

State of West Virginia
Electroneering 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 Just Courts for WV PAC

Name of the individual in control of the expenditure(s) Daniel Selby

Email address dselby3723@aol.com Telephone 304-562-5611

Name of the custodian of the books Daniel Selby

Principal place of business and address (Only if the person making the expenditure is not an individual)
23 Chase Drive, Hurricane WV 25526

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

Refers to: (candidate name) <u>Oppose Beth Walker - Dissemination Date: May 2, 2016</u>	
Paid to <u>Blue West Media</u>	
Amount of expenditure <u>\$20,000</u>	Date the expenditure was made <u>4/25/16</u>
Election year <u>2016</u>	Made within (check one):
<input checked="" type="checkbox"/> 30 days prior to the Primary Election	<input type="checkbox"/> 60 days prior to the General Election

Refers to: (candidate name) <u>Oppose Beth Walker - Dissemination Date: May 2, 2016</u>	
Paid to <u>Blue West Media</u>	
Amount of expenditure <u>\$100,000</u>	Date the expenditure was made <u>4/26/16</u>
Election year <u>2016</u>	Made within (check one):
<input checked="" type="checkbox"/> 30 days prior to the Primary Election	<input type="checkbox"/> 60 days prior to the General Election

Refers to: (candidate name) <u>Oppose Beth Walker - Dissemination Date: May 2, 2016</u>	
Paid to <u>Blue West Media</u>	
Amount of expenditure <u>\$60,000</u>	Date the expenditure was made <u>4/28/16</u>
Election year <u>2016</u>	Made within (check one):
<input checked="" type="checkbox"/> 30 days prior to the Primary Election	<input type="checkbox"/> 60 days prior to the General Election

Refers to: (candidate name) <u>Oppose Beth Walker - Dissemination Date: 5/02/16</u>	
Paid to <u>Blue Wave Media</u>	
Amount of expenditure <u>\$20,000</u>	Date the expenditure was made <u>4/29/16</u>
Election year <u>2016</u>	Made within (check one):
<input checked="" type="checkbox"/> 30 days prior to the Primary Election	<input type="checkbox"/> 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 Powell & Majestro Date the contributor exceeded \$250 4/25/16
Occupation of contributor (if applicable): _____
Value of the contribution \$10,000 Description of contribution Check
Address: 405 Capitol Street
City: Charleston State and Zip Code: WV 25301

Name of contributor Pauley Curry Date the contributor exceeded \$250 3/24/16
Occupation of contributor (if applicable): Attorney
Value of the contribution \$10,000 Description of contribution Check
Address: PO Box 2786
City: Charleston State and Zip Code: WV 25330

Name of contributor Fitzimmons Law Firm Date the contributor exceeded \$250 4/22/16
Occupation of contributor (if applicable): _____
Value of the contribution \$50,000 Description of contribution Check
Address: 1609 Warwood Ave
City: Wheeling State and Zip Code: WV 26003

Name of contributor Ben Salango Date the contributor exceeded \$250 _____
Occupation of contributor (if applicable): Attorney
Value of the contribution \$2,500 Description of contribution Check
Address: _____
City: Charleston State and Zip Code: WV 25301

OATH/AFFIRMATION

I, Daniel C. Selby, 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.

Office Use Only

Signature Daniel C. Selby
Date 5-3, 2016

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

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 Plante & Associates Date the contributor exceeded \$250 4/27/16
Occupation of contributor (if applicable): _____
Value of the contribution \$1,000 Description of contribution Check
Address: PO Box 11427
City: Charleston State and Zip Code: WV 25339

Name of contributor WV Fair Courts Date the contributor exceeded \$250 3/31/16
Occupation of contributor (if applicable): _____
Value of the contribution \$500 Description of contribution Check
Address: 23 Chase Drive
City: Hurricane State and Zip Code: WV 25526

Name of contributor Jane Peak Date the contributor exceeded \$250 04/27/16
Occupation of contributor (if applicable): Attorney
Value of the contribution \$1,500 Description of contribution Wire
Address: 174 Chancery Row
City: Morgantown State and Zip Code: WV 26505

Name of contributor Compensation Strategies Date the contributor exceeded \$250 4/27/16
Occupation of contributor (if applicable): _____
Value of the contribution \$1,000 Description of contribution Check
Address: 18 California Avenue
City: Charleston State and Zip Code: WV 25311

OATH OR AFFIRMATION

I, Daniel L. Selby 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.

Office Use Only

Signature Daniel L Selby
Date 5-3-16, 20

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

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 Chiropractors Independent PAC Date the contributor exceeded \$250 4/27/16
Occupation of contributor (if applicable): _____
Value of the contribution \$1,000 Description of contribution Check
Address: 18 California Avenue
City: Charleston State and Zip Code: WV 25311

Name of contributor The Masters Law Firm Date the contributor exceeded \$250 4/20/16
Occupation of contributor (if applicable): _____
Value of the contribution \$50,000 Description of contribution Check
Address: 181 Summers Street
City: Charleston State and Zip Code: WV 25301

Name of contributor Richards Lindsay II Date the contributor exceeded \$250 4/28/16
Occupation of contributor (if applicable): Attorney
Value of the contribution \$500 Description of contribution Check
Address: PO Box 1269
City: Charleston State and Zip Code: WV 25325

Name of contributor FACS Law Date the contributor exceeded \$250 4/28/16
Occupation of contributor (if applicable): _____
Value of the contribution \$5,000 Description of contribution Wire
Address: 21 12th Street
City: Wheeling State and Zip Code: WV 26003

OATH OR AFFIRMATION

I, Amber L. Selby, 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.

Office Use Only

Signature Daniel J. Selby
Date 5-3, 2016

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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	<u>Linda Garrett</u>	Date the contributor exceeded \$250	<u>4/28/16</u>
Occupation of contributor (if applicable):	<u>Attorney</u>		
Value of the contribution	<u>\$1,000</u>	Description of contribution	<u>Wire</u>
Address:	<u>704 Professional Park Drive</u>		
City:	<u>Summersville</u>	State and Zip Code:	<u>WV 26651</u>

Name of contributor	<u>Warren R. McGraw</u>	Date the contributor exceeded \$250	<u>4/29/16</u>
Occupation of contributor (if applicable):	<u>Attorney</u>		
Value of the contribution	<u>\$7,500</u>	Description of contribution	<u>Check</u>
Address:	<u>PO Box 279</u>		
City:	<u>Prosperity</u>	State and Zip Code:	<u>WV 25909</u>

Name of contributor	<u>Daniel Guida</u>	Date the contributor exceeded \$250	<u>4/28/16</u>
Occupation of contributor (if applicable):	<u>Attorney</u>		
Value of the contribution	<u>\$300</u>	Description of contribution	<u>Check</u>
Address:	<u>324 Sunrise Drive</u>		
City:	<u>Weirton</u>	State and Zip Code:	<u>WV 26062</u>

Name of contributor	<u>Peggy McGraw</u>	Date the contributor exceeded \$250	<u>4/29/16</u>
Occupation of contributor (if applicable):	<u>Retired</u>		
Value of the contribution	<u>\$7,500</u>	Description of contribution	<u>Check</u>
Address:	<u>PO Box 534</u>		
City:	<u>Pineville</u>	State and Zip Code:	<u>WV 24874</u>

OATH OR AFFIRMATION

I, Daniel L. Selby, 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.

Office Use Only

Signature Daniel L. Selby
Date 5-3, 2016

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Contributors totaling more than \$1,000 from the previous calendar year to date
(as required by West Virginia Code §3-9-2b)

Name of contributor Maroney Williams Weaver & Pancake Date the contributor exceeded \$250 5/02/16
Occupation of contributor (if applicable): _____
Value of the contribution \$1,000 Description of contribution Check
Address: 608 Virginia Street East
City: Charleston State and Zip Code: WV 25301

Name of contributor Warner Law Offices Date the contributor exceeded \$250 5/02/15
Occupation of contributor (if applicable): _____
Value of the contribution \$10,000 Description of contribution Check
Address: PO Box 3327
City: Charleston State and Zip Code: WV 25333

Name of contributor Wes Metheny Date the contributor exceeded \$250 4/26/16
Occupation of contributor (if applicable): Attorney
Value of the contribution \$5,000 Description of contribution Check
Address: 151 Walnut Street
City: Morgantown State and Zip Code: WV 26505

Name of contributor Laura Davis Date the contributor exceeded \$250 4/26/16
Occupation of contributor (if applicable): Attorney
Value of the contribution \$10,000 Description of contribution Check
Address: 115 E. Washington St.
City: Charleston State and Zip Code: WV 25414

OATH/AFFIRMATION

I, David L. Selby, 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.

Office Use Only

Signature David L. Selby
Date 5-3, 2016

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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 J. Robert Rogers Date the contributor exceeded \$250 4/29/16
Occupation of contributor (if applicable): Attorney
Value of the contribution \$5,000 Description of contribution Check
Address: PO Box 1728
City: Ponte Vedra Beach State and Zip Code: FL 32004

Name of contributor WV Optometric Physicians PAC Date the contributor exceeded \$250 4/27/16
Occupation of contributor (if applicable): _____
Value of the contribution \$1,000 Description of contribution Check
Address: 18 California Ave
City: Charleston State and Zip Code: WV 25311

Name of contributor Paul R. Cranston Date the contributor exceeded \$250 5/02/16
Occupation of contributor (if applicable): Attorney
Value of the contribution \$1,000 Description of contribution Check
Address: 1200 Dorsey Ave., Ste. 2
City: Morgantown State and Zip Code: WV 26501

Name of contributor DBD Sports, LLC Date the contributor exceeded \$250 5/02/16
Occupation of contributor (if applicable): _____
Value of the contribution \$5,000 Description of contribution Check
Address: 604 Virginia Street East
City: Charelston State and Zip Code: WV 25301

OATHORAFFIRMATION

Daniel L. Selby, 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.

Office Use Only

Signature Daniel L Selby
Date 5-3, 2016

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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: _____

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: _____

OATH OR AFFIRMATION

I, David L. Selby, 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.

Office Use Only

Signature David L. Selby
Date 5-3, 2016

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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: _____

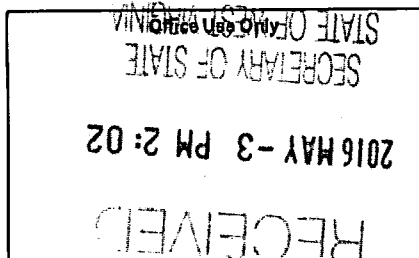
Name of contributor _____	Date the contributor exceeded \$250 _____
Occupation of contributor (if applicable): _____	
Value of the contribution _____	Description of contribution _____
Address: _____	
City: _____	State and Zip Code: _____

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: _____

OATH OR AFFIRMATION

I, Daniel C. Selby, 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 Daniel C. Selby
Date 5-3 2016

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