

State of West Virginia Independent Expenditure Reporting Form

In Relation to 2012 Election Year
(required in addition to regular campaign finance reports)

Name of person making expenditure GOPAC WEST VIRGINIA

Person(s) sharing or exercising direction or control

"Persons sharing or exercising direction or control" means officers, directors, executive directors or their equivalent, partners, and in the case of unincorporated organizations, owners, of the entity or person making the disbursement for the electioneering communication.

Name FRANK DONATELLI Email compliance@complianceconsulting.com Telephone 202-464-5170

Name _____ Email _____ Telephone _____

Name _____ Email _____ Telephone _____

Name of the custodian of the books WILLIAM JOHNSON

Principal place of business and address (Only if the person making the expenditure is not an individual)

1101 16TH ST NW, STE 400 WASHINGTON, DC 20036

Type of Filing (please choose one):

- ☐ \$1,000 single time/aggregate expenditure made within a calendar year
☐ \$500 or more expenditure for any county office or single-county judicial candidate within 15 days and before 12 hours of an election
☐ \$1,000 or more expenditure for any statewide, legislative or multi-county judicial candidate within 15 days and before 12 hours of an election
☒ \$10,000 or more anytime expenditure

Independent Expenditures

<p>Refers to: (candidate name) <u>SCOTT CABLE</u></p> <p>Paid to: <u>RED MAVERICK MEDIA</u></p> <p>Amount of Expenditure: <u>5462.59</u></p> <p>Date Expenditure was Made: <u>CONTRACTED 10/18/12</u></p> <p>Election Cycle: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special</p>
<p>Refers to: (candidate name) <u>BRIAN SCOTT</u></p> <p>Paid to: <u>RED MAVERICK MEDIA</u></p> <p>Amount of Expenditure: <u>5472.59</u></p> <p>Date Expenditure was Made: <u>CONTRACTED 10/18/12</u></p> <p>Election Cycle: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special</p>
<p>Refers to: (candidate name) <u>STANLEY SHAYER</u></p> <p>Paid to: <u>RED MAVERICK MEDIA</u></p> <p>Amount of Expenditure: <u>3341.38</u></p> <p>Date Expenditure was Made: <u>CONTRACTED 10/18/12</u></p> <p>Election Cycle: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special</p>

Add additional pages as necessary

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In Relation to 2012 Election Year
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ADD'L PAGE

Name of person making expenditure GOPAC WEST VIRGINIA

Person(s) sharing or exercising direction or control

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Name _____ Email _____ Telephone _____

Name _____ Email _____ Telephone _____

Name _____ Email _____ Telephone _____

Name of the custodian of the books _____

Principal place of business and address (Only if the person making the expenditure is not an individual)

Type of Filing (please choose one):

- ☐ \$1,000 single time/aggregate expenditure made within a calendar year
☐ \$500 or more expenditure for any county office or single-county judicial candidate within 15 days and before 12 hours of an election
☐ \$1,000 or more expenditure for any statewide, legislative or multi-county judicial candidate within 15 days and before 12 hours of an election
☒ \$10,000 or more anytime expenditure

Independent Expenditures (PAGE 2)

Refers to: (candidate name) JIMMIE WOOD

Paid to: RED MAVERICK MEDIA

Amount of Expenditure: 3218.39

Date Expenditure was Made: CONTRACTED 10/18/12

Election Cycle: ☐ Primary ☒ General ☐ Special

Refers to: (candidate name) BRIAN SCOTT, SCOTT CADLE, BRADY PAXTON, HELEN MARTIN

Paid to: RED MAVERICK MEDIA

Amount of Expenditure: 5462.59

Date Expenditure was Made: CONTRACTED 10/18/12

Election Cycle: ☐ Primary ☐ General ☐ Special

Refers to: (candidate name) _____

Paid to: _____

Amount of Expenditure: _____

Date Expenditure was Made: _____

Election Cycle: ☐ Primary ☐ General ☐ Special

Add additional pages as necessary

Contributors totaling more than \$250 from the previous calendar year to date
whose contributions were made for the purpose of furthering the expenditure
(as required by West Virginia Code §3-8-2b (1)(E))

ADPT'L PAGE

Name of Contributor	<u>RICHARD BUTSCH</u>	Date the Contributor Exceeded \$250.00	<u>10/18/12</u>
Address	<u>3303 STARTAN CT, LOUISVILLE, KY 40220</u>		
Occupation of Contributor (if applicable)	<u>RETIRED</u>	Employer	
Employer Address	<u>N/A</u>		
Value of Contribution	<u>300</u>	Description of Contribution (if other than money)	
Is Contributor a PAC registered in West Virginia?	<u>NO</u>		
Name of Contributor	<u>WILLIAM B CERUTTI</u>	Date the Contributor Exceeded \$250.00	<u>10/18/12</u>
Address	<u>8046 FAIRFAX RD, ALEXANDRIA, VA 22308</u>		
Occupation of Contributor (if applicable)	<u>RETIRED</u>	Employer	
Employer Address	<u>N/A</u>		
Value of Contribution	<u>300</u>	Description of Contribution (if other than money)	
Is contributor a PAC registered in West Virginia?	<u>NO</u>		
Name of Contributor	<u>CARL DUBAC</u>	Date the Contributor Exceeded \$250.00	<u>10/18/12</u>
Address	<u>21751 NEWTOWNE NECK RD</u>		
Occupation of Contributor (if applicable)	<u>REQUESTED</u>	Employer	<u>REQUESTED INFO</u>
Employer Address	<u>REQUESTED INFO</u>		
Value of Contribution	<u>300</u>	Description of Contribution (if other than money)	
Is contributor a PAC registered in West Virginia?	<u>NO</u>		

OATH OR AFFIRMATION

Add additional pages as necessary

I, _____, 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. I also swear or affirm that all expenditures listed were made using my own money, and that no money was received by any other individual, candidate, or committee.

Office Use Only

Signature _____

Date _____, 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.

Page 2
3 OF 7

Contributors totaling more than \$250 from the previous calendar year to date
whose contributions were made for the purpose of furthering the expenditure
(as required by West Virginia Code §3-8-2b (1)(E))

ADD'L PAGE

Name of Contributor	<u>JAMES FERGUSON</u>	Date the Contributor Exceeded \$250.00	<u>10/18/12</u>
Address	<u>130 W SQUARE CT, RICHMOND, VA 23238</u>		
Occupation of Contributor (if applicable)	<u>RETIRED</u>	Employer	
Employer Address	<u>N/A</u>		
Value of Contribution	<u>300</u>	Description of Contribution (if other than money)	
Is Contributor a PAC registered in West Virginia?	<u>NO</u>		
Name of Contributor	<u>ERMA LOTIN</u>	Date the Contributor Exceeded \$250.00	<u>10/18/12</u>
Address	<u>2525 POT SPRING RD, UNIT L520, LUTHERVILLE, MD 21093</u>		
Occupation of Contributor (if applicable)	<u>RETIRED</u>	Employer	
Employer Address	<u>N/A</u>		
Value of Contribution	<u>300</u>	Description of Contribution (if other than money)	
Is contributor a PAC registered in West Virginia?	<u>NO</u>		
Name of Contributor	<u>WILLIAM THOMAS</u>	Date the Contributor Exceeded \$250.00	<u>10/18/12</u>
Address	<u>1739 KIRBY RD #114 MCLEAN, VA 22101</u>		
Occupation of Contributor (if applicable)	<u>RETIRED</u>	Employer	
Employer Address	<u>N/A</u>		
Value of Contribution	<u>300</u>	Description of Contribution (if other than money)	
Is contributor a PAC registered in West Virginia?	<u>NO</u>		

OATH OR AFFIRMATION

Add additional pages as necessary

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Page 2
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Contributors totaling more than \$250 from the previous calendar year to date
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ADD'L PAC

Name of Contributor	<u>KEITH FABER</u>	Date the Contributor Exceeded \$250.00	<u>10/18/12</u>
Address	<u>7025 DIBBLERD</u>		
Occupation of Contributor (if applicable)	<u>REQUESTED</u>	Employer	<u>REQUESTED INFO</u>
Employer Address	<u>REQUESTED INFO</u>		
Value of Contribution	<u>330</u>	Description of Contribution (if other than money)	
Is Contributor a PAC registered in West Virginia?	<u>NO</u>		
Name of Contributor	<u>SHIRLEY BAKER</u>	Date the Contributor Exceeded \$250.00	<u>10/18/12</u>
Address	<u>HC 85 BOX 307, JUMPING BRANCH, WV 25969</u>		
Occupation of Contributor (if applicable)	<u>RETIRED</u>	Employer	
Employer Address	<u>N/A</u>		
Value of Contribution	<u>390</u>	Description of Contribution (if other than money)	
Is contributor a PAC registered in West Virginia?	<u>NO</u>		
Name of Contributor	<u>MICHAEL MAY</u>	Date the Contributor Exceeded \$250.00	<u>10/18/12</u>
Address	<u>3304 RHODES AVE, APT 128, NEW BOSTON, OH 45662</u>		
Occupation of Contributor (if applicable)	<u>RETIRED</u>	Employer	
Employer Address	<u>N/A</u>		
Value of Contribution	<u>400</u>	Description of Contribution (if other than money)	
Is contributor a PAC registered in West Virginia?	<u>NO</u>		

OATH OR AFFIRMATION

Add additional pages as necessary

I, _____, 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. I also swear or affirm that all expenditures listed were made using my own money, and that no money was received by any other individual, candidate, or committee.

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Contributors totaling more than \$250 from the previous calendar year to date
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ADD'L PA

Name of Contributor	<u>JIMMY MEYER</u>	Date the Contributor Exceeded \$250.00	<u>10/18/12</u>
Address	<u>8103 ROLLING KNOLL CT, SPRINGFIELD, VA 22153</u>		
Occupation of Contributor (if applicable)	<u>REQUESTED</u>	Employer	<u>REQUESTED INFO</u>
Employer Address	<u>REQUESTED INFO</u>		
Value of Contribution	<u>400</u>	Description of Contribution (if other than money)	
Is Contributor a PAC registered in West Virginia?	<u>NO</u>		
Name of Contributor	<u>BARBARA TRUEMAN</u>	Date the Contributor Exceeded \$250.00	<u>10/18/12</u>
Address	<u>5490 HAYDEN RUN RD, HILLARD, OH 43026</u>		
Occupation of Contributor (if applicable)	<u>REQUESTED</u>	Employer	<u>REQUESTED INFO</u>
Employer Address	<u>REQUESTED INFO</u>		
Value of Contribution	<u>400</u>	Description of Contribution (if other than money)	
Is contributor a PAC registered in West Virginia?	<u>NO</u>		
Name of Contributor	<u>EDWARD LOZICK</u>	Date the Contributor Exceeded \$250.00	<u>10/18/12</u>
Address	<u>29425 CHASKIN BLVD</u>		
Occupation of Contributor (if applicable)	<u>RETIRED</u>	Employer	
Employer Address	<u>N/A</u>		
Value of Contribution	<u>500</u>	Description of Contribution (if other than money)	
Is contributor a PAC registered in West Virginia?	<u>NO</u>		

OATH OR AFFIRMATION

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Page 2

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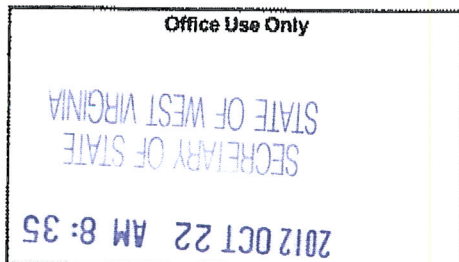
Contributors totaling more than \$250 from the previous calendar year to date
whose contributions were made for the purpose of furthering the expenditure
(as required by West Virginia Code §3-8-2b (1)(E))

Name of Contributor	<u>ZOE ROA</u>	Date the Contributor Exceeded \$250.00	<u>10/18/12</u>
Address	<u>9400 CRIMSON LEAF TERR, POTOMAC, MD 20854</u>		
Occupation of Contributor (if applicable)	<u>HOMEMAKER</u> Employer _____		
Employer Address	<u>N/A</u>		
Value of Contribution	<u>500</u>	Description of Contribution (if other than money)	_____
Is Contributor a PAC registered in West Virginia?	<u>NO</u>		
Name of Contributor	<u>BRUCE WETZEL</u>	Date the Contributor Exceeded \$250.00	<u>10/18/12</u>
Address	<u>7550 CODER RD, MAUMEE, OH 43537</u>		
Occupation of Contributor (if applicable)	<u>REAL ESTATE</u> Employer <u>SELF</u>		
Employer Address	<u>SAME AS ABOVE</u>		
Value of Contribution	<u>500</u>	Description of Contribution (if other than money)	_____
Is contributor a PAC registered in West Virginia?	<u>NO</u>		
Name of Contributor	_____	Date the Contributor Exceeded \$250.00	<u>/ /</u>
Address	_____		
Occupation of Contributor (if applicable)	_____	Employer	_____
Employer Address	_____		
Value of Contribution	_____	Description of Contribution (if other than money)	_____
Is contributor a PAC registered in West Virginia?	_____		

OATH OR AFFIRMATION

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I, WILLIAM JOHNSON, 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. I also swear or affirm that all expenditures listed were made using my own money, and that no money was received by any other individual, candidate, or committee.



Signature [Signature]
Date OCTOBER 19, 2012

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

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RECEIVED