

**State of West Virginia
Electioneering Communications and Last Minute
Independent Expenditure Form**

(Must be filed when \$5,000 or more is spent on "electioneering communications" as detailed in WV Code §3-8-2b. A "Last Minute" report will be due when \$1,000 is spent on "electioneering communications" within 15 days of an election.)

Name of person making expenditure WVEA - PAC
Name of the individual in control of the expenditure(s) DALE LEE
Email address DLEE@WVEA.ORG Telephone 304-346-5315
Name of the custodian of the books GWENDOLYN LACY
Principal place of business and address (Only if the person making the expenditure is not an individual)
1558 QUARRIER ST. CHARLESTON, WV 25311

Electioneering communication expenditures of more than \$1,000 (as required by WV Code §3-8-2b)

Refers to: (candidate name) RITCHIE ROBB FOR STATE SENATE
Paid to RAINMAKER MEDIA
Amount of expenditure \$5,000 Date the expenditure was made 4/30/2010
Election year 2010 Made within (check one):
 30 days prior to the Primary Election 60 days prior to the General Election

Refers to: (candidate name) _____
Paid to _____
Amount of expenditure _____ Date the expenditure was made _____
Election year _____ Made within (check one):
 30 days prior to the Primary Election 60 days prior to the General Election

Refers to: (candidate name) _____
Paid to _____
Amount of expenditure _____ Date the expenditure was made _____
Election year _____ Made within (check one):
 30 days prior to the Primary Election 60 days prior to the General Election

Refers to: (candidate name) _____
Paid to _____
Amount of expenditure _____ Date the expenditure was made _____
Election year _____ Made within (check one):
 30 days prior to the Primary Election 60 days prior to the General Election

Contributors totaling more than \$1,000 from the previous calendar year to date
(as required by West Virginia Code §9-8-2b)

Name of contributor _____	Date the contributor exceeded \$250 _____
Occupation of contributor (if applicable): _____	
Value of the contribution _____	Description of contribution _____
Address: _____	
City: _____	State and Zip Code: _____
Name of contributor _____	Date the contributor exceeded \$250 _____
Occupation of contributor (if applicable): _____	
Value of the contribution _____	Description of contribution _____
Address: _____	
City: _____	State and Zip Code: _____
Name of contributor _____	Date the contributor exceeded \$250 _____
Occupation of contributor (if applicable): _____	
Value of the contribution _____	Description of contribution _____
Address: _____	
City: _____	State and Zip Code: _____
Name of contributor _____	Date the contributor exceeded \$250 _____
Occupation of contributor (if applicable): _____	
Value of the contribution _____	Description of contribution _____
Address: _____	
City: _____	State and Zip Code: _____

OATH OR AFFIRMATION

I, DALE LEE, swear or affirm that the attached statement is true and correct, to the best of my knowledge, for all financial transactions occurring within the period covered by this statement.

Office Use Only

SECRETARY OF STATE

RECEIVED

APR 30 PM 2:07

Signature Dale Lee

Date 4/30/2010

This form must be received in the Secretary of State's Office prior to the close of business to be accepted on that date.