

State of West Virginia Independent Expenditure Reporting Form

In Relation to 2014 Election Year
(required in addition to regular campaign finance reports)

Name of person making expenditure West Virginia First

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 Ruth Ann Walker Elliott Email rapmba@aol.com Telephone 304-610-5649

Name Shannon Bland Email sbland@bland-law.com Telephone 304-344-3671

Name Email Telephone

Name of the custodian of the books Ruth Ann Walker Elliott

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

PO Box 40349 Charleston, WV 25364

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

Form with three entries for independent expenditures. Entry 1: Refers to: (candidate name) Mike Manypenny, Paid to: Mission Control, Inc., Amount of Expenditure: \$3,547.04, Date Expenditure was Made: 10/18/2014. Entry 2: Refers to: (candidate name) Dolph Santorinc, Paid to: WKWK, Amount of Expenditure: \$2,331, Date Expenditure was Made: 10/18/2014. Entry 3: Refers to: (candidate name) Dolph Santorinc, Paid to: WVKL-FM, Amount of Expenditure: \$4,800, Date Expenditure was Made: 10/18/2014.

Add additional pages as necessary

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Name _____ Email _____ Telephone _____

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Independent Expenditures

| |
|---|
| Refers to: (candidate name) <u>Dolph Santorino</u> <input type="checkbox"/> For <input checked="" type="checkbox"/> Against (please check one) Paid to: <u>WKKX-AM</u> Amount of Expenditure: <u>\$960</u> Date Expenditure was Made: <u>10/18/2014</u> Election Cycle: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special |
| Refers to: (candidate name) <u>Mike MaryPerry</u> <input checked="" type="checkbox"/> For <input type="checkbox"/> Against (please check one) Paid to: <u>Mission Control, Inc.</u> Amount of Expenditure: <u>\$7,158.08</u> Date Expenditure was Made: <u>10/18/2014</u> Election Cycle: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special |
| Refers to: (candidate name) <u>Ray Canterbury</u> <input type="checkbox"/> For <input checked="" type="checkbox"/> Against (please check one) Paid to: <u>Mission Control</u> Amount of Expenditure: <u>\$11,237.54</u> Date Expenditure was Made: <u>10/18/2014</u> Election Cycle: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Special |

Add additional pages as necessary

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\$10,000 or more anytime expenditure

Independent Expenditures

Form with three sections for independent expenditures. Each section includes fields for: Refers to (candidate name), Paid to, Amount of Expenditure, Date Expenditure was Made, and Election Cycle (Primary, General, Special). The first section is filled out with: Mike Folk, Mission Control, Inc., 4,936.26, 10/18/2014, and General.

Add additional pages as necessary

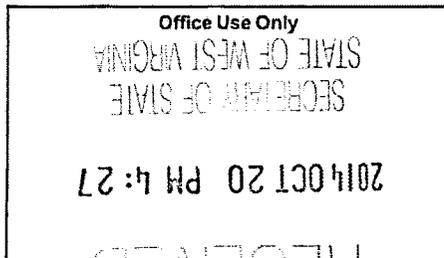
**Contributors totaling more than \$250 from the previous calendar year to date
whose contributions were made for the purpose of furthering the expenditure**
(as required by West Virginia Code §3-8-2(b) (1)(E))

| | |
|---|---|
| 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? _____ | |
| 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) _____ |
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| Name of Contributor _____ | |
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| 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

Add additional pages as necessary

 Ruth Ann Walker Elliott , 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 Ruth Ann Walker Elliott

Date 10/20/14

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