

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

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

FOR LINE NUMBER: PAGE 104 / 360

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

REPUBLICAN PARTY OF KENTUCKY

**A.**

Full Name (Last, First, Middle Initial)

Joanne D. Maamry

Mailing Address 11710 Hancock Trace Court

City

Louisville

State

KY

Zip Code

40245-2091

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Jewish & St Mary Hospital

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 0 / 2 0 0 7

Transaction ID: SA11AI.15552

Amount of Each Receipt this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Michael T. MacFarlane

Mailing Address 7010 Penfield Pl

City

Prospect

State

KY

Zip Code

40059-8813

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dr. MacFarlane

Occupation  
Physican

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 3 / 2 0 0 7

Transaction ID: SA11AI.15138

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

Delmar D. Mahan

Mailing Address 1875 Frankfort School Rd

City

Corbin

State

KY

Zip Code

40701-7808

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Marr, Miller & Muer

Occupation  
Accountant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 6 / 2 0 0 7

Transaction ID: SA11AI.15747

Amount of Each Receipt this Period

1000.00

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

1700.00

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