

STATEMENT OF ORGANIZATION

SECRETARY OF THE SENATE

(See reverse side for instructions)

01 SEP 13 PM 1:31

1. (a) NAME OF COMMITTEE IN FULL Kentucky First 2002 ☐ (Check if name is changed)		2. DATE 9/10/01
(b) Number and Street Address 430 South Capitol Street, SE ☐ (Check if address is changed)		3. FEC IDENTIFICATION NUMBER
(c) City, State and ZIP Code Washington, DC 20003		4. IS THIS STATEMENT AN AMENDMENT? ☐ YES ☒ NO

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	State/District
-------------------	-----------------------------	---------------	----------------

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

6. Name of Any Connected Organization or Affiliated Committee	Mailing Address and ZIP Code	Relationship
Lois 2002 US Senate Committee	167 West Main Street, #1111 Lexington, KY 40507	Participants affiliated for Joint Fundraising purposes pursuant to 11C.F.R. 102.17
Democratic Senatorial Campaign Committee	430 South Capitol Street, SE Washington, DC 20003	

Type of Connected Organization

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

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

Full Name	Mailing Address	Title or Position
-----------	-----------------	-------------------

Andrew Grossman	430 South Capitol Street, SE, Washington, DC 20003	Treasurer
-----------------	--	-----------

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

Full Name	Mailing Address	Title or Position
Andrew Grossman	430 South Capitol Street, SE, Washington, DC 20003	Treasurer
Darlene Setter	430 South Capitol Street, SE, Washington, DC 20003	Asst. Treas.

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

Name of Bank, Depository, etc.	Mailing Address and ZIP Code
--------------------------------	------------------------------

Bank of America	730 15th Street NW, Washington, DC 20005
-----------------	--

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	SIGNATURE OF TREASURER	DATE
Andrew Grossman		9/10/01

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

For further information contact:
Federal Election Commission
Toll-free 800-424-9530
Local 202-376-3120

FEC FORM 1
(revised 4/87)

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

☒ **HAND DELIVERED** 9/13/01
Date of Receipt

☐ **FAX (48-HOUR NOTICES)** _____
Date of Receipt

☐ **INSIDE MAIL** _____
Date of Receipt

☐ **RECEIVED FROM THE LEGISLATIVE RESOURCE
CENTER** _____
Date of Receipt

☐ **RECEIVED FROM THE FEDERAL ELECTION
COMMISSION** _____
Date of Receipt

☐ **FIRST CLASS MAIL** _____
Postmarked

☐ **REGISTERED/CERTIFIED MAIL** _____
Postmarked

☐ **NO POSTMARK** ☐ **POSTMARK ILLEGIBLE**

☐ **OTHER (Specify):** _____
☐ **AIRBORNE EXPRESS**
☐ **EXPRESS MAIL**
☐ **FEDERAL EXPRESS**
☐ **UPS** _____
Postmark and/or Date of Receipt

RD 9/13/01
Preparer Date Prepared