



COMMONWEALTH OF KENTUCKY
OFFICE OF THE SECRETARY OF STATE
ALISON LUNDERGAN GRIMES

MEMORANDUM

TO: All County Clerks

FROM: Alison Lundergan Grimes
Secretary of State

A handwritten signature in cursive script that reads "Alison Lundergan Grimes".

DATE: May 21, 2015

SUBJECT: Requests for Recanvass

James Comer/Chris McDaniel, Candidate for **Governor/Lt. Governor**
Richard Heath, Candidate for **Commissioner of Agriculture**

To date, two requests for recanvass have been filed with the Secretary of State's Office:

- (1) **James Comer/Chris McDaniel** have requested a recanvass in the 2015 **Republican Party** Primary for **Governor/Lt. Governor**.
- (2) **Richard Heath** has requested a recanvass in the 2015 **Republican Party** Primary for **Commissioner of Agriculture**.

Copies of the written requests are enclosed.

The recanvass shall be conducted by the county board of elections on Thursday, May 28, 2015, at 9:00 a.m. For your convenience, a copy of the recanvass report, SBE Form 49A, is attached.

Pursuant to KRS 117.305, you must notify each candidate and slate of candidates for the nominations above of the time and place of the recanvass. Please also fax that information to my office at 502-564-5687. To assist you in notifying the candidates and slates of candidates of the time and place of the recanvass, copies of their filing documents containing the mailing address and contact information are enclosed.

You will be guided by KRS 117.305 and 31KAR 4:070 concerning the recanvass procedures. Record the recanvassed vote totals, obtain signatures of county board members and **immediately** fax the completed recanvass report to the Secretary of State at 502-564-5687. After making a copy for your files, mail the original to the address provided above.

Thank you, and if you have any questions or if we can provide additional information, please do not hesitate to call Mary Sue or Jeremy in the Election Division.

COMER
MCDANIEL

PO Box 6873
Frankfort, KY 40602

JamesComer.com

May 20, 2015

Office of the Kentucky Secretary of State
700 Capital Avenue
Suite 152
Frankfort, KY 40601

RECEIVED AND FILED
DATE May 20, 2015

ALISON LUNDERGAN GRIMES
SECRETARY OF STATE
COMMONWEALTH OF KENTUCKY
BY Mary Sue Helm

Dear Secretary Grimes:

Pursuant to KRS 117.305, we hereby request a full and complete check and recanvass of every one of the voting machines and absentee ballots from all precincts in all 120 counties involving our Republican Governor/Lieutenant Governor race from this 2015 primary election.

Thank you,



James Comer



Chris McDaniel

RECEIVED AND FILED
DATE May 21, 2015

ALISON LUNDERGAN GRIMES
SECRETARY OF STATE
COMMONWEALTH OF KENTUCKY
BY Mary Sue Nelson

HEATH for Agriculture Commissioner

438 Millers Chapel Rd. Mayfield, KY 42066

May 21, 2015

Office of Kentucky Secretary of State

700 Capital Avenue Suite 152

Frankfort, KY 40601

Dear Secretary Grimes:

Pursuant to KRS 117.305, I hereby request a full and complete check and recanvass of every one of the voting machines and absentee ballots from all precincts in all 120 counties involving our Republican Agriculture Commissioner race from this 2015 primary election.

Thanks you



Richard Heath



RECEIVED AND FILED
DATE January 26, 2015

NOTIFICATION AND DECLARATION

(Republican and Democratic Candidates Filing for Primary Election for an office other than Governor, Lieutenant Governor, or Secretary of State)

Of Richard Heath (Name of Candidate - Please Type or Print) ALISON LUNDERGAN GRIMES
SECRETARY OF STATE
COMMONWEALTH OF KENTUCKY
 office of Commissioner of Agriculture (Office sought) BY Mary Sue Nelson
(District number, when applicable)
 To SOS
(County Clerk or Secretary of State, as case may be)

For the purpose of having my name placed on the official primary election ballot as a candidate for nomination by the Republican Party, I, Richard Heath (Name of candidate in full as desired on ballot as provided in KRS 118.129) do solemnly swear that my residence is 438 Millers Chapel Rd. (Residential Address)
Mayfield Graves KY 42066
(City, if applicable) (County) (Zip)
 that my mailing address, if different, is _____ KY _____
(Post Office Address) (City) (Zip)
 and that I am a registered Republican voter in Panther precinct;
(Party)
 that I believe in the principles of the Republican Party, and intend to support its principles and policies; that I meet all the statutory and constitutional qualifications for the office which I am seeking; that if nominated as a candidate of such party at the ensuing election, I will accept the nomination and not withdraw for reasons other than those stated in KRS 118.105(3); that I will not knowingly violate any election law or any law relating to corrupt and fraudulent practice in campaigns or elections in this state, and if finally elected I will qualify for the office.

Richard Heath
(Signature of Candidate)

Subscribed and sworn to before me by Richard Heath
(Name of Candidate)

this 26 day of February, 2015.
(Month)
Melaine Stinson Notary Public 08/16/15
(Signature of Notary/Officer) (Title of Officer) (Commission Expiration)
 We, RANDALL HEATH and FRIEDA HEATH

do solemnly swear that we are registered voters and members of the same Party and are from the district or jurisdiction from which the candidate seeks nomination; and that we believe RICHARD HEATH
(Name of Candidate - Please Type or Print)
 to be qualified to fill the office of COMMISSIONER OF AGRICULTURE
(Office sought)

Randall Heath Graves 700 ST RT 427 Hickory KY 42051
(Signature of Voter) (County) (Residential Address) (City) (Zip)
Frieda Heath Graves 700 ST RT 427 Hickory KY 42051
(Signature of Voter) (County) (Residential Address) (City) (Zip)

Subscribed and sworn to before me by RANDALL HEATH and

FRIEDA HEATH this 26 day of January, 2015.
(Name of Voter) (Month)
Melaine Stinson Notary Public 08/16/15
(Signature of Notary/Officer) (Title of Officer) (Commission Expiration)



White copy: Filing officer
 Canary copy: State Board of Elections
 Pink copy: Candidate

KENTUCKY REGISTRY OF ELECTION FINANCE
 140 Walnut Street
 Frankfort, Kentucky 40601
 (502) 573-2226 / Fax (502) 573-5622
 www.kref.ky.gov

This Space is to be used by the Candidate for Regional Use Only
RECEIVED AND FILED
 DATE January 26, 2015

APPOINTMENT OF CAMPAIGN TREASURER AND OPTIONAL REQUEST FOR REPORTING EXEMPTION

ALISON LUNDERGAN GRIMES
SECRETARY OF STATE
COMMONWEALTH OF KENTUCKY
 Secretary of State
 BY Maury Sue Helm
 Clerk, Clerk
 on _____ (Date Filed) FN _____

SECTION 1 CANDIDATE INFORMATION (Please type or print)

Name of Candidate (as will appear on ballot) <u>Richard Heath</u>	County of Candidate's Residence <u>Graves</u>
Candidate's Mailing Address: Street, P.O. Box, Rural Route <u>438 Millers Chapel Rd.</u>	City <u>Mayfield</u> State <u>Ky</u> Zip Code <u>42066</u>
Candidate's Telephone Number <u>270-705-7539</u>	Candidate's Alternate Telephone Number <u>270-297-2210</u>
Candidate's Date of Birth <u>8-9-55</u>	Optional - Additional Methods of Contact (Example: e-mail address, fax number, other telephone numbers)

SECTION 2 ELECTION INFORMATION

Date of Election <u>5-19-15</u>	Type of Election (Check One) <input checked="" type="checkbox"/> Primary Nomination <input type="checkbox"/> General Election <input type="checkbox"/> Special Election or Election to Fill Unexpired Term	Is Candidate the Incumbent for This Office? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is Candidate Filing as a Write-In Candidate? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Office Sought <u>Commissioner of Ag</u>	Jurisdiction of Office Sought, including District, Circuit, or Division Number, if Applicable <u>Statewide</u>		
This Race is: (Check One) <input checked="" type="checkbox"/> Partisan <input type="checkbox"/> Non-Partisan	If Partisan Race, Indicate Candidate's Designation on the Ballot: (Check One) <input type="checkbox"/> Democrat <input checked="" type="checkbox"/> Republican <input type="checkbox"/> Independent <input type="checkbox"/> Other (Specify) _____		

SECTION 3. TREASURER AND DEPOSITORY INFORMATION

Name of Treasurer - Required Designation Even if Candidate is Serving as Own Treasurer <u>Dean Owen</u>	City <u>Paducah</u> State <u>Ky</u> Zip Code <u>42003</u>
Treasurer's Mailing Address: Street, P.O. Box, Rural Route <u>5978 Old Hwy 455</u>	Treasurer's Alternate Telephone Number <u>270-210-1179</u>
Treasurer's Telephone Number <u>270-654-0720</u>	Address of Financial Institution Intended for Use as Campaign Depository
Name of Financial Institution Intended for Use as Campaign Depository	

SECTION 4 OPTIONAL REQUEST FOR REPORTING EXEMPTION PURSUANT TO KRS 121.150(1)

I am not requesting a reporting exemption. I intend to file all campaign finance reports. I understand that I will have campaign finance reports due 32 and 15 days before the election(s) and 30 days after the election(s). This is my intent for the: (Check One)
 Primary and General Elections Primary Election Only General Election Only

EXEMPTION OPTION A. I expect to raise and spend \$3,000 or less during each election as indicated below which entitles me to request an exemption from all pre-election reporting. I understand that I will have one campaign finance report due no later than 30 days after the election indicated unless my campaign exceeds the \$3,000 threshold at which time I will immediately begin filing the required campaign finance reports. This is my intent for the: (Check One)
 Primary and General Elections Primary Election Only General Election Only

EXEMPTION OPTION B. I expect to raise and spend \$1,000 or less during each election as indicated below which entitles me to request a reporting exemption. I understand that I will have no campaign finance reports due for the election(s) indicated unless my campaign exceeds the \$1,000 threshold at which time I will immediately begin filing the required campaign finance reports. This is my intent for the: (Check One)
 Primary and General Elections Primary Election Only General Election Only

SECTION 5. AMENDED INFORMATION, REVOCATION OR CHANGE OF REPORTING EXEMPTION

If using this form to amend candidate, election, treasurer, or depository information, check this box
 If using this form to revoke a prior request for exemption and/or to exercise a different option, check this box
 Briefly describe reason for amendment, revocation, or change:

SECTION 6. VERIFICATION

I certify that I have examined this Appointment of Campaign Treasurer and Optional Request for Reporting Exemption form and to the best of my knowledge and belief it is true, correct, and complete. I understand that submission of false, erroneous, or incomplete information may subject me to the penalties of KRS 121.990.
 Candidate's Signature Richard Heath Date 1/26/15 



RECEIVED AND FILED
DATE January 14, 2015

NOTIFICATION AND DECLARATION

(Republican and Democratic Candidates Filing for Primary Election for an office other than Governor or Lieutenant Governor)

Of Ryan F. Quarles
(Name of Candidate - Please Type or Print)

office of Commissioner of Agriculture
(Office sought)

To Secretary of State
(County Clerk or Secretary of State, as case may be)

ALISON LINDERGAN GRIMES
SECRETARY OF STATE
COMMONWEALTH OF KENTUCKY
BY Mary Sue Helm
(District number, when applicable)

For the purpose of having my name placed on the official primary election ballot as a candidate for nomination by the Republican Party, I, Ryan F. Quarles
(Name of candidate in full as desired on ballot as provided in KRS 118.129)

do solemnly swear that my residence is 123 Placid Dr.
(Residential Address)

Georgetown Scott KY 40324
(City, if applicable) (County) (Zip)

that my mailing address, if different, is P.O. Box 1001 Georgetown KY 40324
(Post Office Address) (City) (Zip)

and that I am a registered Republican voter in East Lane Run precinct;
(Party)

that I believe in the principles of the Republican Party, and intend to support its principles and policies; that I meet all the statutory and constitutional qualifications for the office which I am seeking; that if nominated as a candidate of such party at the ensuing election, I will accept the nomination and not withdraw for reasons other than those stated in KRS 118.105(3); that I will not knowingly violate any election law or any law relating to corrupt and fraudulent practice in campaigns or elections in this state, and if finally elected I will qualify for the office.

Ryan Quarles
(Signature of Candidate)

Subscribed and sworn to before me by Ryan Quarles
(Name of Candidate)

this 14th day of January, 2015.
(Month)

Mary Sue Helm Notary January 25, 2015
(Signature of Notary/Officer) (Title of Officer) (Commission Expiration)

We Paul Hornback and Jonathan Shell
do solemnly swear that we are registered voters and members of the same Party and are from the district or jurisdiction from which the candidate seeks nomination; and that we believe Ryan F. Quarles
(Name of Candidate - Please Type or Print)

to be qualified to fill the office of Commissioner of Agriculture
(Office sought)

Paul Hornback Shelby 6102 Cropper Rd KY 40065
(Signature of Voter) (County) (Residential Address) (City) (Zip)

Jonathan Shell Garrard 391 Deer Run Dr KY 40444
(Signature of Voter) (County) (Residential Address) (City) (Zip)

Subscribed and sworn to before me by Paul Hornback and Jonathan Shell
(Name of Voter)

this 14th day of January, 2015.
(Month)

Mary Sue Helm Notary January 25, 2015
(Signature of Notary/Officer) (Title of Officer) (Commission Expiration)



White copy: Filing officer
Canary copy: State Board of Elections
Pink copy: Candidate

KENTUCKY REGISTRY OF ELECTION FINANCE
 140 Walnut Street
 Frankfort, Kentucky 40601
 (502) 573-2226 / Fax (502) 573-5622
 www.kref.ky.gov

RECEIVED AND FILED
 DATE January 14, 2015

APPOINTMENT OF CAMPAIGN TREASURER AND OPTIONAL REQUEST FOR REPORTING EXEMPTION

ALISON LUNDERGAN GRIMES
 SECRETARY OF STATE
 COMMONWEALTH OF KENTUCKY
 BY [Signature]
 on _____ (Date Filed)

SECTION 1. CANDIDATE INFORMATION (Please type or print)

Name of Candidate (as will appear on ballot) <u>Ryan F. Quarles</u>		County of Candidate's Residence <u>Scott</u>	
Candidate's Mailing Address: Street, P.O. Box, Rural Route <u>P.O. Box 1001</u>		City <u>Georgetown</u>	State <u>Ky</u>
Candidate's Telephone Number <u>859-229-9850</u>		Zip Code <u>40324</u>	
Candidate's Date of Birth <u>10-20-1983</u>		Candidate's Alternate Telephone Number <u>N/A</u>	
Optional - Additional Methods of Contact (Example: e-mail address, fax number, other telephone number) <u>Ryan @ RyanQuarles.com</u>			

SECTION 2. ELECTION INFORMATION

Date of Election <u>5-19-2015</u>	Type of Election (Check One) <input checked="" type="checkbox"/> Primary Nomination <input type="checkbox"/> General Election <input type="checkbox"/> Special Election or Election to Fill Unexpired Term	Is Candidate the Incumbent for This Office? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Is Candidate Filing as a Write-In Candidate? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Office Sought <u>Commissioner of Agriculture</u>	Jurisdiction of Office Sought, Including District, Circuit, or Division Number, if Applicable		
This Race is: (Check One) <input checked="" type="checkbox"/> Partisan <input type="checkbox"/> Non-Partisan	If Partisan Race, Indicate Candidate's Designation on the Ballot: (Check One) <input type="checkbox"/> Democrat <input checked="" type="checkbox"/> Republican <input type="checkbox"/> Independent <input type="checkbox"/> Other (Specify) _____		

SECTION 3. TREASURER AND DEPOSITORY INFORMATION

Name of Treasurer - Required Designation Even if Candidate is Serving as Own Treasurer <u>Donna Reacker</u>		City <u>Georgetown</u>	
Treasurer's Mailing Address: Street, P.O. Box, Rural Route <u>111 Pintail Ct</u>		State <u>Ky</u>	Zip Code <u>40324</u>
Treasurer's Telephone Number <u>859-797-0170</u>		Treasurer's Alternate Telephone Number	
Name of Financial Institution Intended for Use as Campaign Depository <u>Kentucky Bank</u>		Address of Financial Institution Intended for Use as Campaign Depository <u>260 Blossom Park Dr, Georgetown, Ky 40324</u>	

SECTION 4. OPTIONAL REQUEST FOR REPORTING EXEMPTION PURSUANT TO KRS 121.180(1)

I am not requesting a reporting exemption. I intend to file all campaign finance reports. I understand that I will have campaign finance reports due 32 and 15 days before the election(s) and 30 days after the election(s). This is my intent for the: (Check One)
 Primary and General Elections Primary Election Only General Election Only

EXEMPTION OPTION A. I expect to raise and spend \$3,000 or less during each election as indicated below which entitles me to request an exemption from all pre-election reporting. I understand that I will have one campaign finance report due no later than 30 days after the election indicated unless my campaign exceeds the \$3,000 threshold at which time I will immediately begin filing the required campaign finance reports. This is my intent for the: (Check One)
 Primary and General Elections Primary Election Only General Election Only

EXEMPTION OPTION B. I expect to raise and spend \$1,000 or less during each election as indicated below which entitles me to request a reporting exemption. I understand that I will have no campaign finance reports due for the election(s) indicated unless my campaign exceeds the \$1,000 threshold at which time I will immediately begin filing the required campaign finance reports. This is my intent for the: (Check One)
 Primary and General Elections Primary Election Only General Election Only

SECTION 5. AMENDED INFORMATION, REVOCATION OR CHANGE OF REPORTING EXEMPTION

If using this form to amend candidate, election, treasurer, or depository information, check this box
 If using this form to revoke a prior request for exemption and/or to exercise a different option, check this box
 Briefly describe reason for amendment, revocation, or change:

SECTION 6. VERIFICATION

I certify that I have examined this Appointment of Campaign Treasurer and Optional Request for Reporting Exemption form and to the best of my knowledge and belief it is true, correct, and complete. I understand that submission of false, erroneous, or incomplete information may subject me to the penalties of KRS 121.990.

Candidate's Signature [Signature] Date 1/14/2015 



RECEIVED AND FILED
DATE January 27, 2015

NOTIFICATION AND DECLARATION ALISON LUNDERGAN GRIMES SECRETARY OF STATE

(Republican and Democratic Candidates Filing for Primary Election for the office of Governor, Lieutenant Governor)
Of Matthew G. Bevin and Jenean Hampton
(Name of Candidate for Governor - Please Type or Print) (Name of Candidate for Lieutenant Governor - Please Type or Print)

for nomination to the Office of Governor and Lieutenant Governor.

To Alison Lundergan Grimes
(Secretary of State)

For the purpose of having our names placed on the official primary election ballot as a slate of candidates for Governor and Lieutenant Governor for nomination by the Republican Party.

I, Matt Bevin
(Name of Candidate for Governor in full as desired on the Ballot as provided in KRS 118.129)

do solemnly swear that my residence is 531 Raspberry Ln.
(Residential Address)
Louisville Jefferson KY 40206
(City, if applicable) (County) (Zip)

that my mailing address, if different, is _____ KY _____
(Post Office Address) (City) (Zip)

and that I am a registered Republican voter in G156 precinct;
(Party)

I, Jenean Hampton
(Name of Candidate for Lieutenant Governor in full as desired on the Ballot as provided in KRS 118.129)

do solemnly swear that my residence is 820 Moreland Drive
(Street, Highway, Route)
Bowling Green Warren KY 42103
(City, if applicable) (County) (Zip)

that my mailing address, if different, is _____ KY _____
(Post Office Address) (City) (Zip)

and that I am a registered Republican voter in Eastwood A 110 precinct;
(Party)

that we believe in the principles of the Republican Party, and intend to support its principles and policies; that we will accept the nomination and not withdraw for reasons other than those stated in KRS 118.105(3); that we will not knowingly violate any election law or any law relating to corrupt and fraudulent practice in campaigns or elections in this state, and if finally elected we will qualify for our offices.

Matthew G. Bevin
(Signature of Candidate for Governor)

Subscribed and sworn to before me by Matthew G. Bevin
(Name of Candidate for Governor)

this 27th day of January, 20 15.
(Month) (Year)
Mary Sue Helm Notary January 25, 2019
(Signature of Notary/Officer) (Title of Officer) (Commission Expiration)

Jenean Hampton
(Signature of Candidate for Lieutenant Governor)

Subscribed and sworn to before me by Jenean Hampton
(Name of Candidate for Lieutenant Governor)

this 27th day of January, 20 15.
(Month) (Year)
Mary Sue Helm Notary January 25, 2019
(Signature of Notary/Officer) (Title of Officer) (Commission Expiration)



RECEIVED AND FILED
DATE January 27, 2015

We, Glenna Bevin and Doyle Isaak do solemnly swear that
we are registered voters and members of the same Party and are from the district or jurisdiction from which the
candidate for Governor seeks nomination; and that we believe Matthew G. Patton
to be qualified to fill the Office of Governor.
(Name of Candidate for Governor - Please Type or Print)

ALISON LUNDERGAN GRIMES
SECRETARY OF STATE
COMMONWEALTH OF KENTUCKY
Mary Sue Helm

Glenna Bevin
(Signature of Voter) Jefferson 531 Barbary Ln Louisville KY 40206
(County) (Residential Address) (City) (Zip)

Doyle Isaak
(Signature of Voter) Warren 820 Marland Dr. Bowling Green KY 42103
(County) (Residential Address) (City) (Zip)

Subscribed and sworn to before me by Glenna Bevin and
(Name of Voter)
Doyle Isaak this 27th day of January, 20 15.
(Name of Voter) (Month) (Year)
Mary Sue Helm Notary January 25, 2019
(Signature of Notary/Officer) (Title of Officer) (Commission Expiration)

We, Glenna Bevin and Doyle Isaak do solemnly swear that
we are registered voters and members of the same Party and are from the district or jurisdiction from which the
candidate for Lieutenant Governor seeks nomination; and that we believe
Jenean Hampton
to be qualified to fill the Office of Lieutenant Governor.
(Name of Candidate for Lieutenant Governor - Please Type or Print)

Glenna Bevin
(Signature of Voter) same as above KY same as above
(County) (Residential Address) (City) (Zip)

Doyle Isaak
(Signature of Voter) same as above KY same as above
(County) (Residential Address) (City) (Zip)

Subscribed and sworn to before me by Glenna Bevin and
(Name of Voter)
Doyle Isaak this 27th day of January, 20 15.
(Name of Voter) (Month) (Year)
Mary Sue Helm Notary January 25, 2019
(Signature of Notary/Officer) (Title of Officer) (Commission Expiration)



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

RECEIVED AND FILED
DATE January 27, 2015 REGISTRY USE

SLATE OF CANDIDATES ELISON LUNDERGAN GRIMES
APPOINTMENT OF CAMPAIGN TREASURER SECRETARY OF STATE

Please Type or Print COMMONWEALTH OF KENTUCKY
This form does not constitute registering a campaign committee.
BY Elison Lundergan Grimes Jan 27, 2015

CANDIDATE INFORMATION

(Slate is responsible for notifying the Registry of any change of information)

Matt Berin
Candidate for Governor
531 Barberry Ln.
Mailing Address
Louisville KY 40206
City State Zip
(502) 416-0016 ()
Daytime Phone Alternate Phone
01/09/1967
Candidate's Date of Birth

Jenean Hampton
Candidate for Lt. Governor
820 Moreland Drive
Mailing Address
Bowling Green KY 42103
City State Zip
(770) 592-8416 ()
Daytime Phone Alternate Phone
05/12/1958
Candidate's Date of Birth

Party Affiliation: Democrat Republican Independent Other

TREASURER AND DEPOSITORY INFORMATION

Eva Smith
Treasurer's Name
11902 Branley Ave
Mailing Address
M. S. Detown KY 40243
City State Zip
(502) 396-0989 ()
Daytime Phone Alternate Phone

CAMPAIGN DEPOSITORY (Depository must be a financial institution authorized to do business in Kentucky and insured by the Federal Deposit Insurance Corporation.)

Chase Bank
Name of Financial Institution intended for use as Campaign Depository
12016 Shelbyville Rd
Address of Financial Institution intended for use as Campaign Depository
M. S. Detown, KY 40243

SIGNATURES

We hereby certify that the foregoing is our act and deed.

[Signature]
Signature - Candidate for Governor

1-27-15
Date

[Signature]
Signature - Candidate for Lt. Governor

1-27-15
Date

[Signature]
Signature - Treasurer for Slate

1-27-15
Date

KREF 001/G Revised 05/2005 FILING OFFICER: Attach original to filing papers and send duplicate copy immediately to the Registry.





RECEIVED AND FILED
DATE January 22, 2015

NOTIFICATION AND DECLARATION

(Republican and Democratic Candidates Filing for Primary Election for the office of Governor and Lieutenant Governor)

SECRETARY OF STATE
COMMONWEALTH OF KENTUCKY

Of James R. Comer and Chris McDaniel
(Name of Candidate for Governor - Please Type or Print) (Name of Candidate for Lieutenant Governor - Please Type or Print)

for nomination to the Office of Governor and Lieutenant Governor.

To Alison Lundergan Grimes
(Secretary of State)

For the purpose of having our names placed on the official primary election ballot as a slate of candidates for Governor and Lieutenant Governor for nomination by the Republican Party,

I, James R. Comer
(Name of Candidate for Governor in full as desired on the Ballot as provided in KRS 118.129)

do solemnly swear that my residence is 753 Gamaliel Rd.
(Residential Address)

Tompkinsville Monroe KY 42167
(City, if applicable) (County) (Zip)

that my mailing address, if different, is _____ KY _____
(Post Office Address) (City) (Zip)

and that I am a registered Republican voter in West Tompkinsville precinct;
(Party)

I, Chris McDaniel
(Name of Candidate for Lieutenant Governor in full as desired on the Ballot as provided in KRS 118.129)

do solemnly swear that my residence is 500 Mason Rd.
(Street, Highway, Route)

Taylor Mill Kenton KY 41015
(City, if applicable) (County) (Zip)

that my mailing address, if different, is _____ KY _____
(Post Office Address) (City) (Zip)

and that I am a registered Republican voter in Taylor Mill #4 precinct;
(Party)

that we believe in the principles of the Republican Party, and intend to support its principles and policies; that we will accept the nomination and not withdraw for reasons other than those stated in KRS 118.105(3); that we will not knowingly violate any election law or any law relating to corrupt and fraudulent practice in campaigns or elections in this state, and if finally elected we will qualify for our offices.

James Comer
(Signature of Candidate for Governor)

Subscribed and sworn to before me by James R. Comer
(Name of Candidate for Governor)

this 22nd day of January, 20 15.
(Month)

Paul C. Harris Notary 5/20/2018
(Signature of Notary/Officer) (Title of Officer) (Commission Expiration)

Subscribed and sworn to before me by Chris McDaniel
(Name of Candidate for Lieutenant Governor)

this 22nd day of January, 20 15.
(Month)

Paul C. Harris Notary 5/20/2018
(Signature of Notary/Officer) (Title of Officer) (Commission Expiration)



RECEIVED AND FILED

DATE January 22, 2015 do solemnly swear that

We, Amy Thompson and Bobby Gaffney

are registered voters and members of the same Party and are from the district or jurisdiction from which the

candidate for Governor seeks nomination; and that we believe James R. Comer

(Name of Candidate for Governor - Please Type or Print) **ALISON LUNDERGAN GRIMES**
SECRETARY OF STATE

to be qualified to fill the Office of Governor.

COMMONWEALTH OF KENTUCKY
BY Mary Sue Nelson

Amy Thompson Monroe 1562 Radio Station Rd Tompkinsville KY 42167
(Signature of Voter) (County) (Residential Address) (City) (Zip)

Bobby Gaffney Woodford 671 Big Sink Rd Versailles KY 40383
(Signature of Voter) (County) (Residential Address) (City) (Zip)

Subscribed and sworn to before me by Amy Thompson and
(Name of Voter)

Bobby Gaffney this 22nd day of January, 20 15
(Name of Voter) (Month)

Paul C. Hank Notary 5/20/2018
(Signature of Notary/Officer) (Title of Officer) (Commission Expiration)

We, Amy Thompson and Bobby Gaffney do solemnly swear that

are registered voters and members of the same Party and are from the district or jurisdiction from which the

candidate for Lieutenant Governor seeks nomination; and that we believe

Chris McDaniel to be qualified to fill the Office of Lieutenant Governor.
(Name of Candidate for Lieutenant Governor - Please Type or Print)

Amy Thompson Monroe 1562 Radio Station Rd Tompkinsville KY 42167
(Signature of Voter) (County) (Residential Address) (City) (Zip)

Bobby Gaffney Woodford 671 Big Sink Rd Versailles KY 40383
(Signature of Voter) (County) (Residential Address) (City) (Zip)

Subscribed and sworn to before me by Amy Thompson and
(Name of Voter)

Bobby Gaffney this 22nd day of January, 20 15
(Name of Voter) (Month)

Paul C. Hank Notary 5/20/2018
(Signature of Notary/Officer) (Title of Officer) (Commission Expiration)



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

RECEIVED AND FILED
 DATE January 22, 2015

REGISTRY USE

SLATE OF CANDIDATES
 ALISON LINDERBORG GRIMES
 APPOINTMENT OF CAMPAIGN TREASURER
 SECRETARY OF STATE
 COMMONWEALTH OF KENTUCKY
 Please Type or Print
 This form does not constitute registering a campaign committee
 BY W. Due / [Signature]

Logged _____
 Keyed _____

CANDIDATE INFORMATION
 (Slate is responsible for notifying the Registry of any change of information)

<u>James R. Comer</u> Candidate for Governor	<u>Chris McDaniel</u> Candidate for Lt. Governor
<u>753 Gamaliel Rd</u> Mailing Address	<u>500 Mason Rd</u> Mailing Address
<u>Tompkinsville</u> KY <u>42167</u> City State Zip	<u>Taylor Mill</u> KY <u>41015</u> City State Zip
<u>(270) 427 - 6062</u> () - Daytime Phone Alternate Phone	<u>(859) 801 - 4613</u> () - Daytime Phone Alternate Phone
<u>08 / 19 / 1972</u> Candidate's Date of Birth	<u>07 / 19 / 1977</u> Candidate's Date of Birth
Party Affiliation: <input type="checkbox"/> Democrat <input checked="" type="checkbox"/> Republican <input type="checkbox"/> Independent <input type="checkbox"/> Other _____	

TREASURER AND DEPOSITORY INFORMATION

<u>Brittaney King</u> Treasurer's Name	CAMPAIGN DEPOSITORY (Depository must be a financial institution authorized to do business in Kentucky and insured by the Federal Deposit Insurance Corporation.) <u>Farmers Bank & Capital Trust</u> Name of Financial Institution intended for use as Campaign Depository <u>P.O. Box 309 Frankfort, KY 40602</u> Address of Financial Institution intended for use as Campaign Depository
<u>1559 Battery Cir</u> Mailing Address	
<u>Hebron</u> KY <u>41048</u> City State Zip	
<u>(859) 242 - 2390</u> () - Daytime Phone Alternate Phone	

SIGNATURES

We hereby certify that the foregoing is our act and deed.

<u>[Signature]</u> Signature, Candidate for Governor	<u>1-22-15</u> Date
<u>[Signature]</u> Signature, Candidate for Lt. Governor	<u>1/22/15</u> Date
<u>[Signature]</u> Signature - Treasurer for Slate	<u>1/22/2015</u> Date

KREF 001/G Revised 05/2005 FILING OFFICER: Attach original to filing papers and send duplicate copy immediately to the Registry.





RECEIVED AND FILED
DATE January 26, 2015

NOTIFICATION AND DECLARATION ALISON LUNDERGAN GRIMES

(Republican and Democratic Candidates Filing for Primary Election for the office of Governor and Lieutenant Governor)

Of Hal Heiner and K.C. Crosbie
(Name of Candidate for Governor - Please Type or Print) (Name of Candidate for Lieutenant Governor - Please Type or Print)

for nomination to the Office of Governor and Lieutenant Governor.

To Alison Lundergan Grimes
(Secretary of State)

For the purpose of having our names placed on the official primary election ballot as a slate of candidates for

Governor and Lieutenant Governor for nomination by the Republican Party,

I, Hal Heiner
(Name of Candidate for Governor in full as desired on the Ballot as provided in KRS 118.129)

do solemnly swear that my residence is 15101 Percy Mill Rd
(Residential Address)

Louisville Jefferson KY 40245
(City, if applicable) (County) (Zip)

that my mailing address, if different, is _____
(Post Office Address) (City) (Zip)

and that I am a registered Republican voter in V 129 precinct;
(Party)

I, K.C. Crosbie
(Name of Candidate for Lieutenant Governor in full as desired on the Ballot as provided in KRS 118.129)

do solemnly swear that my residence is 3604 Burning Tree Ln
(Street, Highway, Route)

Lexington Fayette KY 40509
(City, if applicable) (County) (Zip)

that my mailing address, if different, is _____
(Post Office Address) (City) (Zip)

and that I am a registered Republican voter in C 203 precinct;
(Party)

that we believe in the principles of the Republican Party, and intend to support its principles and policies; that we will accept the nomination and not withdraw for reasons other than those stated in KRS 118.105(3); that we will not knowingly violate any election law or any law relating to corrupt and fraudulent practice in campaigns or elections in this state, and if finally elected we will qualify for our offices.

Hal Heiner
(Signature of Candidate for Governor)

Subscribed and sworn to before me by Hal Heiner
(Name of Candidate for Governor)

this 26th day of January, 2015.
(Month)

Mary Sue Helm
(Signature of Notary/Officer)

Notary
(Title of Officer)

January 25, 2019
(Commission Expiration)

K.C. Crosbie
(Signature of Candidate for Lieutenant Governor)

Subscribed and sworn to before me by K.C. Crosbie
(Name of Candidate for Lieutenant Governor)

this 26th day of January, 2015.
(Month)

Mary Sue Helm
(Signature of Notary/Officer)

Notary
(Title of Officer)

January 25, 2019
(Commission Expiration)

RECEIVED AND FILED
DATE January 26, 2015

ALISON LUNDERGAN GRIMES
SECRETARY OF STATE
COMMONWEALTH OF KENTUCKY
Mary Sue Nelson

We, Robert Russell and _____ do solemnly swear that
we are registered voters and members of the same Party and are from the district or jurisdiction from which the
candidate for Governor seeks nomination; and that we believe Hal Heiner
(Name of Candidate for Governor - Please Type or Print)
to be qualified to fill the Office of Governor.

Robert Russell Jefferson 8100 Parkshire Ct KY 40220
(Signature of Voter) (County) (Residential Address) (City) (Zip)

(Signature of Voter) (County) (Residential Address) (City) (Zip)

Subscribed and sworn to before me by Robert Russell and _____
(Name of Voter)

this 23 day of JANUARY, 2015
(Month)

[Signature] Notary Public 10-27-18
(Signature of Notary/Officer) (Title of Officer) (Commission Expiration)

 **LUCIA ALEXANDER**
MY COMMISSION #FF171906
EXPIRES October 27, 2018
(407) 398-0153 FloridaNotaryService.com

We, _____ and _____ do solemnly swear that
we are registered voters and members of the same Party and are from the district or jurisdiction from which the
candidate for Lieutenant Governor seeks nomination; and that we believe
_____ to be qualified to fill the Office of Lieutenant Governor.
(Name of Candidate for Lieutenant Governor - Please Type or Print)

(Signature of Voter) (County) (Residential Address) (City) (Zip)

(Signature of Voter) (County) (Residential Address) (City) (Zip)

Subscribed and sworn to before me by _____ and _____
(Name of Voter)

this _____ day of _____, 20____
(Month)

(Signature of Notary/Officer) (Title of Officer) (Commission Expiration)



RECEIVED AND FILED

DATE January 26, 2015
do solemnly swear that

We, _____ and _____
we are registered voters and members of the same Party and are from the district or jurisdiction from which the
candidate for Governor seeks nomination; and that we believe _____
to be qualified to fill the Office of Governor.

ALISON LUNDERGAN GRIMES
SECRETARY OF STATE
COMMONWEALTH OF KENTUCKY
BY Mary Sue Bell

(Signature of Voter) (County) (Residential Address) (City) KY (Zip)

(Signature of Voter) (County) (Residential Address) (City) KY (Zip)

Subscribed and sworn to before me by _____ and _____
(Name of Voter) (Name of Voter)
_____ this _____ day of _____, 20____.
(Name of Voter) (Month)

(Signature of Notary/Officer) (Title of Officer) (Commission Expiration)

We, Alicia D. Webb-Edgington and _____ do solemnly swear that
we are registered voters and members of the same Party and are from the district or jurisdiction from which the
candidate for Lieutenant Governor seeks nomination; and that we believe
K. C. Crosbie
(Name of Candidate for Lieutenant Governor - Please Type or Print) to be qualified to fill the Office of Lieutenant Governor.

Alicia D. Webb-Edgington Kenton 1184 Shawano Dr. Covington KY 41011
(Signature of Voter) (County) (Residential Address) (City) (Zip)

(Signature of Voter) (County) (Residential Address) (City) KY (Zip)

Subscribed and sworn to before me by Alicia Webb-Edgington and _____
(Name of Voter) (Name of Voter)
_____ this 25 day of January, 2015.
(Name of Voter) (Month)
Donna Reese Notary May 27, 2016
(Signature of Notary/Officer) (Title of Officer) (Commission Expiration)



RECEIVED AND FILED
DATE January 26, 2015
do solemnly swear that

We, _____ and _____
we are registered voters and members of the same Party and are from the district or jurisdiction from which the
candidate for Governor seeks nomination; and that we believe _____
to be qualified to fill the Office of Governor.

ALISON LUNDERGAN GRIMES
SECRETARY OF STATE
COMMONWEALTH OF KENTUCKY
BY Mary Sue [Signature]
KY _____
(Zip)

(Signature of Voter) (County) (Residential Address) (City) (Zip)

(Signature of Voter) (County) (Residential Address) (City) (Zip)

Subscribed and sworn to before me by _____ and _____
(Name of Voter) (Name of Voter)
_____ this _____ day of _____, 20____.
(Name of Voter) (Month)

(Signature of Notary/Officer) (Title of Officer) (Commission Expiration)

We, Alecia D. Webb-Edgington and _____ do solemnly swear that
we are registered voters and members of the same Party and are from the district or jurisdiction from which the
candidate for Lieutenant Governor seeks nomination; and that we believe
K. C. Crosbie
(Name of Candidate for Lieutenant Governor - Please Type or Print)
to be qualified to fill the Office of Lieutenant Governor.

[Signature] Kenton 1184 Shawano Dr. Covington KY 41011
(Signature of Voter) (County) (Residential Address) (City) (Zip)

(Signature of Voter) (County) (Residential Address) (City) (Zip)

Subscribed and sworn to before me by Alecia Webb-Edgington and _____
(Name of Voter) (Name of Voter)
_____ this 29 day of January, 2015.
(Name of Voter) (Month)
[Signature] Notary May 27, 2016
(Signature of Notary/Officer) (Title of Officer) (Commission Expiration)



RECEIVED AND FILED

DATE January 26, 2015
do solemnly swear that

We, Mira Ball and _____
we are registered voters and members of the same Party and are from the district or jurisdiction from which the
candidate for Governor seeks nomination; and that we believe Hal Heiner ALISON LUNDERGAN GRIMES
(Name of Candidate for Governor - Please Type or Print) SECRETARY OF STATE
to be qualified to fill the Office of Governor. COMMONWEALTH OF KENTUCKY

Mira Ball Jayette 4151 Old Frankfort Rd.
(Signature of Voter) (County) (Residential Address) (City) KY 40510
(Zip)

(Signature of Voter) (County) (Residential Address) (City) KY (Zip)

Subscribed and sworn to before me by Mira Ball and _____
(Name of Voter) (Name of Voter)

this 22nd day of January, 2015
(Month)

Neil Daniel Notary 2/29/16
(Signature of Notary/Officer) (Title of Officer) (Commission Expiration)

We, ROGER SCHOTT and _____
do solemnly swear that
we are registered voters and members of the same Party and are from the district or jurisdiction from which the
candidate for Lieutenant Governor seeks nomination; and that we believe

K.C. Crosbie to be qualified to fill the Office of Lieutenant Governor.
(Name of Candidate for Lieutenant Governor - Please Type or Print)

Roger Schott Laurel 415 W 131st
(Signature of Voter) (County) (Residential Address) (City) KY 40141
(Zip)

(Signature of Voter) (County) (Residential Address) (City) KY (Zip)

Subscribed and sworn to before me by Roger Schott and _____
(Name of Voter) (Name of Voter)

this 22 day of January, 2015
(Month)

David Bye Notary 7-31-16
(Signature of Notary/Officer) (Title of Officer) (Commission Expiration)



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
RECEIVED AND FILED
DATE January 26, 2015

SLATE OF CANDIDATES
APPOINTMENT OF CAMPAIGN TREASURER ALISON LUNDERGAN GRIMES

Please Type or Print
This form does not constitute registering a campaign committee

SECRETARY OF STATE
COMMONWEALTH OF KENTUCKY
BY [Signature]

CANDIDATE INFORMATION

(Slate is responsible for notifying the Registry of any change of information)

Hal Heiner
Candidate for Governor

15101 Percy Mill Rd.
Mailing Address

Louisville KY 40245
City State Zip

(502) 366-2460 () -
Daytime Phone Alternate Phone

10/31/1951
Candidate's Date of Birth

Party Affiliation: Democrat Republican Independent Other _____

K.C. Crasbie
Candidate for Lt. Governor

3604 Burdick Tree Ln.
Mailing Address

Lexington KY 40509
City State Zip

(502) 366-2460 () -
Daytime Phone Alternate Phone

11/26/1969
Candidate's Date of Birth

TREASURER AND DEPOSITORY INFORMATION

David Henderman
Treasurer's Name

304 Whittington Plwy Ste. 107
Mailing Address

Louisville KY 40222
City State Zip

(502) 425-4800 () -
Daytime Phone Alternate Phone

CAMPAIGN DEPOSITORY (Depository must be a financial institution authorized to do business in Kentucky and insured by the Federal Deposit Insurance Corporation.)

Commonwealth Bank & Trust Company
Name of Financial Institution intended for use as Campaign Depository

12906 Shelbyville Rd. Louisville, KY 40253
Address of Financial Institution intended for use as Campaign Depository

SIGNATURES

We hereby certify that the foregoing is our act and deed.

[Signature]
Signature - Candidate for Governor

1/26/15
Date

[Signature]
Signature - Candidate for Lt. Governor

1/26/15
Date

[Signature]
Signature - Treasurer for Slate

1/24/15
Date

KREF 001/G Revised 05/2005 FILING OFFICER: Attach original to filing papers and send duplicate copy immediately to the Registry.





RECEIVED AND FILED
DATE January 13, 2015

NOTIFICATION AND DECLARATION ALISON LUNDERGAN GRIMES

SECRETARY OF STATE

COMMONWEALTH OF KENTUCKY
Mary Sue Helm

Of Will T. Scott and Rodney Coffey
(Name of Candidate for Governor - Please Type or Print) (Name of Candidate for Lieutenant Governor - Please Type or Print)

for nomination to the Office of Governor and Lieutenant Governor.

To SOS
(Secretary of State)

For the purpose of having our names placed on the official primary election ballot as a slate of candidates for

Governor and Lieutenant Governor for nomination by the Republican Party,

I, Will T. Scott
(Name of Candidate for Governor in full as desired on the Ballot as provided in KRS 118.129)

do solemnly swear that my residence is 2718 Millers Creek Road
(Residential Address)

Pikeville Pike KY 41501
(City, if applicable) (County) (Zip)

that my mailing address, if different, is PO Box 1316 Pikeville KY 41501
(Post Office Address) (City) (Zip)

and that I am a registered Republican voter in Lower Johns Creek precinct;
(Party)

I, Rodney Coffey
(Name of Candidate for Lieutenant Governor in full as desired on the Ballot as provided in KRS 118.129)

do solemnly swear that my residence is 1202 Hidden Hollow Road
(Street, Highway, Route)

Frenchburg Menifee KY 40322
(City, if applicable) (County) (Zip)

that my mailing address, if different, is PO Box 310 Frenchburg KY 40322
(Post Office Address) (City) (Zip)

and that I am a registered Republican voter in Means precinct;
(Party)

that we believe in the principles of the Republican Party, and intend to support its principles and policies; that we will accept the nomination and not withdraw for reasons other than those stated in KRS 118.105(3); that we will not knowingly violate any election law or any law relating to corrupt and fraudulent practice in campaigns or elections in this state, and if finally elected we will qualify for our offices.

Will T. Scott
(Signature of Candidate for Governor)

Subscribed and sworn to before me by Will T. Scott
(Name of Candidate for Governor)

this 13th day of January, 20 15

Mary Sue Helm
(Signature of Notary/Officer)

Notary
(Title of Officer)

January 25, 2015
(Commission Expiration)

Rodney Coffey
(Signature of Candidate for Lieutenant Governor)

Subscribed and sworn to before me by Rodney Coffey
(Name of Candidate for Lieutenant Governor)

this 13th day of January, 20 15

Mary Sue Helm
(Signature of Notary/Officer)

Notary
(Title of Officer)

January 25, 2015
(Commission Expiration)

RECEIVED AND FILED

DATE January 13, 2015

We, Andrew H. Scott and Roger D. Ford do solemnly swear that we are registered voters and members of the same Party and are from the district or jurisdiction from which the candidate for Governor seeks nomination; and that we believe Will T. Scott to be qualified to fill the Office of Governor.

ALISON LUNDERGAN, GIMES
SECRETARY OF STATE
COMMONWEALTH OF KENTUCKY

[Signature] (Signature of Voter) PIKE (County) 720 Ruffin Br. Rd. (Residential Address) Pikeville (City) KY (Zip) 41501
[Signature] (Signature of Voter) PIKE (County) 126 Walnut St. (Residential Address) Pikeville (City) KY (Zip) 41501

Subscribed and sworn to before me by Andrew H. Scott and Roger D. Ford (Name of Voter)

this 13th day of January, 2015 (Month)

[Signature] (Signature of Notary/Officer) Notary (Title of Officer) January 25, 2015 (Commission Expiration)

We, Elizabeth J. Coffey and Casey M. Trusty do solemnly swear that we are registered voters and members of the same Party and are from the district or jurisdiction from which the candidate for Lieutenant Governor seeks nomination; and that we believe Rodney Coffey to be qualified to fill the Office of Lieutenant Governor.

[Signature] (Signature of Voter) Menifee (County) 1202 Hidden Hill Rd. (Residential Address) Frenchburg (City) KY (Zip) 40322
[Signature] (Signature of Voter) Menifee (County) 1261 Hidden Hill Rd. (Residential Address) Frenchburg (City) KY (Zip) 40322

Subscribed and sworn to before me by Elizabeth J. Coffey and Casey M. Trusty (Name of Voter)

this 13th day of January, 2015 (Month)

[Signature] (Signature of Notary/Officer) Notary (Title of Officer) January 25, 2015 (Commission Expiration)



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

January 13, 2015

REGISTRY USE

SLATE OF CANDIDATES
 APPOINTMENT OF CAMPAIGN TREASURER

This form does not constitute registering a campaign committee

By Will T. Scott

Logged _____

Keyed _____

CANDIDATE INFORMATION

(State is responsible for notifying the Registry of any change of information)

Will T. Scott
 Candidate for Governor

PO Box 1316
 Mailing Address

Pikeville Ky 41501
 City State Zip

606 432-8803 (606) 434-1166
 Daytime Phone Alternate Phone

07/20/1947
 Candidate's Date of Birth

Rodney Coffey
 Candidate for Lt. Governor

PO Box 310
 Mailing Address

Frenchburg Ky 40322
 City State Zip

606 768-6408 (606) 359-1949
 Daytime Phone Alternate Phone

06/17/1970
 Candidate's Date of Birth

Party Affiliation: Democrat Republican Independent Other _____

TREASURER AND DEPOSITORY INFORMATION

Roger Ford
 Treasurer's Name

PO Box 1316
 Mailing Address

Pikeville Ky 41501
 City State Zip

606 257-4248 (606) 351-3576
 Daytime Phone Alternate Phone

CAMPAIGN DEPOSITORY (Depository must be a financial institution authorized to do business in Kentucky and insured by the Federal Deposit Insurance Corporation.)

Community Trust Bank
 Name of Financial Institution intended for use as Campaign Depository

US 23 North Pikeville Ky 41501
 Address of Financial Institution intended for use as Campaign Depository

SIGNATURES

We hereby certify that the foregoing is our act and deed.

Will T. Scott
 Signature - Candidate for Governor

1/13/2015
 Date

Rodney Coffey
 Signature - Candidate for Lt. Governor

1-13-2015
 Date

Roger Ford
 Signature - Treasurer for Slate

1-13-2015
 Date

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117.305 Recanvass of votes -- Test of machines -- Candidates and representatives of political parties and news media to observe recanvass -- Forms for reporting recanvassed vote -- Administrative regulations for recanvass procedures.

- (1) The canvass and returns provided for in KRS 117.275 shall constitute the official returns of the precinct, unless before 4 p.m. on the Tuesday following a primary or regular election, or before 4 p.m. on the day following a special election held for the purpose of filling a vacancy, the county clerk or county board of elections takes notice of a discrepancy in the tally of votes cast in any precinct or number of precincts, or a candidate makes a written request to the county board of elections in the case of a candidate who has filed with the county clerk, or the Secretary of State in the case of a candidate who has filed with the Secretary of State, to check and recanvass the voting machines and absentee ballots of any precinct or any number of precincts involving his race. After this time period has elapsed and notice is taken, the county election board shall assemble at 9 a.m. on the Thursday following the filing deadline to request a recanvass, and not sooner, and recheck and recanvass each machine and make a proper return thereof to the county clerk, and the canvass and return shall become the official returns for the election. In making the recanvass, the board shall make a record of the number of the seal upon the voting machine and, without unlocking the machine against voting, recanvass the vote cast thereon. If, after a recanvass, it is found that the original canvass of the returns has been correctly made from the machine, and that there still remains a discrepancy unaccounted for, this discrepancy shall be noted. If, upon recanvass, it appears that the original canvass of the returns by the election officers was incorrect, the returns and all papers being prepared by the board shall be corrected accordingly. The county board of elections shall, immediately upon receipt of a request for a recanvass, notify each candidate for the office of the time and place of the recanvass. At the recanvass, each political party represented on the board may appoint a representative there to be its governing body, and also each candidate to be voted for may be present, either in person or by a representative or both. The county board of elections shall authorize representatives of the news media to observe the recanvass of the votes cast on the voting machine in each precinct. Nothing in this section shall prohibit an individual from requesting, in addition to a recanvass, a recount as authorized by KRS Chapter 120.
- (2) The State Board of Elections shall prescribe forms to be used by county boards of election to report all recanvassed votes. The form shall include the following information:
 - (a) The name of the county in which the recanvass was conducted;
 - (b) The date of the report;
 - (c) The date of the election;
 - (d) The office for which the recanvass was conducted;
 - (e) The names of each candidate for the office being recanvassed; and
 - (f) The machine votes, absentee votes, and vote totals for each candidate, as well as write-in votes cast in a regular or special election for candidates whose names did not appear on the ballot.The report shall be signed by each member of the county board of elections.
- (3) The county board of elections shall file its recanvass report as prescribed in administrative regulations promulgated by the State Board of Elections in conformity with KRS Chapter 13A.
- (4) The State Board of Elections shall promulgate administrative regulations in accordance with KRS Chapter 13A to establish the proper procedures for conducting a recanvass for each type of voting system approved by the State Board of Elections and in use in Kentucky.

Effective: July 14, 2000

History: Amended 2000 Ky. Acts ch. 494, sec. 1, effective July 14, 2000. -- Amended 1992 Ky. Acts ch. 296, sec. 5, effective July 14, 1992; and ch. 421, sec. 1, effective July 14, 1992. -- Amended 1990 Ky. Acts ch. 48, sec. 51, effective July 13, 1990. -- Amended 1986 Ky. Acts ch. 470, sec. 16, effective July 15, 1986. -- Amended 1982 Ky. Acts ch. 268, sec. 1, effective July 15, 1982; and ch. 394, sec. 17, effective July 15, 1982. -- Amended 1978 Ky. Acts ch. 384, sec. 250, effective June 17, 1978. -- Amended 1976 Ky. Acts ch. 130, sec. 2, effective June 19, 1976. -- Created 1974 Ky. Acts ch. 130, sec. 44, effective June 21, 1974.

31 KAR 4:070. Recanvass procedures.

RELATES TO: KRS 117.305, 118.425

STATUTORY AUTHORITY: KRS 117.015(1)(a), 117.305(2), (3), (4)

NECESSITY, FUNCTION, AND CONFORMITY: KRS 117.015(1)(a) authorizes the State Board of Elections to promulgate administrative regulations necessary to properly carry out its duties. KRS 117.305(2) requires the State Board of Elections to prescribe forms to be used by county boards of elections to report all recanvassed votes, KRS 117.305(3) requires that the board promulgate administrative regulations to set reporting standards for recanvass reports, and KRS 117.305(4) requires that the board promulgate administrative regulations to establish the proper procedures for conducting a recanvass for each type of voting system approved by the board and in use in Kentucky. This administrative regulation establishes the reporting form to be used in the event of a recanvass, reporting standards for an election if a recanvass is requested and received in a timely manner, and establishes the proper procedures for conducting a recanvass on the approved voting systems in use in Kentucky.

Section 1. (1) The Recanvass of Official Count and Record of Election Totals form, SBE 49A, shall be used by the county board of elections to report all recanvassed votes.

(2) The county board of elections shall state the name of the county in which the recanvass is being conducted, the date of the report, the date of the election, the office for which the recanvass is being made, the name of each candidate for the office being recanvassed, and the machine votes, absentee votes, provisional votes and total votes for each candidate. The report shall be signed by each member of the county board of elections.

Section 2. (1) The county board of elections shall file its recanvass report, SBE 49A, immediately upon completion of the recanvass for those vote totals reported to the Secretary of State, pursuant to KRS 118.425(3).

(2) The county board of elections shall file its recanvass report, SBE 49A, immediately upon completion of the recanvass for the vote totals reported to the county clerk, pursuant to 118.425(2).

Section 3. If KRS 117.305(1) requires a recanvass, the provisions established in this section shall apply.

(1) In a general election, the county board of elections shall only check and tabulate the votes of the candidate requesting a recanvass and each opposing candidate seeking the same office.

(2) In a partisan primary election, the county board of elections shall only check and tabulate the votes of the candidate requesting a recanvass and each opposing candidate of the same political party seeking the same office.

(3) In a nonpartisan election, the county board of elections shall only check and tabulate the votes of the candidate requesting a recanvass and each opposing candidate seeking the same office.

Section 4. A county board of elections shall recanvass the votes recorded depending on the machine and voting method utilized, as follows:

(1) If an electronic voting system with a central tabulation system is used, the recanvass shall be taken:

(a) By clearing the system, such as by setting the tabulation system to zero and retabulating the votes recorded on the memory cartridges on election day by using the central tabulation system; or

(b) By comparing the results printout printed from each voting machine on election day with the county-wide recapitulation sheet.

(2) If an electronic voting system without a central tabulation system is used, the recanvass shall be taken by comparing the results printout printed from each voting machine on election day with the county-wide recapitulation sheet.

(3) Paper ballots, which were judged to be valid by the county board of elections on election day and which were not counted using a central tabulation system but were hand-counted on election day, shall be recanvassed by utilizing the same procedure actually used to count those paper ballots on election day following the procedures for the uniform definition of a vote established by 31 KAR 6:030.

Section 5. Incorporation by Reference. (1) "Recanvass of Official Count and Record of Elections Totals", SBE 49A, (November 2003 edition), is incorporated by reference.

(2) This material may be inspected, copied, or obtained, subject to applicable copyright law, at the State Board of Elections, 140 Walnut Street, Frankfort, Kentucky 40601, Monday through Friday, 8 a.m. to 4:30 p.m. (18 Ky.R. 555; Am. 1320; eff. 11-1-91; 22 Ky.R. 1662; eff. 5-16-96; 27 Ky.R. 3129; 28 Ky.R. 66; eff. 7-16-2001; 32 Ky.R. 1315; 1608; eff. 3-31-06.)