

**REPORT OF AN INDEPENDENT EXPENDITURE**

**NOTE: KRS 121.015(12) provides as follows: "Independent expenditure" means the expenditure of money or other things of value for a communication which expressly advocates the election or defeat of a clearly identified candidate or slate of candidates, and which is made without any coordination, consultation, or cooperation with any candidate, slate of candidates, campaign committee, or any authorized person acting on behalf of any of them, and which is not made in concert with, or at the request or suggestion of any candidate, slate of candidates, campaign committee, or any authorized person acting on behalf of any of them.**

An independent expenditure must be reported when it exceeds \$500 in the aggregate in one election. (KRS 121.150(1))

Your Name and Address _____ Grow Louisville Together PO Box 6346 Louisville, KY 40206 Daytime Phone Number 502-849-9740		Your Occupation and Employer _____ Spouse's Name _____ Spouse's Occupation _____ Spouse's Employer _____		
Name of Candidate/Slate of Candidates/Committee Phillip Baker		Office Sought <input checked="" type="checkbox"/> Supported <input type="checkbox"/> Opposed Louisville Metro Council District 6		
Constitutional Amendment		Election <input type="checkbox"/> Supported <input type="checkbox"/> Opposed		
Date	To Whom Made	Address	Purpose	Amount
05/17/2024	Majority Strategies	PO Box 679219, Dallas, TX 75267	Texts	\$ 290.96

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

Heather Barlow  
Date

05/17/2024  
Signature



**KENTUCKY REGISTRY OF ELECTION FINANCE**  
 140 Walnut Street, Frankfort, KY 40601-3240  
 (502) 573-2226 FAX (502) 573-5622  
 www.kref.ky.gov

REGISTRY USE

KY REGISTRY OF  
 ELECTION FINANCE  
 MAY 15 2024

**REPORT OF AN INDEPENDENT EXPENDITURE**

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Your Name and Address _____ Grow Louisville Together PO Box 6346 Louisville, KY 40206 Daytime Phone Number <u>502-849-9740</u>		Your Occupation and Employer _____ Spouse's Name _____ Spouse's Occupation _____ Spouse's Employer _____		
Name of Candidate/Slate of Candidates/Committee Stan Moore		Office Sought <span style="float: right;"><input checked="" type="checkbox"/> Supported</span> <span style="float: right;"><input type="checkbox"/> Opposed</span> Louisville Metro Council District 4		
Constitutional Amendment		Election <span style="float: right;"><input type="checkbox"/> Supported</span> <span style="float: right;"><input type="checkbox"/> Opposed</span>		
Date	To Whom Made	Address	Purpose	Amount
05/14/2024	Majority Strategies	PO Box 679219, Dallas, TX 75267	Mailers	\$ 2,484.41

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

Heather Barlow  
 \_\_\_\_\_  
 Date

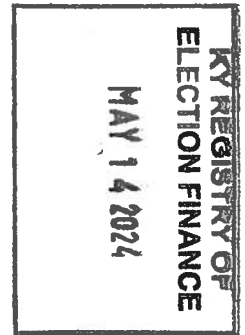
05/15/2024  
 \_\_\_\_\_  
 Signature



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Your Name and Address _____ Grow Louisville Together		Your Occupation and Employer _____		
PO Box 6346		Spouse's Name _____		
Louisville, KY 40206		Spouse's Occupation _____		
Daytime Phone Number 502-849-9740		Spouse's Employer _____		
Name of Candidate/Slate of Candidates/Committee Stan Moore		Office Sought _____ <input checked="" type="checkbox"/> Supported Louisville Metro Council District 4 _____ <input type="checkbox"/> Opposed		
Constitutional Amendment		Election _____ <input type="checkbox"/> Supported _____ <input type="checkbox"/> Opposed		
Date	To Whom Made	Address	Purpose	Amount
05/13/2024	Majority Strategies	PO Box 679219, Dallas, TX 75267	Mailers	\$ 2,484.41
05/14/2024	Majority Strategies	PO Box 679219, Dallas, TX 75267	Texts	\$ 96.92

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

Heather Barlow  
 \_\_\_\_\_  
 Date

05/14/2024  
 \_\_\_\_\_  
 Signature



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Your Name and Address _____ Grow Louisville Together PO Box 6346 Louisville, KY 40206 Daytime Phone Number 502-849-9740		Your Occupation and Employer _____  Spouse's Name _____ Spouse's Occupation _____ Spouse's Employer _____		
Name of Candidate/Slate of Candidates/Committee Phillip Baker		Office Sought _____ <input checked="" type="checkbox"/> Supported _____ Opposed Louisville Metro Council District 6		
Constitutional Amendment		Election _____ Supported _____ Opposed		
Date	To Whom Made	Address	Purpose	Amount
05/13/2024	Majority Strategies	PO Box 679219, Dallas, TX 75267	Mailers	\$ 4,592.60

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

*Heather Barlow*

05/13/2024

Date

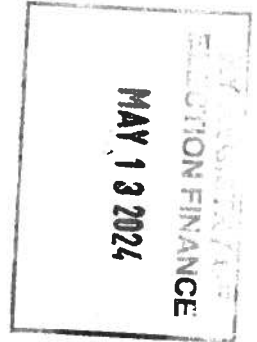
Signature



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Your Name and Address Grow Louisville Together PO Box 6346 Louisville, KY 40206 Daytime Phone Number 502-849-9740		Your Occupation and Employer		
Name of Candidate/Slate of Candidates/Committee Phillip Baker		Spouse's Name		
Constitutional Amendment		Spouse's Occupation		
		Spouse's Employer		
		Office Sought		<input checked="" type="checkbox"/> Supported <input type="checkbox"/> Opposed
		Election		<input type="checkbox"/> Supported <input type="checkbox"/> Opposed
		Louisville Metro Council District 6		
Date	To Whom Made	Address	Purpose	Amount
05/10/2024	Majority Strategies	PO Box 679219, Dallas, TX 75267	Texts	\$ 290.96

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

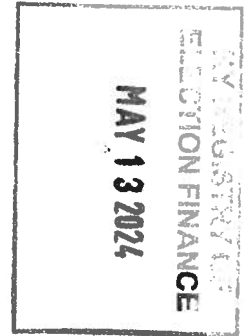
Heather Barlow  
Date

05/13/2024  
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Your Name and Address _____ Grow Louisville Together PO Box 6346 Louisville, KY 40206 Daytime Phone Number 502-849-9740		Your Occupation and Employer _____ Spouse's Name _____ Spouse's Occupation _____ Spouse's Employer _____		
Name of Candidate/Slate of Candidates/Committee Stan Moore		Office Sought _____ <input checked="" type="checkbox"/> Supported _____ <input type="checkbox"/> Opposed Louisville Metro Council District 4		
Constitutional Amendment		Election _____ <input type="checkbox"/> Supported _____ <input type="checkbox"/> Opposed		
Date	To Whom Made	Address	Purpose	Amount
05/10/2024	Majority Strategies	PO Box 679219, Dallas, TX 75267	Digital Ads	\$ 6,184.00
05/10/2024	Majority Strategies	PO Box 679219, Dallas, TX 75267	Mailers	\$ 2,484.41

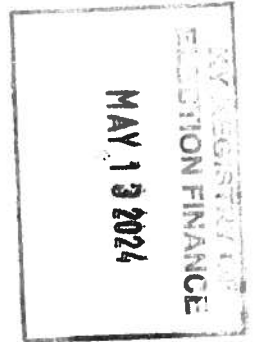
I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

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Name of Candidate/Slate of Candidates/Committee Phillip Baker		Office Sought <input checked="" type="checkbox"/> Supported <input type="checkbox"/> Opposed Louisville Metro Council District 6		
Constitutional Amendment		Election <input type="checkbox"/> Supported <input type="checkbox"/> Opposed		
Date	To Whom Made	Address	Purpose	Amount
05/10/2024	Majority Strategies	PO Box 679219, Dallas, TX 75267	Mailers	\$ 4,592.60

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05/10/2024  
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PO Box 6346		Spouse's Name _____		
Louisville, KY 40206		Spouse's Occupation _____		
Daytime Phone Number 502-849-9740		Spouse's Employer _____		
Name of Candidate/Slate of Candidates/Committee Stan Moore		Office Sought _____ <input checked="" type="checkbox"/> Supported _____ <input type="checkbox"/> Opposed Louisville Metro Council District 4		
Constitutional Amendment		Election _____ <input type="checkbox"/> Supported _____ <input type="checkbox"/> Opposed		
Date	To Whom Made	Address	Purpose	Amount
05/09/2024	Majority Strategies	PO Box 679219, Dallas, TX 75267	Digital Ads	\$ 6,209.00

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

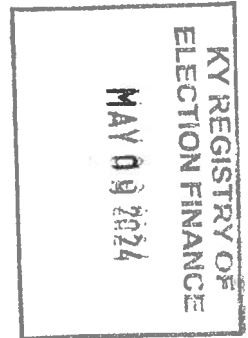
Heather Barlow  
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Name of Candidate/Slate of Candidates/Committee Phillip Baker		Office Sought <input checked="" type="checkbox"/> Supported <input type="checkbox"/> Opposed Louisville Metro Council District 6		
Constitutional Amendment		Election <input type="checkbox"/> Supported <input type="checkbox"/> Opposed		
Date	To Whom Made	Address	Purpose	Amount
05/08/2024	Majority Strategies	PO Box 679219, Dallas, TX 75267	Mailers	\$ 4,592.60

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

*Heather Barlow*

05/08/2024

Date

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Name of Candidate/Slate of Candidates/Committee Phillip Baker		Office Sought <span style="float: right;"><input checked="" type="checkbox"/> Supported</span> <span style="float: right;"><input type="checkbox"/> Opposed</span> Louisville Metro Council District 6		
Constitutional Amendment		Election <span style="float: right;"><input type="checkbox"/> Supported</span> <span style="float: right;"><input type="checkbox"/> Opposed</span>		
Date	To Whom Made	Address	Purpose	Amount
05/07/2024	Majority Strategies	PO Box 679219, Dallas, TX 75267	Media Production	\$ 2,625.00
05/07/2024	Majority Strategies	PO Box 679219, Dallas, TX 75267	Texts	\$ 290.96

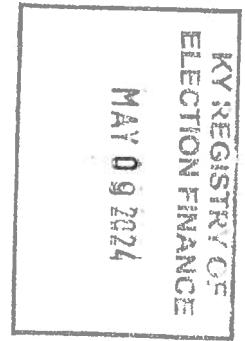
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Name of Candidate/Slate of Candidates/Committee Phillip Baker		Office Sought <input checked="" type="checkbox"/> Supported <input type="checkbox"/> Opposed Louisville Metro Council District 6		
Constitutional Amendment		Election <input type="checkbox"/> Supported <input type="checkbox"/> Opposed		
Date	To Whom Made	Address	Purpose	Amount
05/06/2024	Majority Strategies	PO Box 679219, Dallas, TX 75267	Digital Ads	\$ 5,008.00

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

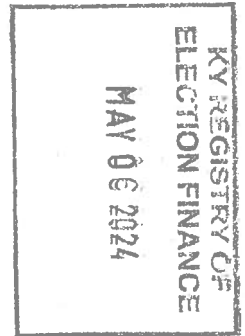
Heather Barlow  
Date

05/08/2024  
Signature



**KENTUCKY REGISTRY OF ELECTION FINANCE**  
 140 Walnut Street, Frankfort, KY 40601-3240  
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Your Name and Address _____ Grow Louisville Together PO Box 6346 Louisville, KY 40206 Daytime Phone Number 502-849-9740		Your Occupation and Employer _____ Spouse's Name _____ Spouse's Occupation _____ Spouse's Employer _____		
Name of Candidate/Slate of Candidates/Committee Ben Reno-Weber		Office Sought <input checked="" type="checkbox"/> Supported <input type="checkbox"/> Opposed Louisville Metro Council District 8		
Constitutional Amendment		Election <input type="checkbox"/> Supported <input type="checkbox"/> Opposed		
Date	To Whom Made	Address	Purpose	Amount
05/03/2024	Majority Strategies	PO Box 679219, Dallas, TX 75267	Digital Ads	\$ 5,035.00

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

*Heather Barlow*

05/06/2024

Date

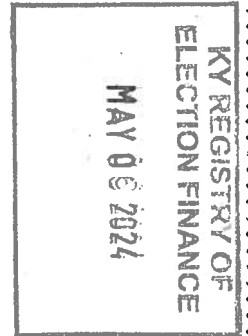
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Name of Candidate/Slate of Candidates/Committee Phillip Baker		Office Sought <input checked="" type="checkbox"/> Supported <input type="checkbox"/> Opposed Louisville Metro Council District 6		
Constitutional Amendment		Election <input type="checkbox"/> Supported <input type="checkbox"/> Opposed		
Date	To Whom Made	Address	Purpose	Amount
05/03/2024	Majority Strategies	PO Box 679219, Dallas, TX 75267	Digital Ads	\$ 5,035.00

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*Heather Barlow*

05/06/2024

Date

Signature



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MAY 17 2024

KY REGISTRY OF  
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Your Name and Address <u>Kentuckians for All of Us</u> <u>201 E. Main Street #900</u> <u>c/o McBrayer Law Firm Lexington, KY 40507</u>		Your Occupation and Employer <u>N/A</u>		
Daytime Phone Number <u>202-552-0221</u>		Spouse's Name <u>N/A</u>		
Name of Candidate/Slate of Candidates/Committee <u>Karen Campbell - Karen Campbell for State Representative</u>		Spouse's Occupation <u>N/A</u>		
Constitutional Amendment		Spouse's Employer <u>N/A</u>		
		Office Sought <u>      </u> Supported House 64 <u>  X  </u> Opposed		
		Election <u>      </u> Supported Primary 2024 <u>      </u> Opposed		
Date	To Whom Made	Address	Purpose	Amount
05/09/2024	Black Mountain Strategy Group	762 Cedar Pointe Dr, Somerset, KY 42501	Direct Mail, Postage and Printing	\$8,050.00

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

5/16/2024  
Date

*Janey Egan*  
Signature



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Daytime Phone Number <u>202-552-0221</u>		Spouse's Name <u>N/A</u>		
Name of Candidate/Slate of Candidates/Committee <u>Kimberly Moser - Kim Moser for State Representative</u>		Spouse's Occupation <u>N/A</u>		
Constitutional Amendment		Spouse's Employer <u>N/A</u>		
		Office Sought <u>X</u> Supported House 64 <u>      </u> Opposed		
		Election <u>      </u> Supported Primary 2024 <u>      </u> Opposed		
Date	To Whom Made	Address	Purpose	Amount
05/09/2024	Black Mountain Strategy Group	762 Cedar Pointe Dr, Somerset, KY 42501	Digital Ad Buy	\$13,500.00
05/09/2024	Black Mountain Strategy Group	762 Cedar Pointe Dr, Somerset, KY 42501	Direct Mail, Postage and Printing	\$8,050.00

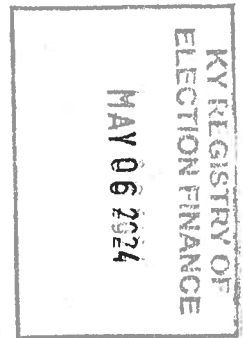
I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

5/16/2024  
Date

*Janey B...*  
Signature



REGISTRY USE



**REPORT OF AN INDEPENDENT EXPENDITURE**

**NOTE: KRS 121.015(12) provides as follows: "Independent expenditure" means the expenditure of money or other things of value for a communication which expressly advocates the election or defeat of a clearly identified candidate or slate of candidates, and which is made without any coordination, consultation, or cooperation with any candidate, slate of candidates, campaign committee, or any authorized person acting on behalf of any of them, and which is not made in concert with, or at the request or suggestion of any candidate, slate of candidates, campaign committee, or any authorized person acting on behalf of any of them."**

An independent expenditure must be reported when it exceeds \$500 in the aggregate in one election. (KRS 121.150(1))

Your Name and Address <b>KENTUCKIANS FOR PATIENT ACCESS CMTE</b> <b>502 MONROE ST NEWPORT, KY 41071</b>		Your Occupation and Employer _____		
Daytime Phone Number <b>615-856-1578</b>		Spouse's Name _____		
Name of Candidate/Slate of Candidates/Committee <b>KILLIAN TIMONEY</b>		Spouse's Occupation _____		
Constitutional Amendment		Spouse's Employer _____		
		Office Sought <u>  X  </u> Supported <b>HOUSE OF REPRESENTATIVES</b> <b>DISTRICT 45</b> _____ Opposed		
		Election _____ Supported <b>PRIMARY 2024</b> _____ Opposed		
Date	To Whom Made	Address	Purpose	Amount
5/2/2024	WINNING ENDEAVORS LLC	PO BOX 160115 NASHVILLE, TN 37216	DIGITAL ADVERTISING	\$2,500.00

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

5/3/2024  
Date

Signature





REGISTRY USE

KY REGISTRY OF  
 ELECTION FINANCE  
 MAY 06 2024

**REPORT OF AN INDEPENDENT EXPENDITURE**

**NOTE: KRS 121.015(12) provides as follows: "Independent expenditure" means the expenditure of money or other things of value for a communication which expressly advocates the election or defeat of a clearly identified candidate or slate of candidates, and which is made without any coordination, consultation, or cooperation with any candidate, slate of candidates, campaign committee, or any authorized person acting on behalf of any of them, and which is not made in concert with, or at the request or suggestion of any candidate, slate of candidates, campaign committee, or any authorized person acting on behalf of any of them."**

An independent expenditure must be reported when it exceeds \$500 in the aggregate in one election. (KRS 121.150(1))

Your Name and Address _____ <b>KENTUCKIANS FOR PATIENT ACCESS CMTE</b> <b>502 MONROE ST NEWPORT, KY 41071</b> _____ Daytime Phone Number <b>615-856-1578</b>		Your Occupation and Employer _____ _____ Spouse's Name _____ Spouse's Occupation _____ Spouse's Employer _____		
Name of Candidate/Slate of Candidates/Committee <b>ANDY STONE</b>		Office Sought _____ <input checked="" type="checkbox"/> Supported <b>HOUSE OF REPRESENTATIVES</b> _____ Opposed <b>DISTRICT 50</b>		
Constitutional Amendment		Election _____ Supported <b>PRIMARY 2024</b> _____ Opposed		
Date	To Whom Made	Address	Purpose	Amount
5/2/2024	WINNING ENDEAVORS LLC	PO BOX 160115 NASHVILLE, TN 37216	DIGITAL ADVERTISING	\$2,500.00

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

5/3/2024  
 Date

  
 Signature

**KENTUCKY REGISTRY OF ELECTION FINANCE**

140 Walnut Street, Frankfort, KY 40601-3240

(502) 573-2226 FAX (502) 573-5622

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REGISTRY USE

KY REGISTRY OF  
 ELECTION FINANCE  
 MAY 06 2024

**REPORT OF AN INDEPENDENT EXPENDITURE**

**NOTE: KRS 121.015(12) provides as follows: "Independent expenditure' means the expenditure of money or other things of value for a communication which expressly advocates the election or defeat of a clearly identified candidate or slate of candidates, and which is made without any coordination, consultation, or cooperation with any candidate, slate of candidates, campaign committee, or any authorized person acting on behalf of any of them, and which is not made in concert with, or at the request or suggestion of any candidate, slate of candidates, campaign committee, or any authorized person acting on behalf of any of them."**

An independent expenditure must be reported when it exceeds \$500 in the aggregate in one election. (KRS 121.150(1))

Your Name and Address _____ <b>KENTUCKIANS FOR PATIENT ACCESS CMTE</b> <b>502 MONROE ST NEWPORT, KY 41071</b> _____ Daytime Phone Number <u>615-856-1578</u>		Your Occupation and Employer _____ _____ Spouse's Name _____ Spouse's Occupation _____ Spouse's Employer _____		
Name of Candidate/Slate of Candidates/Committee <p style="text-align: center;"><b>KIM MOSER</b></p>		Office Sought _____ <input checked="" type="checkbox"/> Supported <b>HOUSE OF REPRESENTATIVES</b> _____ Opposed <p style="text-align: center;"><b>DISTRICT 64</b></p>		
Constitutional Amendment		Election _____ Supported <b>PRIMARY 2024</b> _____ Opposed		
Date	To Whom Made	Address	Purpose	Amount
5/2/2024	WINNING ENDEAVORS LLC	PO BOX 160115 NASHVILLE, TN 37216	DIGITAL ADVERTISING	\$2,500.00

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

5/3/2024

Date

Signature 

REGISTRY USE

KY REGISTRY OF  
 ELECTION FINANCE  
 MAY 06 2024

**REPORT OF AN INDEPENDENT EXPENDITURE**

**NOTE: KRS 121.015(12) provides as follows: "Independent expenditure" means the expenditure of money or other things of value for a communication which expressly advocates the election or defeat of a clearly identified candidate or slate of candidates, and which is made without any coordination, consultation, or cooperation with any candidate, slate of candidates, campaign committee, or any authorized person acting on behalf of any of them, and which is not made in concert with, or at the request or suggestion of any candidate, slate of candidates, campaign committee, or any authorized person acting on behalf of any of them."**

An independent expenditure must be reported when it exceeds \$500 in the aggregate in one election. (KRS 121.150(1))

Your Name and Address _____ <b>KENTUCKIANS FOR PATIENT ACCESS CMTE</b> <b>502 MONROE ST NEWPORT, KY 41071</b>  Daytime Phone Number <b>615-856-1578</b>		Your Occupation and Employer _____  Spouse's Name _____ Spouse's Occupation _____ Spouse's Employer _____		
Name of Candidate/Slate of Candidates/Committee <b>RICHARD HEATH</b>		Office Sought _____ <input checked="" type="checkbox"/> Supported <b>HOUSE OF REPRESENTATIVES</b> _____ Opposed <b>DISTRICT 02</b>		
Constitutional Amendment		Election _____ Supported <b>PRIMARY 2024</b> _____ Opposed		
Date	To Whom Made	Address	Purpose	Amount
5/2/2024	WINNING ENDEAVORS LLC	PO BOX 160115 NASHVILLE, TN 37216	DIGITAL ADVERTISING	\$2,500.00

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

5/3/2024  
 Date

  
 Signature

REGISTRY USE

KY REGISTRY OF  
 ELECTION FINANCE  
 MAY 06 2:27

**REPORT OF AN INDEPENDENT EXPENDITURE**

**NOTE: KRS 121.015(12) provides as follows: "Independent expenditure" means the expenditure of money or other things of value for a communication which expressly advocates the election or defeat of a clearly identified candidate or slate of candidates, and which is made without any coordination, consultation, or cooperation with any candidate, slate of candidates, campaign committee, or any authorized person acting on behalf of any of them, and which is not made in concert with, or at the request or suggestion of any candidate, slate of candidates, campaign committee, or any authorized person acting on behalf of any of them."**

An independent expenditure must be reported when it exceeds \$500 in the aggregate in one election. (KRS 121.150(1))

Your Name and Address _____ <b>KENTUCKIANS FOR PATIENT ACCESS CMTE</b> <b>502 MONROE ST NEWPORT, KY 41071</b>  Daytime Phone Number <b>615-856-1578</b>		Your Occupation and Employer _____  Spouse's Name _____ Spouse's Occupation _____ Spouse's Employer _____		
Name of Candidate/Slate of Candidates/Committee <b>CHRISTOPHER PAVESE</b>		Office Sought _____ <input checked="" type="checkbox"/> Supported <b>HOUSE OF REPRESENTATIVES</b> _____ Opposed <b>DISTRICT 60</b>		
Constitutional Amendment		Election _____ Supported <b>PRIMARY 2024</b> _____ Opposed		
Date	To Whom Made	Address	Purpose	Amount
5/2/2024	WINNING ENDEAVORS LLC	PO BOX 160115 NASHVILLE, TN 37216	DIGITAL ADVERTISING	\$2,500.00

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

5/3/2024  
 \_\_\_\_\_  
 Date

  
 \_\_\_\_\_  
 Signature

KENTUCKY REGISTRY OF ELECTION FINANCE  
 140 Walnut Street, Frankfort, KY 40601-3240  
 (502) 573-2226 FAX (502) 573-5622  
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REGISTRY USE  
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 ELECTION FINANCE  
 MAY 06 2:24

**REPORT OF AN INDEPENDENT EXPENDITURE**

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An independent expenditure must be reported when it exceeds \$500 in the aggregate in one election. (KRS 121.150(1))

Your Name and Address <b>KENTUCKIANS FOR PATIENT ACCESS CMTE</b> <b>502 MONROE ST NEWPORT, KY 41071</b>		Your Occupation and Employer		
Daytime Phone Number <b>615-856-1578</b>		Spouse's Name		
Name of Candidate/Slate of Candidates/Committee <b>STEPHEN MEREDITH</b>		Spouse's Occupation		
Constitutional Amendment		Spouse's Employer		
		Office Sought <input checked="" type="checkbox"/> Supported <b>SENATE DISTRICT 5</b> <input type="checkbox"/> Opposed		
		Election <input type="checkbox"/> Supported <b>PRIMARY 2024</b> <input type="checkbox"/> Opposed		
Date	To Whom Made	Address	Purpose	Amount
5/2/2024	WINNING ENDEAVORS LLC	PO BOX 160115 NASHVILLE, TN 37216	DIGITAL ADVERTISING	\$2,500.00

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

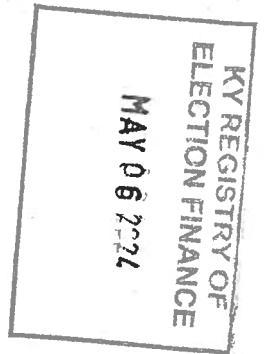
5/3/2024  
Date

  
Signature



**KENTUCKY REGISTRY OF ELECTION FINANCE**  
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REGISTRY USE



**REPORT OF AN INDEPENDENT EXPENDITURE**

**NOTE: KRS 121.015(12) provides as follows: "Independent expenditure" means the expenditure of money or other things of value for a communication which expressly advocates the election or defeat of a clearly identified candidate or slate of candidates, and which is made without any coordination, consultation, or cooperation with any candidate, slate of candidates, campaign committee, or any authorized person acting on behalf of any of them, and which is not made in concert with, or at the request or suggestion of any candidate, slate of candidates, campaign committee, or any authorized person acting on behalf of any of them."**

An independent expenditure must be reported when it exceeds \$500 in the aggregate in one election. (KRS 121.150(1))

Your Name and Address <b>KENTUCKIANS FOR PATIENT ACCESS CMTE</b> <b>502 MONROE ST NEWPORT, KY 41071</b>		Your Occupation and Employer _____		
Daytime Phone Number <b>615-856-1578</b>		Spouse's Name _____		
Name of Candidate/Slate of Candidates/Committee <b>MARK GILKISON</b>		Spouse's Occupation _____		
Constitutional Amendment		Spouse's Employer _____		
		Office Sought <u>  X  </u> Supported <b>HOUSE OF REPRESENTATIVES</b> <b>DISTRICT 47</b> _____ Opposed		
		Election _____ Supported <b>PRIMARY 2024</b> _____ Opposed		
Date	To Whom Made	Address	Purpose	Amount
5/2/2024	WINNING ENDEAVORS LLC	PO BOX 160115 NASHVILLE, TN 37216	DIGITAL ADVERTISING	\$2,500.00

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

5/3/2024  
Date

  
Signature



REGISTRY USE

KY REGISTRY OF  
 ELECTION FINANCE  
 MAY 15 2024

**REPORT OF AN INDEPENDENT EXPENDITURE**

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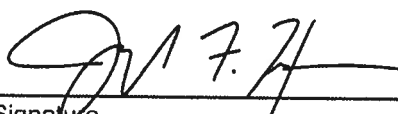
An independent expenditure must be reported when it exceeds \$500 in the aggregate in one election. (KRS 121.150(1))

Your Name and Address _____ Kentucky Chamber Advocacy Committee 464 Chenault Rd. Frankfort KY 40601 _____ Daytime Phone Number _____		Your Occupation and Employer _____ _____ Spouse's Name _____ Spouse's Occupation _____ Spouse's Employer _____		
Name of Candidate/Slate of Candidates/Committee Ed Gallerein		Office Sought _____ <input checked="" type="checkbox"/> Supported State Senator District 7 _____ <input type="checkbox"/> Opposed		
Constitutional Amendment		Election _____ <input checked="" type="checkbox"/> Supported Primary 2024 _____ <input type="checkbox"/> Opposed		
Date	To Whom Made	Address	Purpose	Amount
5/15	Arena Wins	1260 Stringham Ave Suite 350, Salt Lake City UT 84106	Mail	\$3,671

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

May 14th 2024

Date

  
 Signature

REGISTRY USE

KY REGISTRY OF  
 ELECTION FINANCE  
 MAY 16 2024

**REPORT OF AN INDEPENDENT EXPENDITURE**

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An independent expenditure must be reported when it exceeds \$500 in the aggregate in one election. (KRS 121.150(1))

Your Name and Address <u>Make Liberty Win</u> 441 North Lee Street, Suite 100, Alexandria, VA 22314  Daytime Phone Number <u>512-761-8368</u>		Your Occupation and Employer _____  Spouse's Name _____ Spouse's Occupation _____ Spouse's Employer _____		
Name of Candidate/Slate of Candidates/Committee  <u>Michael Meredith</u>		Office Sought _____ Supported <u>X</u> _____ Opposed (HD-19)		
Constitutional Amendment  <u>Constitutional Amendment</u>		Election _____ Supported _____ Opposed Primary		
Date	To Whom Made	Address	Purpose	Amount
5/14/2024	WAB Holdings LLC	18079 Brick Mill Run Strongsville, OH 44136	P2P Texting	\$153.83
5/15/2024	WAB Holdings LLC	18079 Brick Mill Run Strongsville, OH 44136	P2P Texting	\$104.16

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

16/05/2024  
 \_\_\_\_\_  
 Date

*Elizabeth Curds*  
 Elizabeth Curds (May 16, 2024 11:56 EDT)  
 \_\_\_\_\_  
 Signature





**KENTUCKY REGISTRY OF ELECTION FINANCE**  
 140 Walnut Street, Frankfort, KY 40601-3240  
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REGISTRY USE

KY REGISTRY OF  
 ELECTION FINANCE  
 MAY 16 2024

**REPORT OF AN INDEPENDENT EXPENDITURE**

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An independent expenditure must be reported when it exceeds \$500 in the aggregate in one election. (KRS 121.150(1))

Your Name and Address <u>Make Liberty Win</u> <u>441 North Lee Street, Suite 100, Alexandria, VA 22314</u>  Daytime Phone Number <u>512-761-8368</u>		Your Occupation and Employer _____  Spouse's Name _____ Spouse's Occupation _____ Spouse's Employer _____		
Name of Candidate/Slate of Candidates/Committee <u>Kelcey Rock</u>		Office Sought <u>X</u> Supported _____ Opposed <u>(HD-19)</u>		
Constitutional Amendment <u>Constitutional Amendment</u>		Election _____ Supported _____ Opposed <u>Primary</u>		
Date	To Whom Made	Address	Purpose	Amount
5/15/2024	WAB Holdings LLC	18079 Brick Mill Run Strongsville, OH 44136	Phone Calls	\$978.00
5/15/2024	WAB Holdings LLC	18079 Brick Mill Run Strongsville, OH 44136	Phone Calls	\$816.00

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

16/05/2024  
 \_\_\_\_\_  
 Date

*Elizabeth C. Curl*  
 \_\_\_\_\_  
 Signature



REGISTRY USE

KY REGISTRY OF  
 ELECTION FINANCE  
 MAY 16 2024

**REPORT OF AN INDEPENDENT EXPENDITURE**

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An independent expenditure must be reported when it exceeds \$500 in the aggregate in one election. (KRS 121.150(1))

Your Name and Address <u>Make Liberty Win</u> 441 North Lee Street, Suite 100, Alexandria, VA 22314		Your Occupation and Employer _____		
Daytime Phone Number <u>512-761-8368</u>		Spouse's Name _____		
		Spouse's Occupation _____		
		Spouse's Employer _____		
Name of Candidate/Slate of Candidates/Committee <u>Killian Timoney</u>		Office Sought <u>(HD-45)</u>	<input type="checkbox"/> Supported	<input checked="" type="checkbox"/> Opposed
Constitutional Amendment		Election <u>Primary</u>	<input type="checkbox"/> Supported	<input type="checkbox"/> Opposed
Date	To Whom Made	Address	Purpose	Amount
5/14/2024	WAB Holdings LLC	18079 Brick Mill Run Strongsville, OH 44136	P2P Texting	\$111.09
5/15/2024	WAB Holdings LLC	18079 Brick Mill Run Strongsville, OH 44136	P2P Texting	\$194.99
5/15/2024	WAB Holdings LLC	18079 Brick Mill Run Strongsville, OH 44136	Phone Calls	\$684.60
5/15/2024	WAB Holdings LLC	18079 Brick Mill Run Strongsville, OH 44136	Phone Calls	\$711.00

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

16/05/2024  
 \_\_\_\_\_  
 Date

Elizabeth Curris  
Elizabeth Curris (May 16, 2024 12:58 EDT)  
 \_\_\_\_\_  
 Signature



**KENTUCKY REGISTRY OF ELECTION FINANCE**  
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**REPORT OF AN INDEPENDENT EXPENDITURE**

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An independent expenditure must be reported when it exceeds \$500 in the aggregate in one election. (KRS 121.150(1))

Your Name and Address <u>Make Liberty Win</u> 441 North Lee Street, Suite 100, Alexandria, VA 22314		Your Occupation and Employer _____		
Daytime Phone Number <u>512-761-8368</u>		Spouse's Name _____		
Name of Candidate/Slate of Candidates/Committee <u>Kelcey Rock</u>		Spouse's Occupation _____		
Constitutional Amendment		Spouse's Employer _____		
		Office Sought <u>X</u> Supported _____ Opposed		
		(HD-19)		
		Election _____ Supported _____ Opposed		
		Primary _____		
Date	To Whom Made	Address	Purpose	Amount
5/9/2024	WAB Holdings LLC	18079 Brick Mill Run Strongsville, OH 44136	Phone Calls	\$984.00
5/10/2024	WAB Holdings LLC	18079 Brick Mill Run Strongsville, OH 44136	Phone Calls	\$984.00

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

5/11/2024  
 \_\_\_\_\_  
 Date

Elizabeth Curtis  
 \_\_\_\_\_  
 Signature





**REPORT OF AN INDEPENDENT EXPENDITURE**

**NOTE: KRS 121.015(12) provides as follows: "Independent expenditure' means the expenditure of money or other things of value for a communication which expressly advocates the election or defeat of a clearly identified candidate or slate of candidates, and which is made without any coordination, consultation, or cooperation with any candidate, slate of candidates, campaign committee, or any authorized person acting on behalf of any of them, and which is not made in concert with, or at the request or suggestion of any candidate, slate of candidates, campaign committee, or any authorized person acting on behalf of any of them."**

An independent expenditure must be reported when it exceeds \$500 in the aggregate in one election. (KRS 121.150(1))

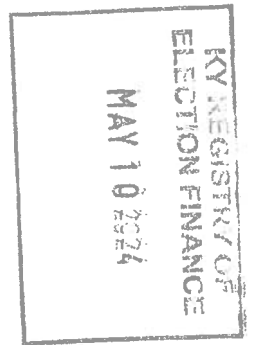
Your Name and Address <u>Make Liberty Win</u> 441 North Lee Street, Suite 100, Alexandria, VA 22314		Your Occupation and Employer _____		
Daytime Phone Number <u>512-761-8368</u>		Spouse's Name _____		
Name of Candidate/Slate of Candidates/Committee <u>Killian Timoney</u>		Spouse's Occupation _____		
Constitutional Amendment		Spouse's Employer _____		
		Office Sought	_____ Supported	
		(HD-45)	<u>x</u> _____ Opposed	
		Election	_____ Supported	
		Primary	_____ Opposed	
Date	To Whom Made	Address	Purpose	Amount
5/9/2024	WAB Holdings LLC	18079 Brick Mill Run Strongsville, OH 44136	Phone Calls	\$684.60
5/10/2024	WAB Holdings LLC	18079 Brick Mill Run Strongsville, OH 44136	Phone Calls	\$684.60

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

5/11/2024  
 \_\_\_\_\_  
 Date

*Elizabeth Curtis*  
 \_\_\_\_\_  
 Signature





**REPORT OF AN INDEPENDENT EXPENDITURE**

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An independent expenditure must be reported when it exceeds \$500 in the aggregate in one election. (KRS 121.150(1))

Your Name and Address <u>Make Liberty Win</u> 441 North Lee Street, Suite 100, Alexandria, VA 22314		Your Occupation and Employer _____		
Daytime Phone Number <u>512-761-8368</u>		Spouse's Name _____		
Name of Candidate/Slate of Candidates/Committee <u>Kelcey Rock</u>		Spouse's Occupation _____		
Constitutional Amendment		Spouse's Employer _____		
		Office Sought <u>X</u> Supported _____ Opposed		
		Election _____ Supported _____ Opposed		
		Primary _____		
Date	To Whom Made	Address	Purpose	Amount
5/8/2024	WAB Holdings LLC	18079 Brick Mill Run Strongsville, OH 44136	Phone Calls	\$984.00

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

5/9/2024  
 \_\_\_\_\_  
 Date

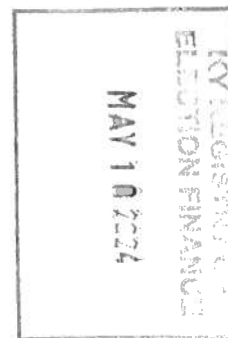
Elizabeth Curtis  
 \_\_\_\_\_  
 Signature



**KENTUCKY REGISTRY OF ELECTION FINANCE**

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REGISTRY USE



**REPORT OF AN INDEPENDENT EXPENDITURE**

**NOTE: KRS 121.015(12) provides as follows: "Independent expenditure" means the expenditure of money or other things of value for a communication which expressly advocates the election or defeat of a clearly identified candidate or slate of candidates, and which is made without any coordination, consultation, or cooperation with any candidate, slate of candidates, campaign committee, or any authorized person acting on behalf of any of them, and which is not made in concert with, or at the request or suggestion of any candidate, slate of candidates, campaign committee, or any authorized person acting on behalf of any of them."**

An independent expenditure must be reported when it exceeds \$500 in the aggregate in one election. (KRS 121.150(1))

Your Name and Address <u>Make Liberty Win</u> 441 North Lee Street, Suite 100, Alexandria, VA 22314		Your Occupation and Employer _____		
Daytime Phone Number <u>512-761-8368</u>		Spouse's Name _____		
		Spouse's Occupation _____		
		Spouse's Employer _____		
Name of Candidate/Slate of Candidates/Committee <u>Michael Meredith</u>		Office Sought _____ Supported <u>x</u> _____ Opposed (HD-19)		
Constitutional Amendment		Election _____ Supported Primary _____ Opposed		
Date	To Whom Made	Address	Purpose	Amount
5/7/2024	WAB Holdings LLC	18079 Brick Mill Run Strongsville, OH 44136	P2P Texting	\$175.35
5/8/2024	WAB Holdings LLC	18079 Brick Mill Run Strongsville, OH 44136	P2P Texting	\$162.96

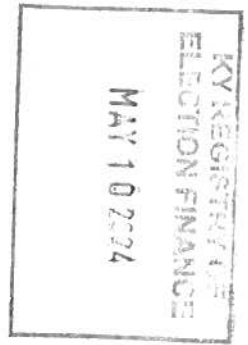
I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

5/9/2024  
 Date \_\_\_\_\_

Elizabeth Curtis  
 Signature \_\_\_\_\_



REGISTRY USE



**REPORT OF AN INDEPENDENT EXPENDITURE**

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Your Name and Address <u>Make Liberty Win</u> 441 North Lee Street, Suite 100, Alexandria, VA 22314		Your Occupation and Employer _____		
Daytime Phone Number <u>512-761-8368</u>		Spouse's Name _____		
		Spouse's Occupation _____		
		Spouse's Employer _____		
Name of Candidate/Slate of Candidates/Committee <u>Killian Timoney</u>		Office Sought _____ Supported <u>X</u> _____ Opposed (HD-45)		
Constitutional Amendment		Election _____ Supported Primary _____ Opposed		
Date	To Whom Made	Address	Purpose	Amount
5/7/2024	WAB Holdings LLC	18079 Brick Mill Run Strongsville, OH 44136	P2P Texting	\$126.63
5/8/2024	WAB Holdings LLC	18079 Brick Mill Run Strongsville, OH 44136	Phone Calls	\$684.60
5/8/2024	WAB Holdings LLC	18079 Brick Mill Run Strongsville, OH 44136	P2P Texting	\$117.60

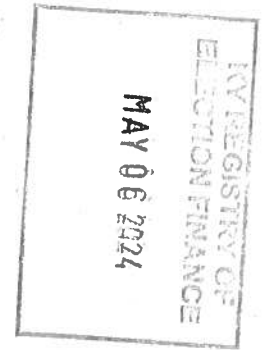
I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

5/9/2024  
 Date \_\_\_\_\_

Elizabeth Curtis  
 Signature \_\_\_\_\_



REGISTRY USE



**REPORT OF AN INDEPENDENT EXPENDITURE**

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Your Name and Address <u>Make Liberty Win</u> <u>441 North Lee Street, Suite 100, Alexandria, VA 22314</u>		Your Occupation and Employer _____		
Daytime Phone Number <u>512-761-8368</u>		Spouse's Name _____		
Name of Candidate/Slate of Candidates/Committee <u>Michael Meredith</u>		Spouse's Occupation _____		
Constitutional Amendment <u>Constitutional Amendment</u>		Spouse's Employer _____		
		Office Sought _____ Supported <u>X</u> _____ Opposed <u>(HD-19)</u>		
		Election _____ Supported Primary _____ Opposed		
Date	To Whom Made	Address	Purpose	Amount
5/2/2024	Propellant Media	976 Brady Ave NW, Suite 100 Atlanta, GA 30318	Digital Ads & Production	\$4,302.25
5/3/2024	WAB Holdings LLC	18079 Brick Mill Run Strongsville, OH 44136	P2P Texting	\$196.25

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

5/4/2024

Date \_\_\_\_\_

Elizabeth Curtis  
Signature



**KENTUCKY REGISTRY OF ELECTION FINANCE**

140 Walnut Street, Frankfort, KY 40601-3240  
 (502) 573-2226 FAX (502) 573-5622  
 www.krof.ky.gov

REGISTRY USE

KY REGISTRY OF  
 ELECTION FINANCE  
 MAY 06 2024

**REPORT OF AN INDEPENDENT EXPENDITURE**

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Your Name and Address <u>Make Liberty Win</u> 441 North Lee Street, Suite 100, Alexandria, VA 22314		Your Occupation and Employer _____		
Daytime Phone Number <u>512-761-8368</u>		Spouse's Name _____ Spouse's Occupation _____ Spouse's Employer _____		
Name of Candidate/Slate of Candidates/Committee Killian Timoney		Office Sought _____ Supported X _____ Opposed (HD-45)		
Constitutional Amendment		Election _____ Supported _____ Opposed Primary		
Date	To Whom Made	Address	Purpose	Amount
5/2/2024	Propellant Media	976 Brady Ave NW, Suite 100 Atlanta, GA 30318	Digital Ads & Production	\$4,302.25
5/3/2024	WAB Holdings LLC	18079 Brick Mill Run Strongsville, OH 44136	P2P Texting	\$142.49

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

5/4/2024  
 \_\_\_\_\_  
 Date

*Elizabeth Curtis*  
 \_\_\_\_\_  
 Signature



REGISTRY USE

KY REGISTRY OF  
 ELECTION FINANCE

APR 29 2024

**REPORT OF AN INDEPENDENT EXPENDITURE**

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An independent expenditure must be reported when it exceeds \$500 in the aggregate in one election. (KRS 121.150(1))

Your Name and Address <u>Make Liberty Win</u>		Your Occupation and Employer _____		
<u>441 North Lee Street, Suite 100, Alexandria, VA 22314</u>		Spouse's Name _____		
Daytime Phone Number <u>512-761-8368</u>		Spouse's Occupation _____		
Name of Candidate/Slate of Candidates/Committee		Office Sought <input checked="" type="checkbox"/> Supported _____ Opposed		
<u>Karen Campbell</u>		HD-64		
Constitutional Amendment		Election _____ Supported _____ Opposed		
Primary		_____ Opposed		
Date	To Whom Made	Address	Purpose	Amount
<u>4/23/2024</u>	<u>PAC Management Services LLC</u>	<u>441 North Lee Street, Suite 100 Alexandria, VA 22314</u>	<u>Field Distribution of Literature</u>	<u>\$5,406.93</u>

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

4/25/2024  
 Date

Elizabeth Curtis  
 Signature



REGISTRY USE

KY REGISTRY OF  
 ELECTION FINANCE  
 APR 29 2024

**REPORT OF AN INDEPENDENT EXPENDITURE**

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Your Name and Address <u>Make Liberty Win</u> <u>441 North Lee Street, Suite 100, Alexandria, VA 22314</u> Daytime Phone Number <u>512-761-8368</u>		Your Occupation and Employer _____ Spouse's Name _____ Spouse's Occupation _____ Spouse's Employer _____		
Name of Candidate/Slate of Candidates/Committee <u>Savannah Maddox</u>		Office Sought <span style="float: right;"><input checked="" type="checkbox"/> Supported</span> <span style="float: right;"><input type="checkbox"/> Opposed</span> <u>HD-61</u>		
Constitutional Amendment <u>Constitutional Amendment</u>		Election <span style="float: right;"><input type="checkbox"/> Supported</span> <span style="float: right;"><input type="checkbox"/> Opposed</span> <u>Primary</u>		
Date	To Whom Made	Address	Purpose	Amount
4/23/2024	PAC Management Services LLC	441 North Lee Street, Suite 100 Alexandria, VA 22314	Field Distribution of Literature	\$14,759.28

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

4/25/2024  
 Date

Elizabeth Curtis  
 Signature



APR 29 2024

**REPORT OF AN INDEPENDENT EXPENDITURE**

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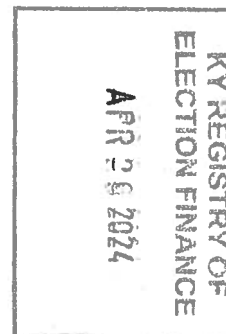
Your Name and Address <u>Make Liberty Win</u>		Your Occupation and Employer _____		
<u>441 North Lee Street, Suite 100, Alexandria, VA 22314</u>		Spouse's Name _____		
Daytime Phone Number <u>512-761-8368</u>		Spouse's Occupation _____		
Name of Candidate/Slate of Candidates/Committee		Office Sought <input checked="" type="checkbox"/> Supported <input type="checkbox"/> Opposed		
<u>Candy Massaroni</u>		HD-50		
Constitutional Amendment		Election <input type="checkbox"/> Supported <input type="checkbox"/> Opposed		
Primary		<input type="checkbox"/> Opposed		
Date	To Whom Made	Address	Purpose	Amount
<u>4/23/2024</u>	<u>PAC Management Services LLC</u>	<u>441 North Lee Street, Suite 100 Alexandria, VA 22314</u>	<u>Field Distribution of Literature</u>	<u>\$35,909.40</u>

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

4/25/2024  
 Date

Elizabeth Curtis  
 Signature





REPORT OF AN INDEPENDENT EXPENDITURE

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Your Name and Address <u>Make Liberty Win</u>		Your Occupation and Employer _____		
<u>441 North Lee Street, Suite 100, Alexandria, VA 22314</u>		Spouse's Name _____		
Daytime Phone Number <u>512-761-8368</u>		Spouse's Occupation _____		
Name of Candidate/Slate of Candidates/Committee		Office Sought _____ Supported		
<u>Michael Meredith</u>		<u>HD-19</u> <input checked="" type="checkbox"/> Opposed		
Constitutional Amendment		Election _____ Supported		
		Primary _____ Opposed		
Date	To Whom Made	Address	Purpose	Amount
<u>4/23/2024</u>	<u>PAC Management Services LLC</u>	<u>441 North Lee Street, Suite 100 Alexandria, VA 22314</u>	<u>Direct Mail</u>	<u>\$7,330.80</u>

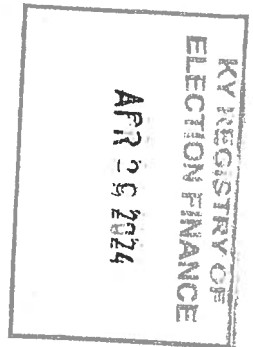
I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

4/25/2024  
Date

Elizabeth Curtis  
Signature



REGISTRY USE



REPORT OF AN INDEPENDENT EXPENDITURE

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Your Name and Address <u>Make Liberty Win</u>		Your Occupation and Employer _____		
<u>441 North Lee Street, Suite 100, Alexandria, VA 22314</u>		Spouse's Name _____		
Daytime Phone Number <u>512-761-8368</u>		Spouse's Occupation _____		
Name of Candidate/Slate of Candidates/Committee		Office Sought _____ Supported _____		
<u>Kimberly Moser</u>		<u>HD-64</u> <input checked="" type="checkbox"/> Opposed		
Constitutional Amendment		Election _____ Supported _____		
		<u>Primary</u> _____ Opposed		
Date	To Whom Made	Address	Purpose	Amount
<u>4/23/2024</u>	<u>PAC Management Services LLC</u>	<u>441 North Lee Street, Suite 100 Alexandria, VA 22314</u>	<u>Field Distribution of Literature</u>	<u>\$5,406.93</u>

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

4/25/2024  
Date

Elizabeth Curtis  
Signature



REGISTRY USE

KY REGISTRY OF  
 ELECTION FINANCE  
 APR 29 2024

**REPORT OF AN INDEPENDENT EXPENDITURE**

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Your Name and Address <u>Make Liberty Win</u> <u>441 North Lee Street, Suite 100, Alexandria, VA 22314</u> _____ _____ Daytime Phone Number <u>512-761-8368</u>		Your Occupation and Employer _____ _____ Spouse's Name _____ Spouse's Occupation _____ Spouse's Employer _____		
Name of Candidate/Slate of Candidates/Committee <u>Marianne Proctor</u>		Office Sought <span style="float: right;"><input checked="" type="checkbox"/> Supported</span> <span style="float: right;"><input type="checkbox"/> Opposed</span> <u>HD-60</u>		
Constitutional Amendment <u>Constitutional Amendment</u>		Election <span style="float: right;"><input type="checkbox"/> Supported</span> <span style="float: right;"><input type="checkbox"/> Opposed</span> <u>Primary</u>		
Date	To Whom Made	Address	Purpose	Amount
4/23/2024	PAC Management Services LLC	441 North Lee Street, Suite 100 Alexandria, VA 22314	Field Distribution of Literature	\$98.69

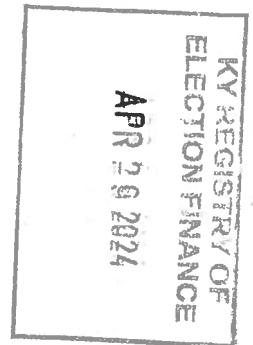
I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

4/25/2024  
 Date

Elizabeth Curtis  
 Signature



REGISTRY USE



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Your Name and Address <u>Make Liberty Win</u>		Your Occupation and Employer _____		
<u>441 North Lee Street, Suite 100, Alexandria, VA 22314</u>		Spouse's Name _____		
Daytime Phone Number <u>512-761-8368</u>		Spouse's Occupation _____		
Name of Candidate/Slate of Candidates/Committee		Spouse's Employer _____		
<u>Felicia Rabourn</u>		Office Sought	<input checked="" type="checkbox"/>	Supported
Constitutional Amendment		<u>HD-47</u>	_____	Opposed
		Election	_____	Supported
		<u>Primary</u>	_____	Opposed

Date	To Whom Made	Address	Purpose	Amount
<u>4/23/2024</u>	<u>PAC Management Services LLC</u>	<u>441 North Lee Street, Suite 100 Alexandria, VA 22314</u>	<u>Field Distribution of Literature</u>	<u>\$18,865.80</u>

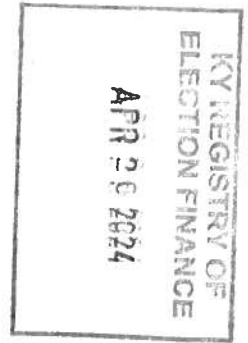
I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

4/25/2024  
Date

Elizabeth Curtis  
Signature







**REPORT OF AN INDEPENDENT EXPENDITURE**

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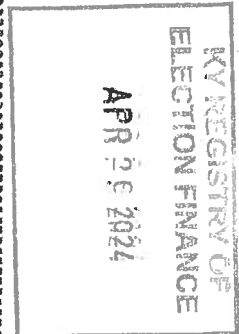
Your Name and Address <u>Make Liberty Win</u>		Your Occupation and Employer _____		
<u>441 North Lee Street, Suite 100, Alexandria, VA 22314</u>		Spouse's Name _____		
Daytime Phone Number <u>512-761-8368</u>		Spouse's Occupation _____		
Name of Candidate/Slate of Candidates/Committee		Spouse's Employer _____		
<u>Steve Rawlings</u>		Office Sought	<input checked="" type="checkbox"/>	Supported
Constitutional Amendment		<u>SD-11</u>	<input type="checkbox"/>	Opposed
		Election	<input type="checkbox"/>	Supported
		<u>Primary</u>	<input type="checkbox"/>	Opposed
Date	To Whom Made	Address	Purpose	Amount
<u>4/23/2024</u>	<u>PAC Management Services LLC</u>	<u>441 North Lee Street, Suite 100 Alexandria, VA 22314</u>	<u>Field Distribution of Literature</u>	<u>\$39,317.36</u>

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

4/25/2024  
Date

Elizabeth Curtis  
Signature





REPORT OF AN INDEPENDENT EXPENDITURE

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Your Name and Address <u>Make Liberty Win</u>		Your Occupation and Employer _____		
<u>441 North Lee Street, Suite 100, Alexandria, VA 22314</u>		Spouse's Name _____		
Daytime Phone Number <u>512-761-8368</u>		Spouse's Occupation _____		
Name of Candidate/Slate of Candidates/Committee		Office Sought <input checked="" type="checkbox"/> Supported		
<u>Adrienne Southworth</u>		<input type="checkbox"/> Opposed		
Constitutional Amendment		SD-7		
		Election <input type="checkbox"/> Supported		
		<input type="checkbox"/> Opposed		
		Primary		
Date	To Whom Made	Address	Purpose	Amount
4/23/2024	PAC Management Services LLC	441 North Lee Street, Suite 100 Alexandria, VA 22314	Field Distribution of Literature	\$55,131.83

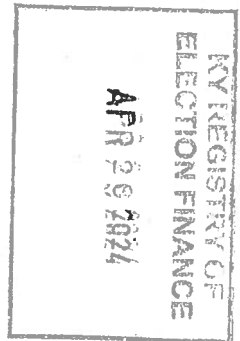
I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

4/25/2024

Date

Elizabeth Curtis  
Signature

REGISTRY USE



REPORT OF AN INDEPENDENT EXPENDITURE

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Your Name and Address <u>Make Liberty Win</u>		Your Occupation and Employer _____		
<u>441 North Lee Street, Suite 100, Alexandria, VA 22314</u>		Spouse's Name _____		
Daytime Phone Number <u>512-761-8368</u>		Spouse's Occupation _____		
Name of Candidate/Slate of Candidates/Committee		Office Sought	<input type="checkbox"/> Supported	
<u>Killian Timoney</u>		<u>HD-45</u>	<input checked="" type="checkbox"/> Opposed	
Constitutional Amendment		Election	<input type="checkbox"/> Supported	
		<u>Primary</u>	<input type="checkbox"/> Opposed	
Date	To Whom Made	Address	Purpose	Amount
<u>4/23/2024</u>	<u>PAC Management Services LLC</u>	<u>441 North Lee Street, Suite 100 Alexandria, VA 22314</u>	<u>Direct Mail</u>	<u>\$10,593.99</u>

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

4/25/2024  
Date

Elizabeth Curtis  
Signature



**KENTUCKY REGISTRY OF ELECTION FINANCE**  
 140 Walnut Street, Frankfort, KY 40601-3240  
 (502) 573-2226 FAX (502) 573-5622  
 www.kref.ky.gov

**\*\*Amended Report\*\***  
 Original Report Filed 4/5/2024

**AMENDMENT**

REGISTRY USE

KY REGISTRY OF  
 ELECTION FINANCE  
 APR 29 2024

**REPORT OF AN INDEPENDENT EXPENDITURE**

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Your Name and Address <u>Make Liberty Win</u>		Your Occupation and Employer _____		
<u>441 North Lee Street, Suite 100, Alexandria, VA 22314</u>		Spouse's Name _____		
Daytime Phone Number <u>512-761-8368</u>		Spouse's Occupation _____		
Name of Candidate/Slate of Candidates/Committee		Spouse's Employer _____		
<u>Steven Doan</u>		Office Sought <u>X</u> Supported		
Constitutional Amendment		<u>HD-69</u> Opposed		
		Election _____ Supported		
		Primary _____ Opposed		
Date	To Whom Made	Address	Purpose	Amount
<u>4/3/2024</u>	<u>PAC Management Services LLC</u>	<u>441 North Lee Street, Suite 100 Alexandria, VA 22314</u>	<u>Field Distribution of Literature</u>	<u>\$18,036.65</u>

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

4/25/2024

Date

Elizabeth Curtis  
 Signature



REGISTRY USE



**REPORT OF AN INDEPENDENT EXPENDITURE**

**NOTE: KRS 121.015(12) provides as follows: "Independent expenditure" means the expenditure of money or other things of value for a communication which expressly advocates the election or defeat of a clearly identified candidate or slate of candidates, and which is made without any coordination, consultation, or cooperation with any candidate, slate of candidates, campaign committee, or any authorized person acting on behalf of any of them, and which is not made in concert with, or at the request or suggestion of any candidate, slate of candidates, campaign committee, or any authorized person acting on behalf of any of them."**

An independent expenditure must be reported when it exceeds \$500 in the aggregate in one election. (KRS 121.150(1))

Your Name and Address <b>MAKING A SENSIBLE SHIFT IN ELECTIONS</b> <b>PO BOX 821 NEWPORT, KY 41072</b>		Your Occupation and Employer _____		
Daytime Phone Number _____		Spouse's Name _____		
Name of Candidate/Slate of Candidates/Committee <b>T. J. ROBERTS</b>		Spouse's Occupation _____		
Constitutional Amendment		Spouse's Employer _____		
		Office Sought <input checked="" type="checkbox"/> Supported KY HOUSE OF REPRESENTATIVES DISTRICT 66 <input type="checkbox"/> Opposed		
		Election <input type="checkbox"/> Supported <b>PRIMARY 2024</b> <input type="checkbox"/> Opposed		
Date	To Whom Made	Address	Purpose	Amount
5/10/2024	COLDSPARK	THREE PPG PLACE STE 500 PITTSBURGH, PA 15222	PRINTING/POSTAGE	\$4,314.93

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

5/11/2024

Date

Signature

REGISTRY USE

**REPORT OF AN INDEPENDENT EXPENDITURE**

**NOTE: KRS 121.015(12) provides as follows: "Independent expenditure" means the expenditure of money or other things of value for a communication which expressly advocates the election or defeat of a clearly identified candidate or slate of candidates, and which is made without any coordination, consultation, or cooperation with any candidate, slate of candidates, campaign committee, or any authorized person acting on behalf of any of them, and which is not made in concert with, or at the request or suggestion of any candidate, slate of candidates, campaign committee, or any authorized person acting on behalf of any of them."**

An independent expenditure must be reported when it exceeds \$500 in the aggregate in one election. (KRS 121.150(1))

Your Name and Address _____ <b>MAKING A SENSIBLE SHIFT IN ELECTIONS</b> <b>PO BOX 821 NEWPORT, KY 41072</b>		Your Occupation and Employer _____		
Daytime Phone Number _____		Spouse's Name _____		
		Spouse's Occupation _____		
		Spouse's Employer _____		
Name of Candidate/Slate of Candidates/Committee <b>FELICIA RABOURN</b>		Office Sought <input checked="" type="checkbox"/> Supported <b>KY HOUSE OF REPRESENTATIVES</b> <b>DISTRICT 47</b> <input type="checkbox"/> Opposed		
Constitutional Amendment		Election <input type="checkbox"/> Supported <b>PRIMARY 2024</b> <input type="checkbox"/> Opposed		
Date	To Whom Made	Address	Purpose	Amount
5/10/2024	COLDSPARK	THREE PPG PLACE STE 500 PITTSBURGH, PA 15222	PRINTING/POSTAGE	\$4,715.15

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

5/11/2024

Date

Signature

REGISTRY USE

KY REGISTRY OF  
 ELECTION FINANCE  
 APR 22 2024

## REPORT OF AN INDEPENDENT EXPENDITURE

**NOTE: KRS 121.015(12) provides as follows: "Independent expenditure" means the expenditure of money or other things of value for a communication which expressly advocates the election or defeat of a clearly identified candidate or slate of candidates, and which is made without any coordination, consultation, or cooperation with any candidate, slate of candidates, campaign committee, or any authorized person acting on behalf of any of them, and which is not made in concert with, or at the request or suggestion of any candidate, slate of candidates, campaign committee, or any authorized person acting on behalf of any of them."**

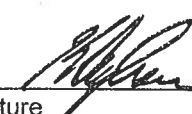
An independent expenditure must be reported when it exceeds \$500  
 in the aggregate in one election. (KRS 121.150(1))

Your Name and Address _____ <b>MAKING A SENSIBLE SHIFT IN ELECTIONS</b> <b>PO BOX 821 NEWPORT, KY 41072</b> _____ Daytime Phone Number <b>(859) 619-1512</b>		Your Occupation and Employer _____ _____ Spouse's Name _____ Spouse's Occupation _____ Spouse's Employer _____		
Name of Candidate/Slate of Candidates/Committee <b>T. J. ROBERTS</b>		Office Sought <span style="float: right;"><input checked="" type="checkbox"/> Supported</span> <b>KY HOUSE OF REPRESENTATIVES</b> <span style="float: right;"><input type="checkbox"/> Opposed</span> <b>DISTRICT 66</b>		
Constitutional Amendment		Election <span style="float: right;"><input type="checkbox"/> Supported</span> <b>PRIMARY 2024</b> <span style="float: right;"><input type="checkbox"/> Opposed</span>		
Date	To Whom Made	Address	Purpose	Amount
4/22/2024	COLDSPARK	THREE PPG PLACE STE 500 PITTSBURGH, PA 15222	PRINTING/POSTAGE	\$3,246.04

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

4/22/2024

Date

  
 Signature

**KENTUCKY REGISTRY OF ELECTION FINANCE**  
 140 Walnut Street, Frankfort, KY 40601-3240  
 (502) 573-2226 FAX (502) 573-5622  
 www.kref.ky.gov

REGISTRY USE

KY REGISTRY OF  
 ELECTION FINANCE  
 APR 25 2024

**REPORT OF AN INDEPENDENT EXPENDITURE**

**NOTE: KRS 121.015(12) provides as follows: "Independent expenditure" means the expenditure of money or other things of value for a communication which expressly advocates the election or defeat of a clearly identified candidate or slate of candidates, and which is made without any coordination, consultation, or cooperation with any candidate, slate of candidates, campaign committee, or any authorized person acting on behalf of any of them, and which is not made in concert with, or at the request or suggestion of any candidate, slate of candidates, campaign committee, or any authorized person acting on behalf of any of them."**

An independent expenditure must be reported when it exceeds \$500 in the aggregate in one election. (KRS 121.150(1))

Your Name and Address _____ NATIONAL ASSOCIATION OF REALTORS FUND 430 N. MICHIGAN AVE CHICAGO, IL 60611 Daytime Phone Number <u>(312)-329-8200</u>		Your Occupation and Employer _____ _____ Spouse's Name _____ Spouse's Occupation _____ Spouse's Employer _____		
Name of Candidate/Slate of Candidates/Committee JASON HOWELL		Office Sought <span style="float: right;"><input checked="" type="checkbox"/> Supported</span> <span style="float: right;"><input type="checkbox"/> Opposed</span> MURRAY, STATE SENATOR, DISTRICT 1		
Constitutional Amendment		Election <span style="float: right;"><input type="checkbox"/> Supported</span> <span style="float: right;"><input type="checkbox"/> Opposed</span>		
Date	To Whom Made	Address	Purpose	Amount
4/23/2024	ACCESS MARKETING SERVICES	PO BOX 913026, DENVER, CO 80291	ONLINE ADS	\$15,358.00
5/03/2024	ACCESS MARKETING SERVICES	PO BOX 913026, DENVER, CO 80291	DIRECT MAIL	\$8,016.96

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

4/23/2024

Date

DocuSigned by:

*John Pierpoint*

3CAC5008C266473...

Signature



**KENTUCKY REGISTRY OF ELECTION FINANCE**  
 140 Walnut Street, Frankfort, KY 40601-3240  
 (502) 573-2226 FAX (502) 573-5622  
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REGISTRY USE

KY REGISTRY OF  
 ELECTION FINANCE  
 APR 23 2024

**REPORT OF AN INDEPENDENT EXPENDITURE**

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An independent expenditure must be reported when it exceeds \$500 in the aggregate in one election. (KRS 121.150(1))

Your Name and Address _____ NATIONAL ASSOCIATION OF REALTORS FUND 430 N. MICHIGAN AVE CHICAGO, IL 60611 Daytime Phone Number <u>(312)-329-8200</u>		Your Occupation and Employer _____ _____ Spouse's Name _____ Spouse's Occupation _____ Spouse's Employer _____		
Name of Candidate/Slate of Candidates/Committee MICHAEL MEREDITH		Office Sought <span style="float: right;"><input checked="" type="checkbox"/> Supported <input type="checkbox"/> Opposed</span> OAKLAND, STATE REPRESENTATIVE, HOUSE DISTRICT 19		
Constitutional Amendment		Election <span style="float: right;"><input type="checkbox"/> Supported <input type="checkbox"/> Opposed</span>		
Date	To Whom Made	Address	Purpose	Amount
4/23/2024	ACCESS MARKETING SERVICES	PO BOX 913026, DENVER, CO 80291	ONLINE ADS	\$5,235.00
5/03/2024	ACCESS MARKETING SERVICES	PO BOX 913026, DENVER, CO 80291	DIRECT MAIL	\$2,487.36

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

4/23/2024  
 \_\_\_\_\_  
 Date

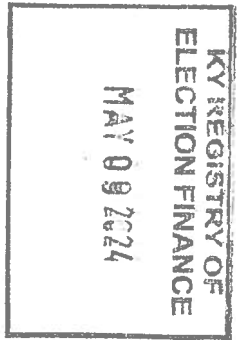
DocuSigned by:  
*John Pierpoint*  
 \_\_\_\_\_  
 Signature



**KENTUCKY REGISTRY OF ELECTION FINANCE**

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REGISTRY USE



**REPORT OF AN INDEPENDENT EXPENDITURE**

**NOTE: KRS 121.015(12) provides as follows: Independent expenditure means the expenditure of money or other things of value for a communication which expressly advocates the election or defeat of a clearly identified candidate or slate of candidates, and which is made without any coordination, consultation, or cooperation with any candidate, slate of candidates, campaign committee, or any authorized person acting on behalf of any of them, and which is not made in concert with, or at the request or suggestion of any candidate, slate of candidates, campaign committee, or any authorized person acting on behalf of any of them.**

An independent expenditure must be reported when it exceeds \$500 in the aggregate in one election. (KRS 121.150(1))

Your Name and Address <u>New Power PAC</u>		Your Occupation and Employer <u>NA</u>		
<u>PO Box 1450</u>		<u>New Power PAC</u>		
<u>London, KY 40743</u>		Spouse s Name _____		
<u>c/o Heather Mahoney heather@kftc.org</u>		Spouse s Occupation _____		
Daytime Phone Number <u>859-559-8439</u>		Spouse s Employer _____		
Name of Candidate/Slate of Candidates/Committee <u>Tayna Fogle</u>		Office Sought <u>Lexington Fayette Urban Co. Council District 1</u>		<input checked="" type="checkbox"/> Supported <input type="checkbox"/> Opposed
Constitutional Amendment		Election <u>Primary</u>		<input type="checkbox"/> Supported <input type="checkbox"/> Opposed
Date	To Whom Made	Address	Purpose	Amount
<u>5/7/24</u>	<u>Allegra Print &amp; Imaging</u>	<u>114 Lisle Industrial Ave Lexington, KY 40511</u>	<u>door hanger printing</u>	<u>\$555.00</u>

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

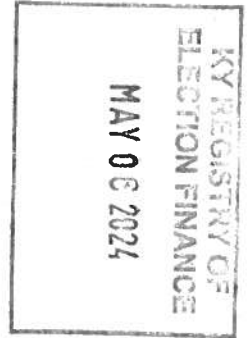
Heather Mahoney  
 Date

5/7/24  
 Signature



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REGISTRY USE



**REPORT OF AN INDEPENDENT EXPENDITURE**

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An independent expenditure must be reported when it exceeds \$500 in the aggregate in one election. (KRS 121.150(1))

Your Name and Address <b>NRA Political Victory Fund</b> 11250 Waples Mill Road, Fairfax, VA 22030		Your Occupation and Employer _____		
Daytime Phone Number _____		Spouse's Name _____		
		Spouse's Occupation _____		
		Spouse's Employer _____		
Name of Candidate/Slate of Candidates/Committee <b>Matt Nunn</b>		Office Sought <input checked="" type="checkbox"/> Supported Senate District 17 <input type="checkbox"/> Opposed		
Constitutional Amendment		Election <input checked="" type="checkbox"/> Supported Primary <input type="checkbox"/> Opposed		
Date	To Whom Made	Address	Purpose	Amount
5/3/2024	Prolist	4510 Buckeystown Pike Suite M - Frederick, MD 21704-7539	Endorsement Cards	\$164.75
5/3/2024	C2 IMAGING, LLC	8000 GRAINGER COURT, SPRINGFIELD VA 22153	Endorsement Cards Paper	\$10.35

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

5/6/2024

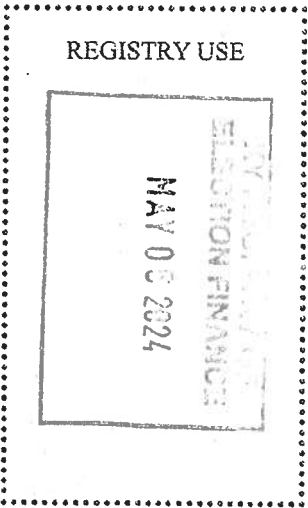
Date \_\_\_\_\_

DocuSigned by:

Signature

**KENTUCKY REGISTRY OF ELECTION FINANCE**

140 Walnut Street, Frankfort, KY 40601-3240  
 (502) 573-2226 FAX (502) 573-5622  
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**REPORT OF AN INDEPENDENT EXPENDITURE**

**NOTE: KRS 121.015(12) provides as follows: "Independent expenditure" means the expenditure of money or other things of value for a communication which expressly advocates the election or defeat of a clearly identified candidate or slate of candidates, and which is made without any coordination, consultation, or cooperation with any candidate, slate of candidates, campaign committee, or any authorized person acting on behalf of any of them, and which is not made in concert with, or at the request or suggestion of any candidate, slate of candidates, campaign committee, or any authorized person acting on behalf of any of them."**

An independent expenditure must be reported when it exceeds \$500 in the aggregate in one election. (KRS 121.150(1))

Your Name and Address <b>NRA Political Victory Fund</b> 11250 Waples Mill Road, Fairfax, VA 22030		Your Occupation and Employer _____		
Daytime Phone Number _____		Spouse's Name _____		
Name of Candidate/Slate of Candidates/Committee <b>Johnnie Turner</b>		Spouse's Occupation _____		
Constitutional Amendment		Spouse's Employer _____		
		Office Sought <input checked="" type="checkbox"/> Supported Senate District 29 _____ Opposed		
		Election <input checked="" type="checkbox"/> Supported Primary _____ Opposed		
Date	To Whom Made	Address	Purpose	Amount
5/3/2024	Prolist	4510 Buckeystown Pike Suite M - Frederick, MD 21704-7539	Endorsement Cards	\$161.33
5/3/2024	C2 IMAGING, LLC	8000 GRAINGER COURT, SPRINGFIELD VA 22153	Endorsement Cards Paper	\$9.98

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

5/6/2024

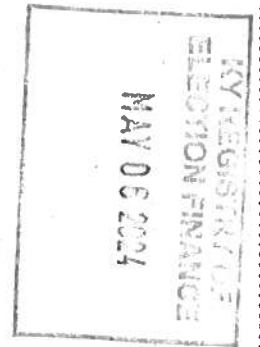
Date

DocuSigned by:  
  
 Signature



**KENTUCKY REGISTRY OF ELECTION FINANCE**  
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 (502) 573-2226 FAX (502) 573-5622  
 www.kref.ky.gov

REGISTRY USE



**REPORT OF AN INDEPENDENT EXPENDITURE**

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An independent expenditure must be reported when it exceeds \$500 in the aggregate in one election. (KRS 121.150(1))

Your Name and Address <u>NRA Political Victory Fund</u> <u>11250 Waples Mill Road, Fairfax, VA 22030</u>		Your Occupation and Employer _____		
Daytime Phone Number _____		Spouse's Name _____		
		Spouse's Occupation _____		
		Spouse's Employer _____		
Name of Candidate/Slate of Candidates/Committee <b>Killian Timoney</b>		Office Sought	<input checked="" type="checkbox"/> Supported	
		House District 45	<input type="checkbox"/> Opposed	
Constitutional Amendment		Election	<input checked="" type="checkbox"/> Supported	
		Primary	<input type="checkbox"/> Opposed	
Date	To Whom Made	Address	Purpose	Amount
5/3/2024	Prolist	4510 Buckeystown Pike Suite M - Frederick, MD 21704-7539	Endorsement Cards	\$72.95
5/3/2024	C2 IMAGING, LLO	8000 GRAINGER COURT, SPRINGFIELD VA 22153	Endorsement Cards Paper	\$2.07

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

5/6/2024

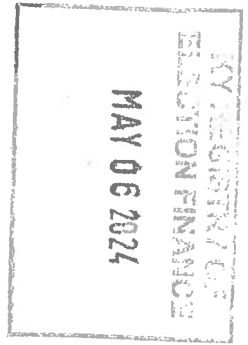
Date

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 Signature



**KENTUCKY REGISTRY OF ELECTION FINANCE**  
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REGISTRY USE



**REPORT OF AN INDEPENDENT EXPENDITURE**

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An independent expenditure must be reported when it exceeds \$500 in the aggregate in one election. (KRS 121.150(1))

Your Name and Address <b>NRA Political Victory Fund</b> 11250 Waples Mill Road, Fairfax, VA 22030		Your Occupation and Employer _____		
Daytime Phone Number _____		Spouse's Name _____		
		Spouse's Occupation _____		
		Spouse's Employer _____		
Name of Candidate/Slate of Candidates/Committee <b>Michael Meredith</b>		Office Sought	<input checked="" type="checkbox"/> Supported	
		House District 19	<input type="checkbox"/> Opposed	
Constitutional Amendment		Election	<input checked="" type="checkbox"/> Supported	
		Primary	<input type="checkbox"/> Opposed	
Date	To Whom Made	Address	Purpose	Amount
5/3/2024	Prolist	4510 Buckeystown Pike Suite M - Frederick, MD 21704-7539	Endorsement Cards	\$102.01
5/3/2024	C2 IMAGING, LLC	8000 GRAINGER COURT, SPRINGFIELD VA 22153	Endorsement Cards Paper	\$4.69

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

5/6/2024

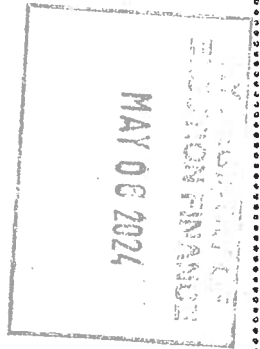
Date

DocuSigned by:  
  
 Signature



**KENTUCKY REGISTRY OF ELECTION FINANCE**  
 140 Walnut Street, Frankfort, KY 40601-3240  
 (502) 573-2226 FAX (502) 573-5622  
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REGISTRY USE



**REPORT OF AN INDEPENDENT EXPENDITURE**

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An independent expenditure must be reported when it exceeds \$500 in the aggregate in one election. (KRS 121.150(1))

Your Name and Address <u>NRA Political Victory Fund</u> <u>11250 Waples Mill Road, Fairfax, VA 22030</u>		Your Occupation and Employer _____		
Daytime Phone Number _____		Spouse's Name _____		
Name of Candidate/Slate of Candidates/Committee <b>Killian Timoney</b>		Spouse's Occupation _____		
Constitutional Amendment		Spouse's Employer _____		
		Office Sought	<input checked="" type="checkbox"/> Supported	
		House District 45	<input type="checkbox"/> Opposed	
		Election	<input checked="" type="checkbox"/> Supported	
		Primary	<input type="checkbox"/> Opposed	
Date	To Whom Made	Address	Purpose	Amount
5/3/2024	ProList	4510 Buckeystown Pike Suite M - Frederick, MD 21704-7539	Endorsement Cards	\$72.95
5/3/2024	C2 IMAGING, LLC	8000 GRAINGER COURT, SPRINGFIELD VA 22153	Endorsement Cards Paper	\$2.07

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

5/6/2024  
Date

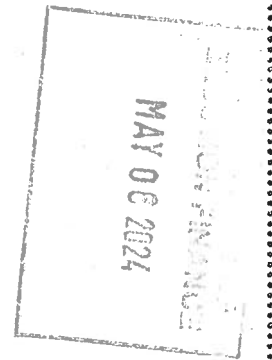
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[Signature]  
Signature



**KENTUCKY REGISTRY OF ELECTION FINANCE**

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REGISTRY USE



**REPORT OF AN INDEPENDENT EXPENDITURE**

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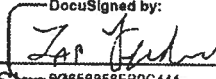
An independent expenditure must be reported when it exceeds \$500 in the aggregate in one election. (KRS 121.150(1))

Your Name and Address <b>NRA Political Victory Fund</b> 11250 Waples Mill Road, Fairfax, VA 22030		Your Occupation and Employer _____		
Daytime Phone Number _____		Spouse's Name _____		
Name of Candidate/Slate of Candidates/Committee		Spouse's Occupation _____		
Constitutional Amendment <b>Thomas Huff</b>		Spouse's Employer _____		
		Office Sought <input checked="" type="checkbox"/> Supported <input type="checkbox"/> Opposed		
		House District 49		
		Election <input checked="" type="checkbox"/> Supported <input type="checkbox"/> Opposed		
		Primary		
Date	To Whom Made	Address	Purpose	Amount
5/3/2024	Prolist	4510 Buckeystown Pike Suite M - Frederick, MD 21704-7539	Endorsement Cards	\$98.45
5/3/2024	C2 IMAGING, LLC	8000 GRAINGER COURT, SPRINGFIELD VA 22153	Endorsement Cards Paper	\$4.37

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

5/6/2024

Date

DocuSigned by:  
  
 Signature

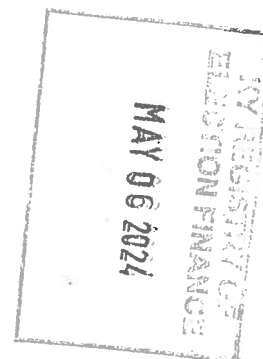




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**REPORT OF AN INDEPENDENT EXPENDITURE**

**NOTE: KRS 121.015(12) provides as follows: "Independent expenditure" means the expenditure of money or other things of value for a communication which expressly advocates the election or defeat of a clearly identified candidate or slate of candidates, and which is made without any coordination, consultation, or cooperation with any candidate, slate of candidates, campaign committee, or any authorized person acting on behalf of any of them, and which is not made in concert with, or at the request or suggestion of any candidate, slate of candidates, campaign committee, or any authorized person acting on behalf of any of them."**

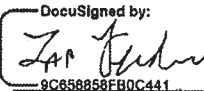
An independent expenditure must be reported when it exceeds \$500 in the aggregate in one election. (KRS 121.150(1))

Your Name and Address <b>NRA Political Victory Fund</b> 11250 Waples Mill Road, Fairfax, VA 22030		Your Occupation and Employer _____		
Daytime Phone Number _____		Spouse's Name _____		
		Spouse's Occupation _____		
		Spouse's Employer _____		
Name of Candidate/Slate of Candidates/Committee <b>Kim King</b>		Office Sought	<input checked="" type="checkbox"/> Supported	
		House District 55	<input type="checkbox"/> Opposed	
Constitutional Amendment		Election	<input checked="" type="checkbox"/> Supported	
		Primary	<input type="checkbox"/> Opposed	
Date	To Whom Made	Address	Purpose	Amount
5/3/2024	Prolist	4510 Buckeystown Pike Suite M - Frederick, MD 21704-7539	Endorsement Cards	\$88.25
5/3/2024	C2 IMAGING, LLC	8000 GRAINGER COURT, SPRINGFIELD VA 22153	Endorsement Cards Paper	\$3.45

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

5/6/2024

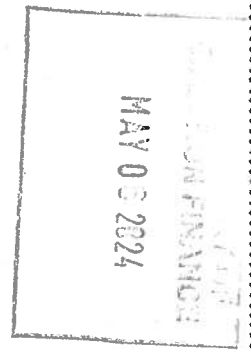
Date

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**REPORT OF AN INDEPENDENT EXPENDITURE**

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Your Name and Address <b>NRA Political Victory Fund</b> 11250 Waples Mill Road, Fairfax, VA 22030		Your Occupation and Employer _____		
Daytime Phone Number _____		Spouse's Name _____		
		Spouse's Occupation _____		
		Spouse's Employer _____		
Name of Candidate/Slate of Candidates/Committee <b>Kimberly Moser</b>		Office Sought <input checked="" type="checkbox"/> Supported _____ Opposed		
		House District 64		
Constitutional Amendment		Election <input checked="" type="checkbox"/> Supported _____ Opposed		
		Primary		
Date	To Whom Made	Address	Purpose	Amount
5/3/2024	Prolist	4510 Buckeystown Pike Suite M - Frederick, MD 21704-7539	Endorsement Cards	\$88.25
5/3/2024	C2 IMAGING, LLC	8000 GRAINGER COURT, SPRINGFIELD VA 22153	Endorsement Cards Paper	\$3.45

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

5/6/2024

Date

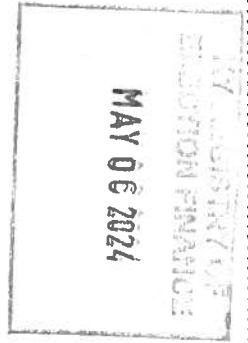
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Signature



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**REPORT OF AN INDEPENDENT EXPENDITURE**

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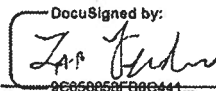
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Your Name and Address <b>NRA Political Victory Fund</b> 11250 Waples Mill Road, Fairfax, VA 22030		Your Occupation and Employer _____		
Daytime Phone Number _____		Spouse's Name _____		
		Spouse's Occupation _____		
		Spouse's Employer _____		
Name of Candidate/Slate of Candidates/Committee <b>C. Massey</b>		Office Sought <input checked="" type="checkbox"/> Supported <input type="checkbox"/> Opposed House District 66		
Constitutional Amendment		Election <input checked="" type="checkbox"/> Supported <input type="checkbox"/> Opposed Primary		
Date	To Whom Made	Address	Purpose	Amount
5/3/2024	Prolist	4510 Buckeystown Pike Suite M - Frederick, MD 21704-7539	Endorsement Cards	\$ 94.37
5/3/2024	C2 IMAGING, LLC	8000 GRAINGER COURT, SPRINGFIELD VA 22153	Endorsement Cards Paper	\$4.00

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

5/6/2024

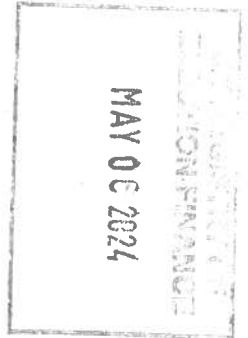
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**REPORT OF AN INDEPENDENT EXPENDITURE**

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Your Name and Address <b>NRA Political Victory Fund</b> 11250 Waples Mill Road, Fairfax, VA 22030		Your Occupation and Employer _____		
Daytime Phone Number _____		Spouse's Name _____		
Name of Candidate/Slate of Candidates/Committee <b>Tom Smith</b>		Spouse's Occupation _____		
Constitutional Amendment		Spouse's Employer _____		
		Office Sought <input checked="" type="checkbox"/> Supported <input type="checkbox"/> Opposed		
		House District 86		
		Election <input checked="" type="checkbox"/> Supported <input type="checkbox"/> Opposed		
		Primary		
Date	To Whom Made	Address	Purpose	Amount
5/3/2024	Prolist	4510 Buckeystown Pike Suite M - Frederick, MD 21704-7539	Endorsement Cards	\$ 91.31
5/3/2024	C2 IMAGING, LLC	8000 GRAINGER COURT, SPRINGFIELD VA 22153	Endorsement Cards Paper	\$3.73

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

5/6/2024

Date

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 Signature



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**REPORT OF AN INDEPENDENT EXPENDITURE**

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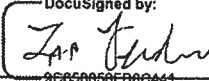
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Your Name and Address <u>NRA Political Victory Fund</u> <u>11250 Waples Mill Road, Fairfax, VA 22030</u>		Your Occupation and Employer _____		
Daytime Phone Number _____		Spouse's Name _____		
Name of Candidate/Slate of Candidates/Committee <b>Jason Howell</b>		Spouse's Occupation _____		
Constitutional Amendment		Spouse's Employer _____		
		Office Sought <input checked="" type="checkbox"/> Supported <input type="checkbox"/> Opposed		
		Senate District 01		
		Election <input checked="" type="checkbox"/> Supported <input type="checkbox"/> Opposed		
		Primary		
Date	To Whom Made	Address	Purpose	Amount
5/3/2024	ProList	4510 Buckeystown Pike Suite M - Frederick, MD 21704-7539	Endorsement Cards	<b>\$235.63</b>
5/3/2024	C2 IMAGING, LLC	8000 GRAINGER COURT, SPRINGFIELD VA 22153	Endorsement Cards Paper	<b>\$16.74</b>

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

5/6/2024

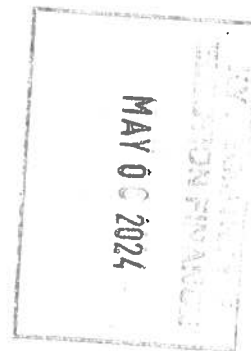
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Daytime Phone Number _____		Spouse's Name _____		
Name of Candidate/Slate of Candidates/Committee <b>Adrienne Southworth</b>		Spouse's Occupation _____		
Constitutional Amendment		Spouse's Employer _____		
		Office Sought <input checked="" type="checkbox"/> Supported <input type="checkbox"/> Opposed		
		Senate District 07		
		Election <input checked="" type="checkbox"/> Supported <input type="checkbox"/> Opposed		
		Primary		
Date	To Whom Made	Address	Purpose	Amount
5/3/2024	Prolist	4510 Buckeystown Pike Suite M - Frederick, MD 21704-7539	Endorsement Cards	\$172.39
5/3/2024	C2 IMAGING, LLC	8000 GRAINGER COURT, SPRINGFIELD VA 22153	Endorsement Cards Paper	\$11.04

I certify that this report was prepared with all reasonable diligence and is true, correct, and complete. I further certify that this expenditure was made in accordance with KRS 121.015(12).

5/6/2024

Date

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 Signature

