## CFIF

## 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 expenditureCenter for	r Individual Freedom
Name of the individual in control of the expendit	
Email address info@cfif.org	Telephone (703) 535-5836
Name of the custodian of the books Virginia Sa	
· I	the person making the expenditure is not an individual)
Electioneering communication expen	ditures of more than \$1,000 (as required by WV Code §3-8-2b)
Refers to: (candidate name) Attorney Gen	eral Darrell McGraw
Amount of expenditure \$1,599,949.50	Date the expenditure was made October 17, 2012
Election year 2012	Made within (check one):
30 days prior to the Primary Election	60 days prior to the General Election
Paid to	Date the expenditure was made  Made within (check one):  60 days prior to the General Election
Amount of expenditure	Date the expenditure was made
Election year	
30 days prior to the Primary Election	60 days prior to the General Election
Paid to	
Amount of expenditure	Date the expenditure was made
20 days prior to the Primary Election	Made within (check one):  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 app	licable):	
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 appl	licable):	
Value of the contribution	Description of contribution	
Address:		
	State and Zip Code:	
Name of contributor		
Occupation of contributor (if applied	Date the contributor exceeded \$250	
Value of the contribution	icable):	
Address:	Description of contribution	
City:	State and Zip Code:	
Name of contributor  Occupation of contributor (if applie	Date the contributor exceeded \$250	
Value of the contribution	Description of contribution	
City:	State and Zip Code:	
	OATH OR AFFIRMATION	
Jeffrey ]	Mazzella	
correct, to the best of my knowledge, for all	financial transactions occurring within the period covered by this statement.	
Office Use Only	TW-T-	
	Signature	
	Date 17-Oct 20 12	
CIN SI	This form must be received in the Secretary of Stately Com.	
	prior to the close of business to be accepted on that date	

917-B King Street Alexandria, VA 22314 703-535-5836 703-535-5838 (fax)

## Center for Individual Freedom



To: Office of the Secretary of State	From: Center for Individual Fre
Fax: 304-558-8586	Pages: 3 W/cover
Phone:	Date: 10-17-2012
Re: Electioncering Communication	orjc:
Grungent □ For Review □ Please Co	
Comments:	