

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 WV Laborers' District Council PAC

Name of the individual in control of the expenditure(s) Gary Tillis - Chairman

Email address garytillis@wuldc.org Telephone 204-346-0581

Name of the custodian of the books Wetzel C. Harvey

Principal place of business and address (Only if the person making the expenditure is not an individual)

ONE Union Square, Suite 5, Charleston WV 25302

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

Refers to: (candidate name) Support of ~~the~~ Archie Robb

Paid to Brainmaker Media Group

Amount of expenditure \$10,000 Date the expenditure was made May 7 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 §3-8-2b)

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: _____

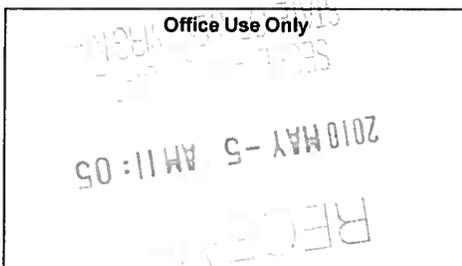
Name of contributor _____ Date the contributor exceeded \$250 _____
Occupation of contributor (if applicable): _____
Value of the contribution _____ Description of contribution _____
Address: _____
City: _____ State and Zip Code: _____

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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, Mary O. Tillis, 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.



Signature Mary O Tillis

Date May 5, 2002010

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