10/14/2010

NO.304

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 W Building & Construction Trades AAC
Name of the individual in control of the expenditure(s) Lavid Efact
Email address Clave e Tau CWV5bY 2015 Telephone 304-346-1367
Name of the custodien of the books David Efac
Principal place of business and address (Only if the person making the expenditure is not an individual)
600 Leon Sullivan Way, Charleston UV 25301
Electioneering communication expenditures of more than \$1,000 (as required by WV Code §3-8-2b)
Refers to: (candidate name) In foling
Paid to fac /11/1/25 Grovi)
Amount of expenditure \$5.068,77 Date the expenditure was made 10.13.10
Election year \(\square \(\square \) \(\square \) Made within (check one):
30 days prior to the Primary Election 60 days prior to the General Election
Refers to: (candidate-pame) // All Wills & Kongld Miller
Paid to The Phi//175 (2001)
Amount of expenditure 1/2/80 Date the expenditure was made 10.13.10
Hection year Made within (check one):
30 days prior to the Primary Election 60 days prior to the General Election
Refers to: (candidate game) // Can Carpicane
Paid to The Milling Grown
Amount of expenditure 32.10 Date the expenditure was made 10.13.10
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
Election yearMade within (check one):
30 days prior to the Primary Election 60 days prior to the General Election

P02

13:34

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
	cable):
	Description of contribution
Address:	
City:	State and Zip Code:
Name of contributor	Date the contributor exceeded \$250
	cable):
Value of the contribution	Description of contribution
	State and Zip Code:
Name of contributor	Date the contributor exceeded \$250
	able);
	Description of contribution
	State and Zip Code:
Name of contributor	Date the contributor exceeded \$250
	able):
	Description of contribution
Address:	
City:	State and Zip Code:
OATHORAFFIRMATION	
DAVIN A FFAM	
to the best of my knowledge, for all financia	swear or affirm that the attached statement is true and correct transactions occurring within the period covered by this statement.
STATE TO MAIN TO FTATE	
12:5 MJ Office Use Only	A VINCE)
12:5 Md 7/ 130 010Z	Signature
19/1977	Date 10-13 20#0
7079	This form must be received in the Secretary of State's Office

prior to the close of business to be accepted on that date.