## 2018:01:23:05:00186412

FEC FORM 1

## STATEMENT OF ORGANIZATION

RECEIVED FEC MAIL CENTER

2018 JAN 23 AM 10: 05

NAME OF COMMITTEE (in full)		(Check if name is changed)	Example: If typing, over the lines.	type 12F	Ê4M5	
Stoll Keenon Ogden FED PAC				<u> </u>	<u> </u>	
			<u> </u>		<u> </u>	
ADDRESS (number and street)	300 W	est Vine Street		<u> </u>	<u>                                     </u>	
(Check if address is changed)	Suite 2	1.00, , , , , ,	<u> </u>			
· · ·	Lexingt C	iqn i i i i i		KY STATE		IP CODE▲
COMMITTEE'S E-MAIL ADDRES	SS					
	L	<u> </u>		<u> </u>	1 1 1 1 1 1	
	Optiona	Second E-Mail Add	Iress			i
			<del>.                                    </del>			
	•	•		• •		
COMMITTEE'S WEB PAGE ADD	RESS (L	IRL)	,			
<ul><li>✓ (Check if address is changed)</li></ul>						
· · · · · ·	LLL	<del></del>			111111	
2. DATE 01 08	D / Y	018				
3. FEC IDENTIFICATION NU	IMBER	► C có	0212092		e <sup>r</sup>	
4. IS THIS STATEMENT	NEV	v (N) OR	X AMENDI	ED (A)		
I certify that I have examined th	is Statem	ent and to the best	of my knowledge and	d belief it is true,	correct and complete	е.
Type or Print Name of Treasurer	Mr. 7	Fimothy Eifler				
Signature of Treasurer		MIC		Date	01 08	2018
NOTE: Submission of false, errone			may subject the person			of 52 U.S.C. §30109
Office Use			For further inf Federal Election Toll Free 800-4			FORM 1 d 06/2012)

FEC F	orm 1 (Revised 02/2009)	Page 2			
	TYPE OF COMMITTEE				
Candidat	e Committee:				
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)				
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)				
Name of Candidate	· · · · · · · · · · · · · · · · · · ·				
Candidate Party Affilia	Office Sought: House Senate President	State District			
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	000000000000000000000000000000000000000			
Name of Candidate	. [ ] ] ] ] ] ] ] ] ] ] ] ] ] ] ] ] ] ]				
Party Co	mmittee:				
(d)		Democratic, Republican, etc.) Party.			
Political A	Action Committee (PAC):				
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	nected organization is a:			
	Corporation Corporation w/o Capital Stock	Labor Organization			
	Membership Organization Trade Association	Cooperative			
	In addition, this committee is a Lobbyist/Registrant PAC.				
(f) X	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)				
	In addition, this committee is a Lobbyist/Registrant PAC.				
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)				
Joint Fundraising Representative:					
(a)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.				
(h)	(h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.				
Cor	nmittees Participating in Joint Fundraiser				
Coi					
1.	FEC ID number				
<b>2.</b> .	FEC ID number				
3.	FEC ID number C				
	Li I I I I I I I I I I I I I I I I I I I	***************************************			

FEC Form	1 (Revised 02/2009)	Page <b>3</b>
Write or Type Com	nmittee Name	
Stoll Keenon Og	gden FED PAC	
6. Name of Any (	Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Lead	dership PAC Sponsor
Mailing Address		
	<u> </u>	111111
	<u> </u>	
	CITY STATE	ZIP CODE
	According to the control of the cont	Leadership PAC Sponso
. Custodian of R books and reco	Records: Identify by name, address (phone number optional) and position of the person in rds.	n possession of committe
Full Name	Susan Bryant	<u> </u>
Mailing Address	300 Weşt Vine Street	
	Syite, 21,00	
	Lexington KY 405	507     -
Title or Position	CITY STATE	ZIP CODE
Accounting Ma	anager Telephone number [859].	_ [231 ;
	the name and address (phone number optional) of the treasurer of the committee; and th agent (e.g., assistant treasurer).	e name and address of
Full Name of Treasurer	Timothy Eifler	
Mailing Address	300 Weşt Vine Street	
	Suite, 21,00	
•	Lexington   KY   405	507     -
Title or Position	CITY STATE	ZIP CODE
Member		_ 231

CITY

STATE

ZIP CODE

Page 4

Mailing Address

FEC Form 1 (Revised 02/2009)

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FEC Form	n 1S (Revised 02/201
E(a) or (b)	Joint Eundroicina

## **Optional Supplemental Information**

Page	of

<u> </u>	FEC Form 1S (Revised 02/2	2017)	for Lines 5(g) or (h), 6, 8	and/or 9	Page <b>of</b>
5(a):	or(h). <b>Joint Fundraisin</b>	a Participant:			
-13/	1.			FEC ID number	C
	2.	1 [ ]		FEC ID number	C
	3.	1 1 1 1		FEC ID number	C
	4			FEC ID number	C
	· · · · · · · · · · · · · · · · · · ·	<del></del>			
6.	Name of Any Connected	Organization,	Affiliated Committee, Joint Fundr	aising Representative	, or Leadership PAC Sponso
			<u> </u>	<u>i i i i i i i i i i i i i i i i i i i </u>	
			<u> </u>	<u>i ]                                     </u>	
	Mailing Address				!
		Lilii			
	Relationship:		CITY ▲	STATE ▲	ZIP CODE ▲
	Connecte	d Organization	Affiliated Committee oint	Fundraising Representa	tiveLeadership PAC Spor
8.		y by name, ado	dress (phone number - optional)		
	Full Name				
	Mailing Address				
				<u> </u>	<u> </u>
	TITLE OR POSITION	▼	CITY ▲	STATE ▲	ZIP CODE ▲
				elephone Number	
9.	Banks or Other Depositors safety deposit boxes or management		anks or other depositories in which	the committee deposits	s funds, holds accounts, rents
	Name of Bank, Depository, etc.				
	Mailing Address				
					<u> </u>
1			CITY A	STATE A	ZIP CODE ▲

FIRST-CLASS MA

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Federal Election Commission 999 E Street, N.W. Washington, DC 20463



## Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received.

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Postmark Illegible	
No Postmark	
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Ne	ext Business Day Delivery
Received from House Records & Registration (	Date of Receipt Office
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	Date of Receipt or Postmarked
Ber S	01-23-206
PREPARER (3/2015)	DATE PREPARED