

KENTUCKY REGISTRY OF ELECTION FINANCE

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www.kref.ky.gov

**CANDIDATE / SLATE OF CANDIDATES
ELECTION FINANCE STATEMENT – COVER PAGE**

(Please type or print)

This Space for Registry Use Only

Logged _____ Keyed _____

Election Status: W L

Candidate Status:	Reporting Status:
INELG	S Only
WD	Debt Only
DD	S/D
T	∅ Continue to G
	TFC

1. Candidate/Slate of Candidates: _____
 Committee Name: _____
 Date of Birth: ___/___/_____ KREF Filer # _____
 Office Sought: _____
 District/Division Number: _____
 County of Residence: _____
 Political Party: _____

2. Candidate/Slate of Candidates/Committee Mailing Address:

Daytime Phone Number: (____)____-____ Email: _____
 Check here if the any of the above info has changed since your last filing.

3. Treasurer’s Name and Mailing Address:

Daytime Phone Number: (____)____-____ Email: _____
 Check here if the any of the above info has changed since your last filing.

4. This Statement Covers:

From: _____
 Month – Day – Year

To: _____
 Month – Day – Year

INCLUDE INFORMATION FOR THIS ELECTION ONLY

5. Date of Election: _____ This Statement relates to: Primary General Special
 Month – Day – Year Run-off Primary

6. Type of Statement

a. <input type="checkbox"/> Quarterly	g. <input type="checkbox"/> Annual Supplemental
b. <input type="checkbox"/> 60-day Pre-Election (<i>General Only</i>)	h. <input type="checkbox"/> Termination _____ Month – Day – Year
c. <input type="checkbox"/> 30-day Pre-Election	
d. <input type="checkbox"/> 15-day Pre-Election	i. <input type="checkbox"/> AMENDMENT – Check one of the items above
e. <input type="checkbox"/> 30-day Post-Election	to indicate which statement is being amended.
f. <input type="checkbox"/> 60-day Post-Election Supplemental	

7. I am either **Not on the Ballot** or **Unopposed** for this election, **and** will have **NO** contributions/expenditures

8. Verification: I certify that I have examined this Election Finance Statement and, to the best of my knowledge and belief, it is true, correct, and complete. **NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this statement to the penalties of KRS 121.990.**

Candidate or Treasurer: _____ Date: _____
Type or Print Name *Authorized Signature* *Month – Day – Year*

SUMMARY PAGE

Candidate/Slate of Candidates/Committee Name: _____

KREF Filer #: _____ Period From: ___/___/___ To: ___/___/___

RECEIPTS	COLUMN 1	COLUMN 2
1. MONETARY RECEIPTS: (INCLUDING ALL RECEIPTS FROM EVENTS)	(THIS PERIOD)	(CUMULATIVE THIS ELECTION)
a. ITEMIZED CONTRIBUTIONS BY CHECK OR WRITTEN INSTRUMENT (SCHEDULE 1A, ITEM 4a)	\$ _____	\$ _____
b. OTHER RECEIPTS (SCHEDULE 1A, ITEM 4c)	+\$ _____	\$ _____
c. Cash CONTRIBUTIONS (NUMBER OF PEOPLE _____) (SCHEDULE 1B) (INDIVIDUAL CASH LIMIT IS \$100, PER ELECTION)	+\$ _____	\$ _____
d. ANONYMOUS CONTRIBUTIONS (NUMBER OF PEOPLE _____) (SCHEDULE 1B) (MAXIMUM: \$100 PER CONTRIBUTION, AGGREGATE OF \$2,000 PER ELECTION)	+\$ _____	\$ _____
e. UNITEMIZED CONTRIBUTIONS (NUMBER OF PEOPLE _____) (SCHEDULE 1B) (CONTRIBUTIONS BY CHECK OF \$100 OR LESS PER ELECTION)	+\$ _____	\$ _____
f. POLITICAL ACTION COMMITTEE (PAC) CONTRIBUTIONS (SCHEDULE 1C, ITEM 4a)	+\$ _____	\$ _____
g. EXECUTIVE COMMITTEE CONTRIBUTIONS (SCHEDULE 1D, ITEM 3a)	+\$ _____	\$ _____
h. CAUCUS CAMPAIGN COMMITTEE CONTRIBUTIONS (SCHEDULE 1E, ITEM 3a)	+\$ _____	\$ _____
2. TOTAL RECEIPTS	= \$ _____	\$ _____

IN-KIND CONTRIBUTIONS		
3. a. ITEMIZED (SCHEDULE 1A, ITEM 4b)	\$ _____	\$ _____
b. PAC (SCHEDULE 1C, ITEM 4b)	\$ _____	\$ _____
c. EXECUTIVE COMMITTEE (SCHEDULE 1D, ITEM 3b)	\$ _____	\$ _____
d. CAUCUS CAMPAIGN COMMITTEE (SCHEDULE 1E, ITEM 3b)	\$ _____	\$ _____

EXPENDITURES	
4. TOTAL EXPENDITURES (SCHEDULE 2A, ITEM 4)	\$ _____

DEBTS AND OBLIGATIONS	
5. TOTAL DEBTS AND OBLIGATIONS (SCHEDULE 4A, ITEM 7)	\$ _____

BALANCE STATEMENT	
6. ENDING BALANCE OF PREVIOUS REPORT (ENTER -0- IF NO PREVIOUS REPORT)	+\$ _____
7. ADD TOTAL RECEIPTS DURING REPORTING PERIOD (LINE 2, COLUMN 1)	+\$ _____
8. SUB-TOTAL (ADD LINES 6 AND 7)	= \$ _____
9. SUBTRACT TOTAL EXPENDITURES DURING REPORTING PERIOD (LINE 4, COLUMN 1)	- \$ _____
10. ENDING BALANCE (SUBTRACT LINE 9 FROM LINE 8)	= \$ _____

NO CHANGE SINCE LAST REPORT *(check if applicable)*

If nothing of value has been received and no expenditures have been made since the last report, list the Ending Balance Line 10 amount from the last report as the Ending Balance Line 10 amount on this report.

YOU MAY DUPLICATE SCHEDULES AS NEEDED / USE ONLY SCHEDULES THAT ARE NEEDED

ITEMIZED RECEIPTS SCHEDULE 1A

Contributions From Individuals or Contributing Organizations in Excess of \$100 Per Election Must be Itemized

Candidate/Slate of Candidates/Committee: _____

KREF Filer #: _____ Period From: ___/___/___ To: ___/___/___

1a. Contributor Name and Address	1d. Marital Status	2. Date of Receipt *****	4a. Contribution by Check or Written Instrument	4b. Description And Value of In-Kind Contribution	4c. Other Receipts	5. Cumulative for Election (per Contributor) (Monetary/In-kind)
1b. Contributor Occupation and Employer (Name of business if self-employed)		3. Type of Receipt				
1c. Spouse's Name, Occupation and Employer (1c & 1d are for Statewide candidates Only)		_____/_____/_____ <input type="checkbox"/> Direct from Candidate <input type="checkbox"/> Loan from Candidate <input type="checkbox"/> Direct from a person or authorized entity <input type="checkbox"/> Fundraising Event <input type="checkbox"/> In-Kind <input type="checkbox"/> Other: _____				
Occupation/Employer:		_____/_____/_____ <input type="checkbox"/> Direct from Candidate <input type="checkbox"/> Loan from Candidate <input type="checkbox"/> Direct from a person or authorized entity <input type="checkbox"/> Fundraising Event <input type="checkbox"/> In-Kind <input type="checkbox"/> Other: _____				
Occupation/Employer:		_____/_____/_____ <input type="checkbox"/> Direct from Candidate <input type="checkbox"/> Loan from Candidate <input type="checkbox"/> Direct from a person or authorized entity <input type="checkbox"/> Fundraising Event <input type="checkbox"/> In-Kind <input type="checkbox"/> Other: _____				
Occupation/Employer:		_____/_____/_____ <input type="checkbox"/> Direct from Candidate <input type="checkbox"/> Loan from Candidate <input type="checkbox"/> Direct from a person or authorized entity <input type="checkbox"/> Fundraising Event <input type="checkbox"/> In-Kind <input type="checkbox"/> Other: _____				
Occupation/Employer:		_____/_____/_____ <input type="checkbox"/> Direct from Candidate <input type="checkbox"/> Loan from Candidate <input type="checkbox"/> Direct from a person or authorized entity <input type="checkbox"/> Fundraising Event <input type="checkbox"/> In-Kind <input type="checkbox"/> Other: _____				

SUBTOTAL THIS PAGE	\$	\$	\$
TOTAL THIS PERIOD (Only on last page of Schedule)	\$	\$	\$
	Enter this total on Col. 1, Line 1a of Summary Page	Enter this total in the space provided on Line 3a of the Summary Page	Enter this total on Col. 1, Line 1b of Summary Page

YOU MAY DUPLICATE SCHEDULES AS NEEDED / USE ONLY SCHEDULES THAT ARE NEEDED

PAC RECEIPTS SCHEDULE 1C

Contributions from PACs Must be Itemized Regardless of Amount

Candidate/Slate of Candidates/Committee Name: _____

KREF Filer #: _____ Period From: ___/___/___ To: ___/___/___

1. PAC Name and Address 2. Major business, social or political interest represented by the committee	3. Date of Receipt	4a. Contribution by Check or Written Instrument	4b. Description And Value of In-Kind Contribution	5. Cumulative for Election (per Contributor) (Monetary/In-kind)
Major Interest:	___/___/___			
Major Interest:	___/___/___			
Major Interest::	___/___/___			
Major Interest:	___/___/___			
Major Interest:	___/___/___			

SUBTOTAL THIS PAGE	\$ _____	\$ _____
TOTAL THIS PERIOD (Only on last page of Schedule)	\$ _____ <small>Enter this total in Col. 1, Line 1f of Summary Page</small>	\$ _____ <small>Enter this total in the space provided on Line 3b of the Summary Page</small>

YOU MAY DUPLICATE SCHEDULES AS NEEDED / USE ONLY SCHEDULES THAT ARE NEEDED

EXECUTIVE COMMITTEE RECEIPTS SCHEDULE 1D

Contributions in Excess of \$100 Per Election Must be Itemized

Candidate/Slate of Candidates/Committee Name: _____

KREF Filer #: _____ Period From: ___/___/___ To: ___/___/___

1. Executive Committee Name and Address	2. Date of Receipt	3a. Contribution by Check or Written Instrument	3b. Description And Value of In-Kind Contribution	4. Cumulative for Election <small>(per Contributor) (Monetary/In-kind)</small>
	___/___/___			
	___/___/___			
	___/___/___			
	___/___/___			
	___/___/___			

SUBTOTAL THIS PAGE	\$	\$
TOTAL THIS PERIOD <small>(Only on last page of Schedule)</small>	\$	\$
	<small>Enter this total on Col. 1, Line 1g of Summary Page</small>	<small>Enter this total on Col. 1, Line 3c of Summary Pages</small>

YOU MAY DUPLICATE SCHEDULES AS NEEDED / USE ONLY SCHEDULES THAT ARE NEEDED

CAUCUS CAMPAIGN COMMITTEE RECEIPTS SCHEDULE 1E

Contributions in Excess of \$100 Must be Itemized

Candidate/Slate of Candidates/Committee Name: _____

KREF Filer #: _____ Period From: ___/___/____ To: ___/___/____

1. Caucus Campaign Committee Name and Address	2. Date of Receipt	3a. Contribution by Check or Written Instrument	3b. Description And Value of In-Kind Contribution	4. Cumulative for Election <small>(Monetary/In-kind)</small>
	___/___/____			
	___/___/____			
	___/___/____			
	___/___/____			
	___/___/____			

SUBTOTAL THIS PAGE	\$ _____	\$ _____
TOTAL THIS PERIOD <small>(Only on last page of Schedule)</small>	\$ _____ <small>Enter this total on Col. 1, Line 1h of Summary Page</small>	\$ _____ <small>Enter this total in the space provided on Line 3d of the Summary Page</small>

YOU MAY DUPLICATE SCHEDULES AS NEEDED / USE ONLY SCHEDULES THAT ARE NEEDED

EXPENDITURES SCHEDULE 2A

Candidate/Slate of Candidates/Committee Name: _____

KREF Filer #: _____ Period From: ___/___/___ To: ___/___/___

1. Name and Address of Person or Business Paid <small>(List <u>Occupation</u> if Paid to a person. If over \$25 expenditure <i>must</i> be made by check. Persons transporting voters to the polls <i>must</i> be paid by check and each payment must be itemized to include name, address and <u>occupation</u>.)</small>	2. Purpose of Expenditure <small>(Be specific. If more than \$25, show purpose, date and amount.)</small>	3. Date of Expenditure	4. Amount of Expenditure
Occupation:		___/___/___	
Occupation:		___/___/___	
Occupation:		___/___/___	
Occupation:		___/___/___	
Occupation:		___/___/___	
Occupation:		___/___/___	
Occupation:		___/___/___	

SUBTOTAL THIS PAGE	\$ _____
TOTAL THIS PERIOD <small>(Only on last page of Schedule)</small>	\$ _____ <small>Enter this total in Col. 1, Line 4 of Summary Page</small>

YOU MAY DUPLICATE SCHEDULES AS NEEDED / USE ONLY SCHEDULES THAT ARE NEEDED

EVENTS SCHEDULE 3A

Candidate/Slate of Candidates/Committee Name: _____

KREF Filer #: _____ Period From: ___/___/___ To: ___/___/___

1. Sponsor of Event and Address where the Event was Held	2. Type of Fundraising Activity or Event	3. Date Event was Held	4. Total Amount Received	5. Cost of Event
		FROM: ___/___/___ TO: ___/___/___		
		FROM: ___/___/___ TO: ___/___/___		
		FROM: ___/___/___ TO: ___/___/___		
		FROM: ___/___/___ TO: ___/___/___		
		FROM: ___/___/___ TO: ___/___/___		
		FROM: ___/___/___ TO: ___/___/___		
		FROM: ___/___/___ TO: ___/___/___		

NOTE: Each fundraising activity or event must be listed separately. This schedule must be filed with the Election Finance Statement covering the period in which the fundraising activity or event took place, and is for informational purposes only. All contributions received in connection with the activity or event must be disclosed on the appropriate Receipts schedule and included in totals reported on the Summary Page. Contributing organizations must account for costs incurred in connection with the fundraising activity or event either as a Schedule 2A expenditure or an in-kind contribution on the appropriate Receipts Schedule. PACs must disclose the total cost of an event on this Schedule and maintain administrative records of all costs incurred in connection with a fundraising activity or event in the event of a complaint or an audit. The costs of fundraising activities and events are considered administrative costs of a PAC. As such, the PAC's sponsoring organization may cover or seek sponsors to cover the cost of the activity or event. Sponsors of a PAC event are NOT considered contributors to the PAC.

YOU MAY DUPLICATE SCHEDULES AS NEEDED / USE ONLY SCHEDULES THAT ARE NEEDED

DEBTS & OBLIGATIONS SCHEDULE 4A

Candidate/Slate of Candidates/Committee Name: _____

KREF Filer #: _____ Period From: ___/___/___ To: ___/___/___

1. Name and Mailing Address of Party to Whom Debt is Owed	2. Type of Obligation	3. Date Incurred	4. Original Amount	5. Prior Payment	6. Payment Made This Reporting Period	7. Outstanding Balance at Close of This Period
		___/___/___				
		___/___/___				
		___/___/___				
		___/___/___				
		___/___/___				

NOTE: If you have debts or obligations, this schedule must be filed with every Election Finance Statement with reportable activity (receipts and/or expenditures) up to and including the period in which all debts are paid or assumed by the candidate.

The candidate/slate of candidates may convert outstanding obligations or debt to a candidate contribution by personally assuming the debt remaining at the end of the campaign. If you wish to assume debt outstanding from your campaign, please execute the Certificate of Debt Assumption below.

SUBTOTAL THIS PAGE	\$ _____
TOTAL THIS PERIOD (Only on last page of Schedule)	\$ _____

Enter this total on Line 5 "Total Debts and Obligations" on the Summary Page

CERTIFICATE OF DEBT ASSUMPTION		Amount Assumed by Candidate (Only when closing campaign account)
I hereby assume personal responsibility for payment of all outstanding campaign debts for this election.		
_____	_____	
SIGNATURE	DATE	\$ _____

YOU MAY DUPLICATE SCHEDULES AS NEEDED / USE ONLY SCHEDULES THAT ARE NEEDED