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 <u>West Virginia</u> AFL-CIO			
Name of the individual in control of the expenditure(s) Larry K. Matheney			
Emailaddress <u>lmatheney@wvaflcio.org</u> Telephone 304-344-3557			
Name of the custodian of the books Larry K. Matheney			
Principal place of business and address (Only if the501 Leon Sullivan Way Charles	the person making the expenditure is not an individual) ston WV 25301		
Electioneering communication expend	nditures of more than \$1,000 (as required by WV Code §3-8-2b)		
Refers to: (candidate name) Jo Bogge Paid to Jackson Newspapers	ess Phillips		
Amount of expenditure 903.00	•		
Election year 2010	Made within (check one):		
30 days prior to the Primary Election	X 60 days prior to the General Election		
Refers to: (candidate name)Paid to	ျှင်းသည်။ မျှောင်း မျှောင်း မေးကို မြောင်း မေးကို		
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)

Value of the contribution	Description of contribution	
	State and Zip Code:	
Occupation of contributor (if applicable): Value of the contribution	Date the contributor exceeded \$250	
	Description of contribution	
	State and Zip Code	
Name of contributor Occupation of contributor (if applicable): Value of the contribution	Date the contributor exceeded \$250	
	Description of contribution	
	State and Zip Code:	
Occupation of contributor (if applicable): Value of the contribution Address: City:	Date the contributor exceeded \$250	
	Description of contribution	
	State and Zip Code	
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Lakey K Matheney	swear or affirm that the attached statement is true and correct
to the best of my knowledge, for all financial transactions occurring wi	ithin the period covered by this statement.
to the best of my knowledge, for all financial transportations observing	

Office Use Only

Signature

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