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**FEC
FORM 1**

**STATEMENT OF
ORGANIZATION**

(See instructions)

Office use only

1. NAME OF COMMITTEE (In full)

(Check if name is changed)

Example: If typing, type over the lines

12FE4M5

2002 Kentucky Republican Victory Committee

ADDRESS (number and street)

PO Box 1069

(Check if address is changed)

Frankfort

KY

40602

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

krvc@rpk.org

COMMITTEE'S WEB PAGE ADDRESS (URL)

2. DATE

JUN 05 2002

3. FEC IDENTIFICATION NUMBER

4. IS THIS STATEMENT

NEW (N)

OR

AMENDED (A)

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

Type or Print Name of Treasurer

Ms Catherine Bell

Signature of Treasurer

Catherine Bell

Date

JUN 06 2002

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 38 U.S.C. 5627g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1110

FEC FORM 1
(Revised 1/2001)

2002 JUN 21 P 02 20

5. TYPE OF COMMITTEE (Check One)

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

Name of Candidate _____

Candidate Party Affiliation Office Sought House Senate President State District

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

- (d) This committee is a (National, State (or subordinate) committee of the (Democratic, Republican, etc.) Party
- (e) This committee is a separate segregated fund
- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee

6. Name of Any Connected Organization or Affiliated Committee

REPUBLICAN PARTY OF KENTUCKY _____

Mailing Address _____ PO BOX 1068 _____

FRANKFORT _____ KY _____ 40602 _____

CITY ▲ STATE ▲ ZIP CODE ▲

Relationship _____ J Fund Participant _____

Type of Connected Organization:

- Corporation Corporation w/o Capital Stock Labor Organization
- Membership Organization Trade Association Cooperative

Write or Type Committee Name

2002 Kentucky Republican Victory Committee

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

Full Name Ms Catherine Bell

Mailing Address PO Box 1068

Frankfort KY 40602

Title or Position Treasurer CITY STATE ZIP CODE

Telephone number 502 875 5130

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

Full Name of Treasurer Ms Catherine Bell

Mailing Address PO Box 1068

Frankfort KY 40602

Title or Position Treasurer CITY STATE ZIP CODE

Telephone number 502 875 5130

Full Name of Designated Agent _____

Mailing Address _____

_____ CITY STATE ZIP CODE

Telephone number _____

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

Name of Bank, Depository, etc.

Century Bank

Mailing Address

201 West Woodford Street

Lawrenceburg

KY

40342

CITY ▲

STATE ▲

ZIP CODE ▲

2002-03-28 11:44 AM

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

[ADDITIONAL]

Name of Bank, Depository, etc.

Mailing Address

Grid for mailing address information

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ADDITIONAL]

NORTHUP FOR CONGRESS

Mailing Address

PO BOX 7313

LOUISVILLE

KY

40207

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

J Fund Participant

Type of Connected Organization:



Corporation

Corporation w/o Capital Stock

Labor Organization



Membership Organization

Trade Association

Cooperative

Designated Agent

[ADDITIONAL]

Full Name _____

Mailing Address _____

Title or Position ▼

CITY ▲

STATE ▲

ZIP CODE ▲

Telephone number _____

2001年03月04日 星期二 14:00:00

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

<input checked="" type="checkbox"/>	Hand Delivered	Date of Receipt 6-21-02
<input type="checkbox"/>	First Class Mail	POSTMARKED
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<input type="checkbox"/>	No Postmark	
<input type="checkbox"/>	Postmark Illegible	
<input type="checkbox"/>	Received from the House office of Records and Registration	Date of Receipt
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<input type="checkbox"/>	Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/>	Electronic Filing	
<i>See</i>		6-21-02
PREPARER		DATE PREPARED

(6/21/00)

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