State of West Virginia Electioneering Communications Form

Must be filed when \$5,000 or more is spent on "electioneering communications" as detailed in WV Code §3-8-2b.

	g the disbursement for the electioneering communication." NVP arty @ wvdortcorats, com Telephone 342-812
Email E	Telephone 570 6707
of the custodian of the books Devek Sc	
pal place of business and address (Only if the per	Charleston WV 25301
	nditures of more than \$1,000 (as required by WV Code §3-8
	ay Tomblin
Paid to Direct Mail Common	ications
Amount of expenditure \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	Date the expenditure was made 9/28/11
Election year 2011	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

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 WS1. Dem. Ex. Comm. Date the contributor exceeded \$250 9/28/11
Occupation of contributor (if applicable):
Value of the contribution #31,490 Description of contribution
Address: 717 Lee St. Ste. 214, Charleston WV 25301
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:
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I,
Office Use Only Signature Date 9/29 200 //
OS : STATE OF THE PARTY OF THE SECRETARY OF STATE OF STAT
prior to the close of business to be accepted on that date.

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