial) Dr. Olney Mack Patrick, M.D.	Transaction ID: D235792
	Mailing Address 515 Leawood Dr	Date of Disbursement 08 / 31 / 2010
	City Frankfort State KY Zip Code 40601-4453	Amount of Each Disbursement this Period 900.00
	Purpose of Disbursement Refund - General Contribution	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Mr. John Mitchell Potter	Transaction ID: D235793
	Mailing Address PO Box 1200	Date of Disbursement 08 / 31 / 2010
	City Robinson Creek State KY Zip Code 41560-1200	Amount of Each Disbursement this Period 2400.00
	Purpose of Disbursement Refund - General Contribution	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Ms. Connie Prater	Transaction ID: D235398
	Mailing Address PO Box 1417	Date of Disbursement 08 / 31 / 2010
	City Inez State KY Zip Code 41224-1417	Amount of Each Disbursement this Period 2400.00
	Purpose of Disbursement Refund - General Contribution	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional) .....	5700.00
TOTAL This Period (last page this line number only) .....	

10020793308

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 50 / 66
	<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	
	<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

A.	Full Name (Last, First, Middle Initial) April Preece	Transaction ID: D235399
	Mailing Address PO Box 274	Date of Disbursement 08 / 31 / 2010
	City Lovely State KY Zip Code 41231-0274	Amount of Each Disbursement this Period 100.00
	Purpose of Disbursement Refund - General Contribution Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Craig S. Preece	Transaction ID: D235400
	Mailing Address PO Box 274	Date of Disbursement 08 / 31 / 2010
	City Lovely State KY Zip Code 41231-0274	Amount of Each Disbursement this Period 100.00
	Purpose of Disbursement Refund - General Contribution Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Mr. Danny L. Pyles	Transaction ID: D235402
	Mailing Address 99 Pineview Dr	Date of Disbursement 08 / 31 / 2010
	City Columbia State KY Zip Code 42728-9462	Amount of Each Disbursement this Period 100.00
	Purpose of Disbursement Refund - General Contribution Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional) .....	300.00
TOTAL This Period (last page this line number only) .....	

10020793309

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 51 / 66
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

**A.**

Full Name (Last, First, Middle Initial)  
Sandy L. Pyles

Mailing Address 99 Pineview Dr

City Columbia State KY Zip Code 42728-9462

Purpose of Disbursement Refund - General Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D235401  
Date of Disbursement 08 / 31 / 2010

Amount of Each Disbursement this Period 2400.00

Category/Type

**B.**

Full Name (Last, First, Middle Initial)  
Antonio M. Romanucci

Mailing Address 33 N La Salle St  
Fl 20

City Chicago State IL Zip Code 60602-2603

Purpose of Disbursement Refund - General Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D235794  
Date of Disbursement 08 / 31 / 2010

Amount of Each Disbursement this Period 1000.00

Category/Type

**C.**

Full Name (Last, First, Middle Initial)  
Dr. Charles C Schimpeler

Mailing Address 26 Village Plz

City Shelbyville State KY Zip Code 40065-1745

Purpose of Disbursement Refund - General Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D235403  
Date of Disbursement 08 / 31 / 2010

Amount of Each Disbursement this Period 2400.00

Category/Type

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 5800.00

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

10020793310

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 66
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

A. Full Name (Last, First, Middle Initial) Ms. Connie Stotts	Transaction ID: D235404	
	Date of Disbursement MM / DD / YYYY 08 / 31 / 2010	
Mailing Address PO Box 1689	Amount of Each Disbursement this Period 2400.00	
City Columbia State KY Zip Code 42728-6689	Purpose of Disbursement Refund - General Contribution Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Full Name (Last, First, Middle Initial) Mr. Porter Stotts, Jr.	Transaction ID: D235405	
	Date of Disbursement MM / DD / YYYY 08 / 31 / 2010	
Mailing Address PO Box 1689	Amount of Each Disbursement this Period 2400.00	
City Columbia State KY Zip Code 42728-6689	Purpose of Disbursement Refund - General Contribution Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Full Name (Last, First, Middle Initial) Ms. Eloise W. Sturgill	Transaction ID: D235406	
	Date of Disbursement MM / DD / YYYY 08 / 31 / 2010	
Mailing Address 412 Adair Rd	Amount of Each Disbursement this Period 1600.00	
City Lexington State KY Zip Code 40502-2425	Purpose of Disbursement Refund - General Contribution Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) .....	6400.00
TOTAL This Period (last page this line number only) .....	

10020793311

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 53 / 66

17  18  19a  19b  
 20a  20b  20c  21

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

**A.**

Full Name (Last, First, Middle Initial)  
Herbert Swiger

Mailing Address 1916 Ivy Creek Rd.

City Ivel State KY Zip Code 41642-0175

Purpose of Disbursement Refund - General Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D235407  
Date of Disbursement 08 / 31 / 2010

Amount of Each Disbursement this Period 2400.00

Category/Type

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Robert C. Tackett

Mailing Address 602 Stratton Branch Rd

City Stanville State KY Zip Code 41659-9035

Purpose of Disbursement Refund - General Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D235408  
Date of Disbursement 08 / 31 / 2010

Amount of Each Disbursement this Period 350.00

Category/Type

**C.**

Full Name (Last, First, Middle Initial)  
John D. Toole, III

Mailing Address 2415 Riverlane Terrace

City Fort Lauderdale State FL Zip Code 33312

Purpose of Disbursement Refund - General Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D235409  
Date of Disbursement 08 / 31 / 2010

Amount of Each Disbursement this Period 2400.00

Category/Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ 5150.00

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

10020793312

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 / 66
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

A.	Full Name (Last, First, Middle Initial) Mr. Daren L. Turner	Transaction ID: D235410 Date of Disbursement 08 / 31 / 2010
	Mailing Address 2421 Fortune Dr Ste 150	Amount of Each Disbursement this Period 2400.00
	City Lexington State KY Zip Code 40509-4126	
	Purpose of Disbursement Refund - General Contribution	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	
B.	Full Name (Last, First, Middle Initial) Mrs. Kirsten Turner	Transaction ID: D235411 Date of Disbursement 08 / 31 / 2010
	Mailing Address 2421 Fortune Dr Ste 150	Amount of Each Disbursement this Period 2400.00
	City Lexington State KY Zip Code 40509-4126	
	Purpose of Disbursement Refund - General Contribution	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	
C.	Full Name (Last, First, Middle Initial) Mrs. Linda Turner	Transaction ID: D235412 Date of Disbursement 08 / 31 / 2010
	Mailing Address 1008 Chinoe Rd	Amount of Each Disbursement this Period 2400.00
	City Lexington State KY Zip Code 40502-6564	
	Purpose of Disbursement Refund - General Contribution	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional) .....	7200.00
TOTAL This Period (last page this line number only) .....	

10020793313

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 55 / 66
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

A.	Full Name (Last, First, Middle Initial) Mr. Ron W. Turner	Transaction ID: D235413 Date of Disbursement 08 / 31 / 2010
	Mailing Address 232 Stonehedge St	Amount of Each Disbursement this Period 2400.00
	City Frankfort State KY Zip Code 40601-4816	
	Purpose of Disbursement Refund - General Contribution	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Dr. Susan Turner	Transaction ID: D235795 Date of Disbursement 08 / 31 / 2010
	Mailing Address 301 W 3rd St	Amount of Each Disbursement this Period 390.27
	City Frankfort State KY Zip Code 40601-2703	
	Purpose of Disbursement Refund - General Contribution	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Jennifer Usrey	Transaction ID: D235414 Date of Disbursement 08 / 31 / 2010
	Mailing Address 2415 Riverlane Terrace	Amount of Each Disbursement this Period 2400.00
	City Fort Lauderdale State FL Zip Code 33312	
	Purpose of Disbursement Refund - General Contribution	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional) .....	5190.27
TOTAL This Period (last page this line number only) .....	

10020793314

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 / 66
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

A. Full Name (Last, First, Middle Initial) Daniel Wainscott	Transaction ID: D235416
	Date of Disbursement 08 / 31 / 2010
Mailing Address 127 Springhill Dr	Amount of Each Disbursement this Period 2200.00
City Bardstown State KY Zip Code 40004-2105	
Purpose of Disbursement Refund - General Contribution	Category/Type
Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

B. Full Name (Last, First, Middle Initial) Loretta Wainscott	Transaction ID: D235415
	Date of Disbursement 08 / 31 / 2010
Mailing Address 127 Springhill Dr	Amount of Each Disbursement this Period 2200.00
City Bardstown State KY Zip Code 40004-2105	
Purpose of Disbursement Refund - General Contribution	Category/Type
Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

C. Full Name (Last, First, Middle Initial) Mr. Robert R. Wallace	Transaction ID: D235796
	Date of Disbursement 08 / 31 / 2010
Mailing Address PO Box 106	Amount of Each Disbursement this Period 600.00
City Dry Ridge State KY Zip Code 41035-9788	
Purpose of Disbursement Refund - General Contribution	Category/Type
Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: District:	

SUBTOTAL of Disbursements This Page (optional) .....	5000.00
TOTAL This Period (last page this line number only) .....	

10020793315



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

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

FOR LINE NUMBER: (check only one)

PAGE 57 / 66

17  18  19a  19b  
 20a  20b  20c  21

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

**A.**

Full Name (Last, First, Middle Initial)  
Chadwick Warrix

Mailing Address 4500 Franklin Pike

City Nashville State TN Zip Code 37204

Purpose of Disbursement Refund - General Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D235418  
Date of Disbursement 08 / 31 / 2010

Amount of Each Disbursement this Period 2400.00

Category/Type

**B.**

Full Name (Last, First, Middle Initial)  
Lora Duff Warrix

Mailing Address 4500 Franklin Pike

City Nashville State TN Zip Code 37204

Purpose of Disbursement Refund - General Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D235417  
Date of Disbursement 08 / 31 / 2010

Amount of Each Disbursement this Period 2400.00

Category/Type

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Earnest Watts

Mailing Address 75 Watts Dr

City Cornettsville State KY Zip Code 41731-8558

Purpose of Disbursement Refund - General Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D235419  
Date of Disbursement 08 / 31 / 2010

Amount of Each Disbursement this Period 2400.00

Category/Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ 7200.00

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

10020793316

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 58 / 66

17  18  19a  19b  
 20a  20b  20c  21

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mr. Greg Wells</p>	<p>Transaction ID: D235421 Date of Disbursement</p>
<p>Mailing Address 106 Mountain Shadows Dr</p>	<p><input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2010"/></p>
<p>City State Zip Code Hazard KY 41701-9446</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Refund - General Contribution</p> <p>Candidate Name</p>	<p><input type="text" value="2400.00"/></p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Ms. Noreen Wells</p>	<p>Transaction ID: D235420 Date of Disbursement</p>
<p>Mailing Address 106 Mountain Shadows Dr</p>	<p><input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2010"/></p>
<p>City State Zip Code Hazard KY 41701-9446</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Refund - General Contribution</p> <p>Candidate Name</p>	<p><input type="text" value="2400.00"/></p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Mr. James E. Williams, Jr.</p>	<p>Transaction ID: D235481 Date of Disbursement</p>
<p>Mailing Address 43 Hansford Ln</p>	<p><input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2010"/></p>
<p>City State Zip Code Hazard KY 41701-8106</p>	<p>Amount of Each Disbursement this Period</p>
<p>Purpose of Disbursement Refund - General Contribution</p> <p>Candidate Name</p>	<p><input type="text" value="100.00"/></p>
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Category/ Type</p>
<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="4900.00"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

10020793317

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 / 66	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

**A.**

Full Name (Last, First, Middle Initial)  
Ms. Janice T. Willoughby

Mailing Address 401 Akers Dr

City Wilmore State KY Zip Code 40390-1001

Purpose of Disbursement Refund - General Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D235483  
Date of Disbursement 08 / 31 / 2010

Amount of Each Disbursement this Period 2400.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Malcolm Douglas Willoughby

Mailing Address 401 Akers Dr

City Wilmore State KY Zip Code 40390-1001

Purpose of Disbursement Refund - General Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D235482  
Date of Disbursement 08 / 31 / 2010

Amount of Each Disbursement this Period 1800.00

**C.**

Full Name (Last, First, Middle Initial)  
Ms. Debora Wilmhoff

Mailing Address 8236 Meadow View Dr

City Florence State KY Zip Code 41042-9567

Purpose of Disbursement Refund - General Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

Transaction ID: D235797  
Date of Disbursement 08 / 31 / 2010

Amount of Each Disbursement this Period 2400.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 6600.00

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

10020793318

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

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

FOR LINE NUMBER: (check only one)

PAGE 60 / 66

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mr. Garry Wise</p> <p>Mailing Address 1859 Pensacola Dr</p> <p>City Lexington State KY Zip Code 40503-1919</p> <p>Purpose of Disbursement Refund - General Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D235484</p> <p>Date of Disbursement 08 / 31 / 2010</p> <p>Amount of Each Disbursement this Period 2400.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Miss Aimee Wulfeck</p> <p>Mailing Address 213 Prather Ct</p> <p>City Fort Mitchell State KY Zip Code 41017-5639</p> <p>Purpose of Disbursement Refund - General Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D235485</p> <p>Date of Disbursement 08 / 31 / 2010</p> <p>Amount of Each Disbursement this Period 2400.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Ms. Debra L. Wulfeck</p> <p>Mailing Address 8101 Kara Ln</p> <p>City Hebron State KY Zip Code 41048-8718</p> <p>Purpose of Disbursement Refund - General Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D235798</p> <p>Date of Disbursement 08 / 31 / 2010</p> <p>Amount of Each Disbursement this Period 2400.00</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p>7200.00</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	

10020793319

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 61 / 66
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

A. Full Name (Last, First, Middle Initial) Richard Wulfeck	Transaction ID: D235486	
	Date of Disbursement MM / DD / YYYY 08 / 31 / 2010	
Mailing Address 8101 Kara Lane	Amount of Each Disbursement this Period 2400.00	
City Hebron State KY Zip Code 41048	Purpose of Disbursement Refund - General Contribution	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) .....	2400.00
TOTAL This Period (last page this line number only) .....	209399.27

10020793320

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input checked="" type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

A. Full Name (Last, First, Middle Initial) International Brotherhood Of Electrical Workers Co		Transaction ID: D235487 Date of Disbursement MM / DD / YYYY 08 / 31 / 2010
Mailing Address 900 7th St NW		Amount of Each Disbursement this Period 500.00
City Washington State DC Zip Code 20001-3886	Purpose of Disbursement Refund - General Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State:           District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

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

10020793321

**SCHEDULE C (FEC Form 3)**

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

FOR LINE NUMBER: (check only one)  13a  13b

**LOANS**

NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

Transaction ID: L322

**LOAN SOURCE** Full Name (Last, First, Middle Initial)  
Daniel Mongiardo

Election:  Primary  General  Other (specify) ▼

Mailing Address 200 Medical Center Dr

City Hazard State KY ZIP Code 41701-9466

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
12500.00	12500.00	0.00

**TERMS**

Date Incurred: MM 06 DD 30 YY 2010 Date Due: None Interest Rate: .0000 % (apr) Secured:  Yes  No

List All Endorsers or Guarantors (if any) to Loan Source

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

**SUBTOTALS** This Period This Page (optional) ..... ▶

**TOTALS** This Period (last page in this line only) ..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

10020793322

**SCHEDULE D (FEC Form 3)**

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)  9  10

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor AT&T		Nature of Debt (Purpose): Office Telephone
Mailing Address PO Box 538641		
City Atlanta	State GA	

Outstanding Balance Beginning This Period 119.07	Transaction ID: D227997	
Amount Incurred This Period 0.00	Payment This Period 119.07	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Daniel Mongiardo		Nature of Debt (Purpose): Reimburse Candidate Travel
Mailing Address 200 Medical Center Dr		
City Hazard	State KY	

Outstanding Balance Beginning This Period 50102.50	Transaction ID: D227973	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 50102.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Daniel Mongiardo		Nature of Debt (Purpose): Reimburse Candidate Travel
Mailing Address 200 Medical Center Dr		
City Hazard	State KY	

Outstanding Balance Beginning This Period 2967.50	Transaction ID: D227975	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2967.50

1) SUBTOTALS This Period This Page (optional).....	53070.00
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

10020793323



**SCHEDULE D (FEC Form 3)**

(Use separate schedule(s) for each numbered line)

**DEBTS AND OBLIGATIONS**

FOR LINE NUMBER: (check only one)  9  10

**Excluding Loans**

NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Daniel Mongiardo			Nature of Debt (Purpose): Computer
Mailing Address 200 Medical Center Dr			
City Hazard	State KY	ZIP Code 41701-9466	

Outstanding Balance Beginning This Period 2023.46	Transaction ID: D227977	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 2023.46

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Daniel Mongiardo			Nature of Debt (Purpose): Video Software/Training
Mailing Address 200 Medical Center Dr			
City Hazard	State KY	ZIP Code 41701-9466	

Outstanding Balance Beginning This Period 3479.05	Transaction ID: D227979	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 3479.05

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Division of Unemployment Insurance			Nature of Debt (Purpose): Ky Unemployment Insurance Fund
Mailing Address PO Box 2003			
City Frankfort	State KY	ZIP Code 40602	

Outstanding Balance Beginning This Period 215.78	Transaction ID: D228007	
Amount Incurred This Period 0.00	Payment This Period 215.78	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional).....	▶	5502.51
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

10020793324

**SCHEDULE D (FEC Form 3)**

(Use separate schedule(s) for each numbered line)

**DEBTS AND OBLIGATIONS**

FOR LINE NUMBER: (check only one)

9  
 10

**Excluding Loans**

NAME OF COMMITTEE (In Full)  
Friends for Daniel Mongiardo

**A. Full Name (Last, First, Middle Initial) of Debtor or Creditor**  
Franklin County Clerk

**Nature of Debt (Purpose):**  
Franklin County Payroll Tax Withheld

Mailing Address Main Street

City Frankfort State KY ZIP Code 40601

Outstanding Balance Beginning This Period	Transaction ID: D228008	
668.90		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	668.90	0.00

**B. Full Name (Last, First, Middle Initial) of Debtor or Creditor**  
Kentucky State Treasurer

**Nature of Debt (Purpose):**  
Ky Payroll Tax Withheld

Mailing Address Department of Revenue

City Frankfort State KY ZIP Code 40619

Outstanding Balance Beginning This Period	Transaction ID: D227999	
3681.47		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	3681.47	0.00

**C. Full Name (Last, First, Middle Initial) of Debtor or Creditor**  
NGP Software, Inc.

**Nature of Debt (Purpose):**  
Campaign Software

Mailing Address 1225 Eye Street, NW  
Suite #1225

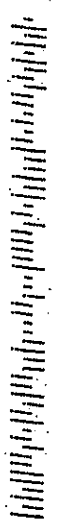
City Washington State DC ZIP Code 20005

Outstanding Balance Beginning This Period	Transaction ID: D227995	
1600.00		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	1600.00	0.00

1) SUBTOTALS This Period This Page (optional).....	0.00
2) TOTALS This Period (last page this line number only).....	58572.51
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	58572.51

16020793325

~ Bureau / 11  
Frankfort Ky 40601



7008 0500 0000 3484 8322

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SECRETARY

DANA K. MCCALLUM  
SUPERINTENDENT

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# United States Senate

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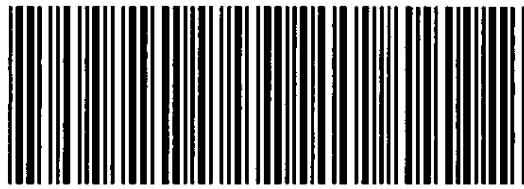
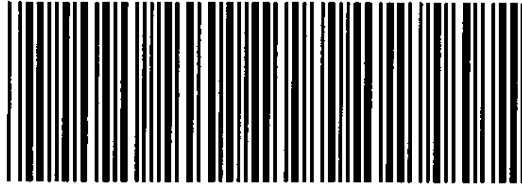
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DATE PREPARED 10-19-10

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