

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED SECRETARY OF THE SENATE PUBLIC RECORDS

13 JUL 13 2013 Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5
Capito For West Virginia

ADDRESS (number and street) P.O. Box 11519
Check if different than previously reported. (ACC) Charleston WV 25339

2. FEC IDENTIFICATION NUMBER C C00347849
3. IS THIS REPORT X NEW (N) OR AMENDED (A)
CITY STATE ZIP CODE STATE DISTRICT WV

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
April 15 Quarterly Report (Q1)
X July 15 Quarterly Report (Q2)
October 15 Quarterly Report (Q3)
January 31 Year-End Report (YE)
Termination Report (TER)

(b) 12-Day PRE-Election Report for the:
Primary (12P) General (12G) Runoff (12R)
Convention (12C) Special (12S)
Election on MM/DD/YYYY in the State of
(c) 30-Day POST-Election Report for the:
General (30G) Runoff (30R) Special (30S)
Election on MM/DD/YYYY in the State of

5. Covering Period 04 01 2013 through 06 30 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Mr. Reed Spangler
Signature of Treasurer M Reed Spangler Date 07 15 2013

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only grid and FEC FORM 3 (Revised 02/2003)

13020280001

**SUMMARY PAGE**

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

PAGE 2 / 323

Write or Type Committee Name  
**Capito For West Virginia**

Report Covering the Period: From:

04 / 01 / 2013

To:

06 / 30 / 2013

**COLUMN A  
This Period**

**COLUMN B  
Election Cycle-to-Date**

6. Net Contributions (other than loans)

(a) Total Contributions  
(other than loans) (from Line 11(e)) ....

763795.5

1703667.57

(b) Total Contribution Refunds  
(from Line 20(d)) .....

500

3900

(c) Net Contributions (other than loans)  
(subtract Line 6(b) from Line 6(a)) .....

763295.5

1699767.57

7. Net Operating Expenditures

(a) Total Operating Expenditures  
(from Line 17) .....

261357

457185.52

(b) Total Offsets to Operating  
Expenditures (from Line 14) .....

1811.88

(c) Net Operating Expenditures  
(subtract Line 7(b) from Line 7(a)) .....

261357

455373.64

8. Cash on Hand at Close of  
Reporting Period (from Line 27) .....

2873618.97

9. Debts and Obligations Owed **TO**  
the Committee (Itemize all on  
Schedule C and/or Schedule D) .....

10. Debts and Obligations Owed **BY**  
the Committee (Itemize all on  
Schedule C and/or Schedule D) .....

**For further information contact:**

Federal Election Commission  
 999 E Street, NW  
 Washington, DC 20463

Toll Free 800-424-9530  
 Local 202-694-1100

13020280002

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name

Capito For West Virginia

Report Covering the Period: From: 04 / 01 / 2013 To: 06 / 30 / 2013

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	483770	1089520
(ii) Unitemized .....	20027.5	56599.57
(iii) TOTAL of contributions from individuals .....	503797.5	1146119.57
(b) Political Party Committees .....	-	-
(c) Other Political Committees (such as PACs) .....	259998	557548
(d) The Candidate .....	-	-
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(ii), (b), (c), and (d))..	763795.5	1703667.57
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>		1628949.87
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate .....		
(b) All Other Loans .....		
(c) TOTAL LOANS (add Lines 13(a) and (b)) .....		
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>		1811.88
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.) .....</b>	178.98	275.17
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4) .....</b>	763974.48	3334704.49

13020280003

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	261357	457185.52
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....		
(b) Of All Other Loans .....		
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....		
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	500	1400
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		2500
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	500	3900
21. OTHER DISBURSEMENTS .....		
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	<b>261857</b>	<b>461085.52</b>

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	2371501.49
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	763974.48
25. SUBTOTAL (add Line 23 and Line 24).....	3135475.97
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	261857
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	2873618.97

13020280004

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Rohrig Heavy Equipment Maintenance LLC**

Mailing Address PO Box 4032

City	State	Zip Code
Wheeling	WV	26003

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
MM / DD / YYYY  
04 / 18 / 2013

Transaction ID : SA11AI-CN34732

Amount of Each Receipt this Period  
2600

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Joe Rohrig**

Mailing Address PO Box 4032

City	State	Zip Code
Wheeling	WV	26003

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Rohrig Heavy Equipment	Owner

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
MM / DD / YYYY  
04 / 18 / 2013

Transaction ID : SA11AI-CN34929

Amount of Each Receipt this Period  
2600

Partnership-Rohrig Heavy Equipment Mai

**[MEMO ITEM]**  
\$2600.00 MEMO Partnership Attributed

**C.** Full Name (Last, First, Middle Initial)  
**Rohrig Heavy Equipment Maintenance LLC**

Mailing Address PO Box 4032

City	State	Zip Code
Wheeling	WV	26003

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
3500

Date of Receipt  
MM / DD / YYYY  
04 / 18 / 2013

Transaction ID : SA11AI-CN34733

Amount of Each Receipt this Period  
900

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3500.00

13020280005

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Joe Rohrig</b>		Date of Receipt MM / DD / YYYY <b>04 / 18 / 2013</b>
Mailing Address <b>PO Box 4032</b>		<b>Transaction ID : SA11AI-CN34930</b>
City <b>Wheeling</b>	State <b>WV</b>	Zip Code <b>26003</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>900</b>
Name of Employer <b>Rohrig Heavy Equipment</b>	Occupation <b>Owner</b>	<b>Partnership-Rohrig Heavy Equipment Mai</b>
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>3500</b>	<b>[MEMO ITEM]</b> <b>\$900.00 MEMO Partnership Attributed</b>

Full Name (Last, First, Middle Initial) <b>Mrs. Lindsey Williams Drath</b>		Date of Receipt MM / DD / YYYY <b>06 / 30 / 2013</b>
Mailing Address <b>3273D Sutton Place NW</b>		<b>Transaction ID : SA11AI-CN35589</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20016</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer <b>Republican National Committee</b>	Occupation <b>Analyst</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

Full Name (Last, First, Middle Initial) <b>Mrs. Chrystal Adams</b>		Date of Receipt MM / DD / YYYY <b>06 / 30 / 2013</b>
Mailing Address <b>53 Meadowcrest</b>		<b>Transaction ID : SA11AI-CN35660</b>
City <b>Parkersburg</b>	State <b>WV</b>	Zip Code <b>26104</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer <b>Housewife</b>	Occupation <b>Housewife</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280006

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Elizabeth Adams</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013	
Mailing Address 52 Meadowcrest Dr		Transaction ID : SA11Ai-CN35656	
City Parkersburg	State WV	Zip Code 26101	Amount of Each Receipt this Period 2600
FEC ID number of contributing federal political committee. C			
Name of Employer housewife	Occupation Housewife		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600		

Full Name (Last, First, Middle Initial) <b>John Adams</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013	
Mailing Address 2714 Fabird Rd		Transaction ID : SA11Ai-CN35588	
City Charleston	State WV	Zip Code 25302	Amount of Each Receipt this Period 250
FEC ID number of contributing federal political committee. C			
Name of Employer Chesapeake Energy Corp.	Occupation Director		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250		

Full Name (Last, First, Middle Initial) <b>Richard Adams</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013	
Mailing Address 52 Meadowcrest Dr		Transaction ID : SA11Ai-CN35657	
City Parkersburg	State WV	Zip Code 26101	Amount of Each Receipt this Period 2600
FEC ID number of contributing federal political committee. C			
Name of Employer United Bank	Occupation President		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600		

SUBTOTAL of Receipts This Page (optional).....	5450.00
TOTAL This Period (last page this line number only).....	

13020280007

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 OF 323	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Lawrence Adkins</b>		Date of Receipt MM / DD / YYYY <b>06 / 20 / 2013</b>
Mailing Address <b>638 Stirling Ln</b>		<b>Transaction ID : SA11Ai-CN35481</b>
City <b>Prospect Heights</b>	State <b>IL</b>	Zip Code <b>60070-2589</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>200</b>
Name of Employer <b>Retired</b>	Occupation <b>Retired</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>200</b>	

Full Name (Last, First, Middle Initial) <b>Mr. Arthur S Adler</b>		Date of Receipt MM / DD / YYYY <b>04 / 18 / 2013</b>
Mailing Address <b>355 West 87th St</b>		<b>Transaction ID : SA11Ai-CN34750</b>
City <b>New York</b>	State <b>NY</b>	Zip Code <b>10004</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer <b>Sullivan &amp; Cromwell LLP</b>	Occupation <b>Attorney</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

Full Name (Last, First, Middle Initial) <b>Mr. Kenneth Aldridge</b>		Date of Receipt MM / DD / YYYY <b>06 / 20 / 2013</b>
Mailing Address <b>844 Rockland Rd</b>		<b>Transaction ID : SA11Ai-CN35400</b>
City <b>Libertyville</b>	State <b>IL</b>	Zip Code <b>60048</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer <b>Aldridge Electric Inc.</b>	Occupation <b>CEO</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2200.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280008



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Ruffner Alexander</b>		Date of Receipt MM / DD / YYYY 06 / 10 / 2013
Mailing Address 708 Myrtle Rd		Transaction ID : SA11Ai-CN35329
City Charleston	State WV	
Zip Code 25314		Amount of Each Receipt this Period \$ 200
FEC ID number of contributing federal political committee. C		
Name of Employer Wells Fargo	Occupation financial advisor	Election Cycle-to-Date \$ 200
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Mr. Eugene J Alfonsi</b>		Date of Receipt MM / DD / YYYY 05 / 01 / 2013
Mailing Address 200 Days Dr		Transaction ID : SA11Ai-CN34885
City Sutton	State WV	
Zip Code 26601		Amount of Each Receipt this Period \$ 1000
FEC ID number of contributing federal political committee. C		
Name of Employer Braxton Health Care Center	Occupation Owner	Election Cycle-to-Date \$ 1000
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Dr. Leonard F Allen IV</b>		Date of Receipt MM / DD / YYYY 04 / 18 / 2013
Mailing Address 1215 Virginia Street East		Transaction ID : SA11Ai-CN34690
City Charleston	State WV	
Zip Code 25301		Amount of Each Receipt this Period \$ 1000
FEC ID number of contributing federal political committee. C		
Name of Employer Mountain State	Occupation Physician	Election Cycle-to-Date \$ 1000
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	\$ 2200.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280009

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 323

(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d	<input type="checkbox"/>	15
<input type="checkbox"/>	12	<input type="checkbox"/>	13a	<input type="checkbox"/>	13b	<input type="checkbox"/>	14	<input type="checkbox"/>	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Robert V. Allen</b>		Date of Receipt MM / DD / YYYY 06 / 20 / 2013
Mailing Address 246 Ridgeway Dr		Transaction ID : SA11AI-CN35472
City Bridgeport	State WV	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

Full Name (Last, First, Middle Initial) <b>Mr. Peter Allphin</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2013
Mailing Address 603 Olympic Dr		Transaction ID : SA11AI-CN35224
City Martinsburg	State WV	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250
Name of Employer Self	Occupation Social Worker	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

Full Name (Last, First, Middle Initial) <b>James Altmeyer</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013
Mailing Address 609 Bay Colony Dr		Transaction ID : SA11AI-CN35738
City Virginia Beach	State VA	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500
Name of Employer Self Employed	Occupation Funeral Director	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	800.00
<b>TOTAL</b> This Period (last page this line number only) .....	

13020280010

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
---	------------------------------	------------------------------	------------------------------	-----------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Rebecca L Anderson**

Mailing Address **3525 17th St S**

City **Arlington** State **VA** Zip Code **22204**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Williams & Jensen** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 30 2013**

Transaction ID : **SA11Ai-CN35582**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Francis Aquila**

Mailing Address **311 West Broadway TH5**

City **New York** State **NY** Zip Code **10013**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Sullivan & Cromwell LLP** Occupation **Lawyer**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 18 2013**

Transaction ID : **SA11Ai-CN34672**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Dede Arbogast**

Mailing Address **1523 Royal Oaks Rd**

City **Charleston** State **WV** Zip Code **25314**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Land Company** Occupation **Executive**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 30 2013**

Transaction ID : **SA11Ai-CN35621**

Amount of Each Receipt this Period  
**1000**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3000.00**

13020280011

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Ms. Linda Arnold</b>		Date of Receipt MM / DD / YYYY 05 / 10 / 2013
Mailing Address 1401 Somerlayton		Transaction ID : SA11AI-CN34993
City Charleston	State WV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer The Arnold Agency	Occupation Owner	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

Full Name (Last, First, Middle Initial) <b>Ms. Anita Ashley</b>		Date of Receipt MM / DD / YYYY 05 / 09 / 2013
Mailing Address Post Office Box 823		Transaction ID : SA11Ai-CN34983
City Spencer	State WV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer self-employed	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

Full Name (Last, First, Middle Initial) <b>Mr. Bob Ashley</b>		Date of Receipt MM / DD / YYYY 05 / 09 / 2013
Mailing Address 51 Mallard Ln		Transaction ID : SA11AI-CN34980
City Spencer	State WV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Ashley Insurance Agency	Occupation Insurance Agent	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3000.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280012

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 323  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**David Avella**

Mailing Address **4841 C South 28th St**

City **Arlington** State **VA** Zip Code **22206**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Donatelli Avella** Occupation **Executive**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt **MM / DD / YYYY**  
**06 / 30 / 2013**

Transaction ID : **SA11AI-CN35585**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Aubrey Ayash**

Mailing Address **850 Jonash Ln**

City **Saint Albans** State **WV** Zip Code **25177**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Federal Coal Company** Occupation **Owner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt **MM / DD / YYYY**  
**05 / 10 / 2013**

Transaction ID : **SA11AI-CN35014**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Wilburn Bailey Jr.**

Mailing Address **6272 Huff Creek Hwy**

City **Davin** State **WV** Zip Code **25617-8522**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt **MM / DD / YYYY**  
**05 / 09 / 2013**

Transaction ID : **SA11AI-CN34953**

Amount of Each Receipt this Period  
**50**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1550.00**

13020280013

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 323  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**William M. Bailey**

Mailing Address **701 Highland Ave**

City **Williamstown** State **WV** Zip Code **26187**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self Employed** Occupation **Insurance Agent**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt **06 / 30 / 2013**

Transaction ID : **SA11Ai-CN35605**

Amount of Each Receipt this Period **500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Robert C. Baird**

Mailing Address **PO Box 711**

City **Gallipolis Ferry** State **WV** Zip Code **25515**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Baird Physical Therapy** Occupation **Executive**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt **06 / 03 / 2013**

Transaction ID : **SA11Ai-CN35141**

Amount of Each Receipt this Period **100**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Jack A Baldini**

Mailing Address **811 Poplar St**

City **Bridgeport** State **WV** Zip Code **26330**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt **06 / 19 / 2013**

Transaction ID : **SA11Ai-CN35420**

Amount of Each Receipt this Period **200**

**SUBTOTAL** of Receipts This Page (optional)..... **800.00**

**TOTAL** This Period (last page this line number only).....

13020280014

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 323  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. J. Richard Barber**

Mailing Address 56 Quarry Ridge

City Charleston State WV Zip Code 25304

FEC ID number of contributing federal political committee. **C**

Name of Employer Central Distributing Co. Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt **06 / 10 / 2013**

Transaction ID : **SA11AI-CN35268**

Amount of Each Receipt this Period **2000**

**B.** Full Name (Last, First, Middle Initial)  
**Patrick Barker**

Mailing Address 234 Utah Rd

City Ravenswood State WV Zip Code 26164

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450**

Date of Receipt **06 / 30 / 2013**

Transaction ID : **SA11AI-CN35739**

Amount of Each Receipt this Period **300**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Curtis Barnette**

Mailing Address 1112 Prospect Ave

City Bethlehem State PA Zip Code 18018

FEC ID number of contributing federal political committee. **C**

Name of Employer Bethlehem Steel Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt **06 / 30 / 2013**

Transaction ID : **SA11AI-CN35694**

Amount of Each Receipt this Period **1000**

**SUBTOTAL** of Receipts This Page (optional) ..... **3300.00**

**TOTAL** This Period (last page this line number only) .....

13020280015

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:		PAGE 16 OF 323	
(check only one)			
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b
<input type="checkbox"/>	12	<input type="checkbox"/>	13a
<input type="checkbox"/>		<input type="checkbox"/>	11c
<input type="checkbox"/>		<input type="checkbox"/>	13b
<input type="checkbox"/>		<input type="checkbox"/>	11d
<input type="checkbox"/>		<input type="checkbox"/>	14
<input type="checkbox"/>		<input type="checkbox"/>	15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Thomas Barry</b>		Date of Receipt MM / DD / YYYY 06 / 20 / 2013	
Mailing Address 1220 Park Ave		<b>Transaction ID : SA11Ai-CN35456</b>	
City New York	State NY	Zip Code 10128	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000	
Name of Employer Zephyr Management LP	Occupation Investments		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000		

Full Name (Last, First, Middle Initial) <b>Ms. Lisa Barton</b>		Date of Receipt MM / DD / YYYY 05 / 16 / 2013	
Mailing Address 4535 Coldstream Ct		<b>Transaction ID : SA11Ai-CN35052</b>	
City Westerville	State OH	Zip Code 43082	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 700	
Name of Employer American Electric Power	Occupation EVP Transmission		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 700		

Full Name (Last, First, Middle Initial) <b>Mrs. Ira D. Bartram</b>		Date of Receipt MM / DD / YYYY 06 / 03 / 2013	
Mailing Address PO Box 1014		<b>Transaction ID : SA11Ai-CN35251</b>	
City Lavalette	State WV	Zip Code 25535-1014	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100	
Name of Employer Self Employed	Occupation Oil & Gas Operations		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 200		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1800.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280016



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 323  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Katharine Becker**

Mailing Address 1234 Staunton Rd

City Charleston State WV Zip Code 25314-1437

FEC ID number of contributing federal political committee. **C**

Name of Employer None Occupation Housewife

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2600

Date of Receipt MM / DD / YYYY  
05 / 09 / 2013

Transaction ID : SA11Ai-CN34944

Amount of Each Receipt this Period  
2600

**B.** Full Name (Last, First, Middle Initial)  
**Mr. W Marty Becker**

Mailing Address 1234 Staunton Rd

City Charleston State WV Zip Code 25314-1437

FEC ID number of contributing federal political committee. **C**

Name of Employer Max Capitol Group Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2600

Date of Receipt MM / DD / YYYY  
05 / 09 / 2013

Transaction ID : SA11Ai-CN34945

Amount of Each Receipt this Period  
2600

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Margaret Bellock**

Mailing Address 1501 N State Pkwy  
Apt 11C

City Chicago State IL Zip Code 60610

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt MM / DD / YYYY  
06 / 20 / 2013

Transaction ID : SA11Ai-CN35453

Amount of Each Receipt this Period  
1000

**SUBTOTAL** of Receipts This Page (optional)..... 6200.00

**TOTAL** This Period (last page this line number only).....

13020280017

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: (check only one)	PAGE 18 OF 323
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Cleveland Benedict</b>		Date of Receipt MM / DD / YYYY <b>04 / 29 / 2013</b>
Mailing Address <b>HC 37 Box 155</b>		<b>Transaction ID : SA11Ai-CN35042</b>
City <b>Lewisburg</b>	State <b>WV</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500</b>
Name of Employer <b>Retired</b>	Occupation <b>Retired</b>	<b>1500</b>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>Mr. Cleveland Benedict</b>		Date of Receipt MM / DD / YYYY <b>05 / 28 / 2013</b>
Mailing Address <b>HC 37 Box 155</b>		<b>Transaction ID : SA11Ai-CN35219</b>
City <b>Lewisburg</b>	State <b>WV</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500</b>
Name of Employer <b>Retired</b>	Occupation <b>Retired</b>	<b>2000</b>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>Mr. Cleveland Benedict</b>		Date of Receipt MM / DD / YYYY <b>06 / 27 / 2013</b>
Mailing Address <b>HC 37 Box 155</b>		<b>Transaction ID : SA11Ai-CN35709</b>
City <b>Lewisburg</b>	State <b>WV</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500</b>
Name of Employer <b>Retired</b>	Occupation <b>Retired</b>	<b>2500</b>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280018

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 OF 323  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. James Bennett</b>		Date of Receipt MM / DD / YYYY 04 / 18 / 2013
Mailing Address PO Box 789		Transaction ID : SA11Ai-CN34694
City Grantsville	State WV	
Zip Code 26147		Amount of Each Receipt this Period \$ 200
FEC ID number of contributing federal political committee. C		
Name of Employer Calhoun Banks	Occupation Banker	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 200	

Full Name (Last, First, Middle Initial) <b>Mr. Chuck C. Bibbee</b>		Date of Receipt MM / DD / YYYY 05 / 10 / 2013
Mailing Address 1572 Hampton Rd		Transaction ID : SA11Ai-CN34999
City Charleston	State WV	
Zip Code 26314		Amount of Each Receipt this Period \$ 1000
FEC ID number of contributing federal political committee. C		
Name of Employer CoalfillersInc.	Occupation Executive	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

Full Name (Last, First, Middle Initial) <b>Mrs. Carole Bissett</b>		Date of Receipt MM / DD / YYYY 06 / 28 / 2013
Mailing Address 1526 Atlas Rd		Transaction ID : SA11Ai-CN35499
City Wheeling	State WV	
Zip Code 26003		Amount of Each Receipt this Period \$ 100
FEC ID number of contributing federal political committee. C		
Name of Employer State Farm Insurance	Occupation Insurance Agent	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 200	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	\$ 1300.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280019

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 OF 323  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. James I Black III**

Mailing Address **23 Chesterfield Rd**

City **Scarsdale** State **NY** Zip Code **10583**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Sullivan & Cromwell LLP** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt **04 / 18 / 2013**

Transaction ID : **SA11AI-CN34749**

Amount of Each Receipt this Period **1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. William Blalock**

Mailing Address **609 W Braddock Road**

City **Alexandria** State **VA** Zip Code **22302**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Fierce Isakowitz Blalock** Occupation **Partner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt **06 / 12 / 2013**

Transaction ID : **SA11AI-CN35395**

Amount of Each Receipt this Period **1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. William Blalock**

Mailing Address **609 W Braddock Road**

City **Alexandria** State **VA** Zip Code **22302**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Fierce Isakowitz Blalock** Occupation **Partner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt **06 / 26 / 2013**

Transaction ID : **SA11AI-CN35708**

Amount of Each Receipt this Period **1000**

**SUBTOTAL** of Receipts This Page (optional)..... **3000.00**

**TOTAL** This Period (last page this line number only).....

13020280020

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Ms. Diane Bode</b>		Date of Receipt MM / DD / YYYY <b>04 / 18 / 2013</b>
Mailing Address <b>1100 Warm Sands Dr SE</b>		<b>Transaction ID : SA11AI-CN34747</b>
City <b>Albuquerque</b>	State <b>NM</b>	Zip Code <b>87123</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>200</b>
Name of Employer <b>Bode Aviation</b>	Occupation <b>CFO</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>200</b>	

Full Name (Last, First, Middle Initial) <b>Ms. Judy L. Bofill</b>		Date of Receipt MM / DD / YYYY <b>06 / 20 / 2013</b>
Mailing Address <b>309 West Avis Ave</b>		<b>Transaction ID : SA11AI-CN35475</b>
City <b>Man</b>	State <b>WV</b>	Zip Code <b>25635-1132</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250</b>
Name of Employer <b>None</b>	Occupation <b>Housewife</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>250</b>	

Full Name (Last, First, Middle Initial) <b>Mr. Joseph W. Boutaugh</b>		Date of Receipt MM / DD / YYYY <b>06 / 07 / 2013</b>
Mailing Address <b>4 Poplar Ave. Apt. 1</b>		<b>Transaction ID : SA11AI-CN35296</b>
City <b>Wheeling</b>	State <b>WV</b>	Zip Code <b>26003</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>100</b>
Name of Employer <b>Retired</b>	Occupation <b>Retired</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>200</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>550.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280021

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. John Boyd II</b>		Date of Receipt MM / DD / YYYY <b>04 / 18 / 2013</b>	
Mailing Address <b>1375 Royal Oak Drive</b>		<b>Transaction ID : SA11AI-CN34743</b>	
City <b>Wexford</b>	State <b>PA</b>	Zip Code <b>15090</b>	Amount of Each Receipt this Period <b>1000</b>
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>John T Boyd Company</b>	Occupation <b>Consultant</b>		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>		

Full Name (Last, First, Middle Initial) <b>Mr. Jimmy Brock</b>		Date of Receipt MM / DD / YYYY <b>04 / 18 / 2013</b>	
Mailing Address <b>3300 Darrah St</b>		<b>Transaction ID : SA11AI-CN34723</b>	
City <b>Morgantown</b>	State <b>WV</b>	Zip Code <b>26508</b>	Amount of Each Receipt this Period <b>1000</b>
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>Consol Energy</b>	Occupation <b>COO</b>		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>		

Full Name (Last, First, Middle Initial) <b>Ms. Lynn Brookshire</b>		Date of Receipt MM / DD / YYYY <b>06 / 04 / 2013</b>	
Mailing Address <b>1934 Olympus Rd</b>		<b>Transaction ID : SA11AI-CN35125</b>	
City <b>Charleston</b>	State <b>WV</b>	Zip Code <b>25314-2284</b>	Amount of Each Receipt this Period <b>100</b>
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>CAMC</b>	Occupation <b>Executive</b>		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>200</b>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2100.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280022

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Reginald Brown**

Mailing Address **317 Mansion Drive**

City **Alexandria** State **VA** Zip Code **22302**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Wilmer Hale** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2600**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 30 2013**

Transaction ID : **SA11Ai-CN35744**

Amount of Each Receipt this Period  
**2600**

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Miriam R. Brubaker**

Mailing Address **P.O. Box 30**

City **Circleville** State **WV** Zip Code **26804-0030**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**200**

Date of Receipt  
M M / D D / Y Y Y Y  
**04 18 2013**

Transaction ID : **SA11Ai-CN34797**

Amount of Each Receipt this Period  
**200**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Russell Bruemmer**

Mailing Address **4024 North 40th Street**

City **Arlington** State **VA** Zip Code **22207**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Wilmer Hale** Occupation **Partner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 07 2013**

Transaction ID : **SA11Ai-CN35281**

Amount of Each Receipt this Period  
**500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3300.00**

13020280023

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Toby J Buel Sr</b>		Date of Receipt MM / DD / YYYY 06 / 28 / 2013
Mailing Address 5321 Glow Dr		Transaction ID : SA11Ai-CN35507
City Cross Lanes	State WV	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 200
Name of Employer Self Employed	Occupation Attorney	Amount of Each Receipt this Period 350
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>Mrs. Cynthia Bullock</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013
Mailing Address PO Box 5477		Transaction ID : SA11Ai-CN35659
City Vienna	State WV	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500
Name of Employer United Bank	Occupation Banker	Amount of Each Receipt this Period 500
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

Full Name (Last, First, Middle Initial) <b>Mr. James O Bunn II</b>		Date of Receipt MM / DD / YYYY 05 / 10 / 2013
Mailing Address 4600 Kanawha Ave		Transaction ID : SA11Ai-CN34996
City Charleston	State WV	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000
Name of Employer Coal River Energy LLC	Occupation Mining	Amount of Each Receipt this Period 2000
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2700.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280024



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Alfred Burns</b>		Date of Receipt MM / DD / YYYY 05 / 09 / 2013
Mailing Address 618 Grabapple Rd		Transaction ID : SA11Ai-CN34936
City Wind Ridge	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Burns Drilling & Excavation	Occupation Owner	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

Full Name (Last, First, Middle Initial) <b>Mr. Todd Busby</b>		Date of Receipt MM / DD / YYYY 05 / 29 / 2013
Mailing Address 6941 Lakeside Ct		Transaction ID : SA11Ai-CN35220
City Westerville	State OH	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200
Name of Employer American Electric Power	Occupation Operations	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 200	

Full Name (Last, First, Middle Initial) <b>Mr. Steven Bush</b>		Date of Receipt MM / DD / YYYY 05 / 28 / 2013
Mailing Address 5314 Eakes Rd NW		Transaction ID : SA11Ai-CN35060
City Los Ranchos	State NM	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Centura Healthcare	Occupation Physician	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1700.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280025

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Kevin Cain</b>		Date of Receipt MM / DD / YYYY <b>04 / 22 / 2013</b>
Mailing Address <b>2125 14th St NW</b>		Transaction ID : <b>SA11Ai-CN34877</b>
City <b>Washington</b>	State <b>DC</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ <b>100</b>
Name of Employer <b>American Veterinary Colleges</b>	Occupation <b>Government Affairs</b>	Transaction ID : <b>SA11Ai-CN34877</b>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>400</b>	

Full Name (Last, First, Middle Initial) <b>Mr. Kevin Cain</b>		Date of Receipt MM / DD / YYYY <b>05 / 22 / 2013</b>
Mailing Address <b>2125 14th St NW</b>		Transaction ID : <b>SA11Ai-CN35214</b>
City <b>Washington</b>	State <b>DC</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ <b>100</b>
Name of Employer <b>American Veterinary Colleges</b>	Occupation <b>Government Affairs</b>	Transaction ID : <b>SA11Ai-CN35214</b>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>500</b>	

Full Name (Last, First, Middle Initial) <b>Mr. Kevin Cain</b>		Date of Receipt MM / DD / YYYY <b>06 / 24 / 2013</b>
Mailing Address <b>2125 14th St NW</b>		Transaction ID : <b>SA11Ai-CN35699</b>
City <b>Washington</b>	State <b>DC</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ <b>100</b>
Name of Employer <b>American Veterinary Colleges</b>	Occupation <b>Government Affairs</b>	Transaction ID : <b>SA11Ai-CN35699</b>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>600</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	\$ <b>300.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	\$ <b>300.00</b>

13020280026

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 27 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Carl M Callaway</b>		Date of Receipt MM / DD / YYYY 05 / 31 / 2013
Mailing Address 400 10th Ave		Transaction ID : SA11Ai-CN35243
City Huntington	State Zip Code WV 25701	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer Retired	Occupation Retired	Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Election Cycle-to-Date 250		

Full Name (Last, First, Middle Initial) <b>Mr. C Howard Capito</b>		Date of Receipt MM / DD / YYYY 05 / 01 / 2013
Mailing Address 740 Kenesaw Avenue		Transaction ID : SA11Ai-CN34889
City Knoxville	State Zip Code TN 37919	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Shenandoah Northern Co.	Occupation Executive	Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Election Cycle-to-Date 500		

Full Name (Last, First, Middle Initial) <b>Dr. Richard A Capito</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2013
Mailing Address 1097 Fledderjohn Rd.		Transaction ID : SA11Ai-CN35102
City Charleston	State Zip Code WV 25314	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer self-employed	Occupation Physician	Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Election Cycle-to-Date 500		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1250.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280027

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 OF 323  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. James R Carnes</b>		Date of Receipt MM / DD / YYYY <b>04 / 23 / 2013</b>
Mailing Address <b>5551 High Dr</b>		Transaction ID : <b>SA11AI-CN34834</b>
City <b>Mission Hills</b>	State <b>KS</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1500</b>
Name of Employer <b>EZCorp Online Solutions</b>	Occupation <b>President</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1500</b>	

Full Name (Last, First, Middle Initial) <b>Mr. Russell Carothers</b>		Date of Receipt MM / DD / YYYY <b>06 / 19 / 2013</b>
Mailing Address <b>PO Box 550</b>		Transaction ID : <b>SA11AI-CN35440</b>
City <b>Winfield</b>	State <b>AL</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer <b>Citizens Bank Of Winfield</b>	Occupation <b>Executive</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

Full Name (Last, First, Middle Initial) <b>Mr. Mark Carter</b>		Date of Receipt MM / DD / YYYY <b>05 / 10 / 2013</b>
Mailing Address <b>1091 Green Meadow Rd</b>		Transaction ID : <b>SA11AI-CN34995</b>
City <b>Charleston</b>	State <b>WV</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer <b>Dinsmore &amp; Shohl LLP</b>	Occupation <b>Attorney</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>3500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280028

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Michael E Caryl</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 10 / 2013
Mailing Address 210 N Georgia Ave		Transaction ID : SA11AI-CN35388
City Martinsburg	State WV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Bowles Rice	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

Full Name (Last, First, Middle Initial) <b>Mr. James W Casey</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 03 / 2013
Mailing Address 347 Old Shennandale Road		Transaction ID : SA11AI-CN35181
City Charles Town	State WV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150
Name of Employer Self Employed	Occupation Horse Breeder	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

Full Name (Last, First, Middle Initial) <b>Mr. Daniel Casto</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 07 / 2013
Mailing Address 8618 Dellway Ln		Transaction ID : SA11AI-CN35288
City Vienna	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer WilmerHale	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1650.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280029

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Brian M Chase</b>		Date of Receipt MM / DD / YYYY <b>04 / 18 / 2013</b>
Mailing Address <b>1 Johnstone Rd</b>		<b>Transaction ID : SA11AI-CN34815</b>
City <b>South Charleston</b>	State <b>WV</b>	Zip Code <b>25309</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>200</b>
Name of Employer Requested	Occupation Requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>200</b>	

Full Name (Last, First, Middle Initial) <b>Ms. Whitney Chatterjee</b>		Date of Receipt MM / DD / YYYY <b>04 / 24 / 2013</b>
Mailing Address <b>36 Moore St N Apt 6</b>		<b>Transaction ID : SA11AI-CN34842</b>
City <b>New York</b>	State <b>NY</b>	Zip Code <b>10013</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer Requested	Occupation Requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

Full Name (Last, First, Middle Initial) <b>Mr. Bruce E Clark</b>		Date of Receipt MM / DD / YYYY <b>04 / 24 / 2013</b>
Mailing Address <b>2 Dows Ln</b>		<b>Transaction ID : SA11AI-CN34858</b>
City <b>Irvington</b>	State <b>NY</b>	Zip Code <b>10533</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer Requested	Occupation Requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2200.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280030

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Walter Clayton</b>		Date of Receipt MM / DD / YYYY <b>04 / 25 / 2013</b>
Mailing Address <b>125 Broad St</b>		Transaction ID : <b>SA11Ai-CN35040</b>
City <b>New York</b>	State <b>NY</b>	
Zip Code <b>10004</b>		Amount of Each Receipt this Period <b>1000</b>
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>Sullivan &amp; Cromwell LLP</b>	Occupation <b>Attorney</b>	Transaction ID : <b>SA11Ai-CN35040</b>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

Full Name (Last, First, Middle Initial) <b>Ms. Courtney G Clelan</b>		Date of Receipt MM / DD / YYYY <b>04 / 23 / 2013</b>
Mailing Address <b>1519 Pathfinder Ln</b>		Transaction ID : <b>SA11Ai-CN34837</b>
City <b>Mclean</b>	State <b>VA</b>	
Zip Code <b>22101</b>		Amount of Each Receipt this Period <b>500</b>
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>Financial Services Forum</b>	Occupation <b>Analyst</b>	Transaction ID : <b>SA11Ai-CN34837</b>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>500</b>	

Full Name (Last, First, Middle Initial) <b>Mr. Jay W Cleveland Jr</b>		Date of Receipt MM / DD / YYYY <b>04 / 18 / 2013</b>
Mailing Address <b>Cleveland Brothers Equipment</b> <b>4565 William Penn Highway</b>		Transaction ID : <b>SA11Ai-CN34788</b>
City <b>Murraysville</b>	State <b>PA</b>	
Zip Code <b>15668</b>		Amount of Each Receipt this Period <b>2500</b>
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>Cleveland Bros. Equipment</b>	Occupation <b>President</b>	Transaction ID : <b>SA11Ai-CN34788</b>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2500</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>4000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280031

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 OF 323  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. David C Clovis**

Mailing Address **304 Emerson Rd**

City **Clarksburg** State **WV** Zip Code **26301**

FEC ID number of contributing federal political committee. **C**

Name of Employer **retired** Occupation **retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 28 2013**

Transaction ID : **SA11Ai-CN35544**

Amount of Each Receipt this Period  
**1600**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. David C Clovis**

Mailing Address **304 Emerson Rd**

City **Clarksburg** State **WV** Zip Code **26301**

FEC ID number of contributing federal political committee. **C**

Name of Employer **retired** Occupation **retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 28 2013**

Transaction ID : **SA11Ai-CN35545**

Amount of Each Receipt this Period  
**400**

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Mary P Clubb**

Mailing Address **11 Brittany Woods**

City **Charleston** State **WV** Zip Code **25314**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Housewife** Occupation **Housewife**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 30 2013**

Transaction ID : **SA11Ai-CN35678**

Amount of Each Receipt this Period  
**100**

**SUBTOTAL** of Receipts This Page (optional)..... **2100.00**

**TOTAL** This Period (last page this line number only).....

13020280032



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: (check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15  
 PAGE 33 OF 323

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Billy Coffindaffer**

Mailing Address **122 Heritage Pt.**

City **Morgantown** State **WV** Zip Code **26505-9097**

FEC ID number of contributing federal political committee. **C**

Name of Employer **retired** Occupation **retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 10 / 2013**

Transaction ID : **SA11AI-CN35327**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. H Rodgin Cohen**

Mailing Address **21 Mattiessen Park**

City **Irvington** State **NY** Zip Code **10533**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Sullivan & Cromwell LLP** Occupation **Attorney**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 18 / 2013**

Transaction ID : **SA11AI-CN34670**

Amount of Each Receipt this Period  
**2500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Byard M. Coleman**

Mailing Address **PO Box 18445**

City **Dunbar** State **WV** Zip Code **25064**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Office-Commercial Cleaning Of WV** Occupation **President**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 / 01 / 2013**

Transaction ID : **SA11AI-CN34910**

Amount of Each Receipt this Period  
**300**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2900.00**

13020280033

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 OF 323  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Anthony Colletta**

Mailing Address **24 Lewis Pl S**

City **Rockville Centre** State **NY** Zip Code **11572**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Sullivan & Cromwell LLP** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
MM / DD / YYYY  
**04 / 24 / 2013**

Transaction ID : **SA11AI-CN34848**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Larry J Conrad**

Mailing Address **169 Alabran Road**

City **Smicksburg** State **PA** Zip Code **16256**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Brookville Equipment** Occupation **President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
MM / DD / YYYY  
**04 / 18 / 2013**

Transaction ID : **SA11AI-CN34791**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Steve Conrad**

Mailing Address **1104 Conrad Rd**

City **Brandywine** State **WV** Zip Code **26802**

FEC ID number of contributing federal political committee. **C**

Name of Employer **self-employed** Occupation **Farmer**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
MM / DD / YYYY  
**05 / 01 / 2013**

Transaction ID : **SA11AI-CN34884**

Amount of Each Receipt this Period  
**1000**

**SUBTOTAL** of Receipts This Page (optional)..... **2000.00**

**TOTAL** This Period (last page this line number only).....

13020280034

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Robert Contraguerra</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 18 / 2013
Mailing Address 265 Pembroke Dr		Transaction ID : SA11Ai-CN34812
City Triadelphia	State Zip Code WV 26059	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300
Name of Employer Panhandle Cleaning & Restoration	Occupation Vice President	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300	

Full Name (Last, First, Middle Initial) <b>Ms. Carolyn K Cook</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 10 / 2013
Mailing Address 1406 Somerlayton Rd		Transaction ID : SA11Ai-CN35382
City Charleston	State Zip Code WV 25314	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100
Name of Employer housewife	Occupation Housewife	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 200	

Full Name (Last, First, Middle Initial) <b>Mr. William Cooper</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 18 / 2013
Mailing Address 801 Marquette Avenue		Transaction ID : SA11Ai-CN34709
City Minneapolis	State Zip Code MN 55402	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000
Name of Employer TCF Financial Corporation	Occupation CEO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1400.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280035

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Peter Coors</b>		Date of Receipt MM / DD / YYYY <b>06 / 30 / 2013</b>
Mailing Address <b>15205 32nd Ave W</b>		Transaction ID : <b>SA11Ai-CN35697</b>
City <b>Golden</b>	State <b>CO</b>	
Zip Code <b>80401</b>		Amount of Each Receipt this Period <b>1000</b>
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>Molson Coors Brewery</b>	Occupation <b>Executive</b>	Election Cycle-to-Date <b>1000</b>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Mr. Dean M Cordle</b>		Date of Receipt MM / DD / YYYY <b>04 / 18 / 2013</b>
Mailing Address <b>2914 Winfield Rd</b>		Transaction ID : <b>SA11Ai-CN34818</b>
City <b>Winfield</b>	State <b>WV</b>	
Zip Code <b>25213</b>		Amount of Each Receipt this Period <b>250</b>
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>AC&amp;S Inc.</b>	Occupation <b>Executive</b>	Election Cycle-to-Date <b>250</b>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Mr. Jeffrey Costello</b>		Date of Receipt MM / DD / YYYY <b>04 / 18 / 2013</b>
Mailing Address <b>42 Temple Street</b>		Transaction ID : <b>SA11Ai-CN34718</b>
City <b>Arlington</b>	State <b>MA</b>	
Zip Code <b>02476</b>		Amount of Each Receipt this Period <b>1300</b>
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>Requested</b>	Occupation <b>Requested</b>	Election Cycle-to-Date <b>1300</b>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2550.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280036

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Gary Coughlan**

Mailing Address 1100 5th Ave S  
#201

City Naples State FL Zip Code 34102

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
06 18 2013

Transaction ID : SA11Ai-CN35492

Amount of Each Receipt this Period  
250

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Susan Cox**

Mailing Address 64 Delaware Drive

City Hurricane State WV Zip Code 25526

FEC ID number of contributing federal political committee. **C**

Name of Employer Family First Realty Occupation Realtor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
06 20 2013

Transaction ID : SA11Ai-CN35480

Amount of Each Receipt this Period  
250

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Judith Crews**

Mailing Address 35 Haddale Ave

City Wheeling State WV Zip Code 26003

FEC ID number of contributing federal political committee. **C**

Name of Employer Tanner Company Occupation Sales

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
04 18 2013

Transaction ID : SA11Ai-CN34811

Amount of Each Receipt this Period  
200

**SUBTOTAL** of Receipts This Page (optional)..... 700.00

**TOTAL** This Period (last page this line number only).....

13020280037

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 OF 323  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Craig R Dahl**

Mailing Address **9941 Adam Ave**

City **Inver Grove Heights** State **MN** Zip Code **55077**

FEC ID number of contributing federal political committee. **C**

Name of Employer **TCF Corp** Occupation **Vice President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \$ 1000

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 08 2013**

Transaction ID : **SA11Ai-CN35022**

Amount of Each Receipt this Period  
 \$ 1000

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Anna Dailey**

Mailing Address **140 Sunset Dr**

City **Charleston** State **WV** Zip Code **25301**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Dinsmore & Shohl LLP** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \$ 500

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 10 2013**

Transaction ID : **SA11Ai-CN34988**

Amount of Each Receipt this Period  
 \$ 500

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Greg Darby**

Mailing Address **PO Box 968**

City **Beckley** State **WV** Zip Code **25802**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Little General Store Inc.** Occupation **President & CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \$ 1000

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 30 2013**

Transaction ID : **SA11Ai-CN35096**

Amount of Each Receipt this Period  
 \$ 1000

**SUBTOTAL** of Receipts This Page (optional)..... **2500.00**

**TOTAL** This Period (last page this line number only).....

13020280038

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 39 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Harold Davis</b>		Date of Receipt M M / D D / Y Y . Y Y 06 28 2013
Mailing Address PO Box 457		Transaction ID : SA11AI-CN35523
City Lenore	State WV	Zip Code 25676
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 140
Name of Employer Harold B. Davis CPA	Occupation Business Owner	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date \$ \$ * 245	

Full Name (Last, First, Middle Initial) <b>Mr. William M Davis</b>		Date of Receipt M M / D D / Y Y . Y Y Y 04 18 2013
Mailing Address 145 Abney Cir		Transaction ID : SA11AI-CN34808
City Charleston	State WV	Zip Code 25314
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 2600
Name of Employer Retired	Occupation retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date \$ \$ * 2600	

Full Name (Last, First, Middle Initial) <b>Mr. Nicholas Deiuliis</b>		Date of Receipt M M / D D / Y Y . Y Y Y 04 18 2013
Mailing Address 1460 Hollow Tree Drive		Transaction ID : SA11AI-CN34722
City Pittsburgh	State PA	Zip Code 15241
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 1000
Name of Employer Consol Energy	Occupation Engineer	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date \$ \$ * 1000	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	\$ \$ * 3740.00
<b>TOTAL</b> This Period (last page this line number only).....	\$ \$ *

13020280039

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 40 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Robert Delamater</b>		Date of Receipt MM / DD / YYYY <b>04 / 24 / 2013</b>
Mailing Address <b>125 Broad Street</b> <b>Room 3142</b>		Transaction ID : <b>SA11Ai-CN34854</b>
City <b>New York</b>	State <b>NY</b>	
Zip Code <b>10004</b>		Amount of Each Receipt this Period <b>1000</b>
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>Sullivan &amp; Cromwell LLP</b>	Occupation <b>Lawyer</b>	Election Cycle-to-Date <b>1000</b>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Ms. Patricia Deloatche</b>		Date of Receipt MM / DD / YYYY <b>04 / 22 / 2013</b>
Mailing Address <b>313 S Fenwick St</b>		Transaction ID : <b>SA11Ai-CN34878</b>
City <b>Arlington</b>	State <b>VA</b>	
Zip Code <b>22204</b>		Amount of Each Receipt this Period <b>250</b>
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>Sidley Austin</b>	Occupation <b>Policy Advisor</b>	Election Cycle-to-Date <b>250</b>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Mr. Oliver E Deming IV</b>		Date of Receipt MM / DD / YYYY <b>06 / 03 / 2013</b>
Mailing Address <b>7314 Lamar Dr</b>		Transaction ID : <b>SA11Ai-CN35203</b>
City <b>Springfield</b>	State <b>VA</b>	
Zip Code <b>22150</b>		Amount of Each Receipt this Period <b>100</b>
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>Requested</b>	Occupation <b>Requested</b>	Election Cycle-to-Date <b>200</b>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional).....	<b>1350.00</b>
TOTAL This Period (last page this line number only).....	

13020280040



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Mark E Dempsey**

Mailing Address **241 Whispering Woods Rd**

City **Charleston** State **WV** Zip Code **25304**

FEC ID number of contributing federal political committee. **C**

Name of Employer **American Electric and Power** Occupation **Executive**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 30 2013**

Transaction ID : **SA11AI-CN35616**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Betty Deneault**

Mailing Address **1502 Grandview Dr**

City **Charleston** State **WV** Zip Code **25302**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 10 2013**

Transaction ID : **SA11AI-CN35356**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Mary H Dinsmore**

Mailing Address **15 Norwood Rd**

City **Charleston** State **WV** Zip Code **25314-1326**

FEC ID number of contributing federal political committee. **C**

Name of Employer **self-employed** Occupation **businesswoman**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 20 2013**

Transaction ID : **SA11AI-CN35479**

Amount of Each Receipt this Period  
**500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1750.00**

13020280041

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 323
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. James H Dissen</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2013	
Mailing Address 2150 Presidential Dr		Transaction ID : SA11AI-CN34888	
City Charleston	State WV	Zip Code 25314	Amount of Each Receipt this Period 1000
FEC ID number of contributing federal political committee. C			
Name of Employer Highland Hospital	Occupation President		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000		

Full Name (Last, First, Middle Initial) <b>Mr. Ray Dodson</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 07 / 2013	
Mailing Address 4309 Virginia Avenue Southeast		Transaction ID : SA11AI-CN35283	
City Charleston	State WV	Zip Code 25304	Amount of Each Receipt this Period 500
FEC ID number of contributing federal political committee. C			
Name of Employer Self Employed	Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500		

Full Name (Last, First, Middle Initial) <b>Mr. Troy Dolan</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 18 / 2013	
Mailing Address PO Box 310		Transaction ID : SA11AI-CN34790	
City Blairsville	State PA	Zip Code 15717	Amount of Each Receipt this Period 1000
FEC ID number of contributing federal political committee. C			
Name of Employer Fenner Dunlop	Occupation Sales Consultant		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000		

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	

13020280042

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 43 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Ms. Diane S Doty**

Mailing Address 12 Chatwood Rd

City Charleston State WV Zip Code 25304

FEC ID number of contributing federal political committee. **C**

Name of Employer self-employed Occupation consultant

Receipt For: 2014  
 Primary  General  
 Other (specify) Election Cycle-to-Date 1000

Date of Receipt

M M / D D / Y Y Y Y  
05 10 2013

Transaction ID : SA11AI-CN35008

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

**B. Mr. Ralph S. Dover**

Mailing Address 91 Alpine Dr

City Bunker Hill State WV Zip Code 25413-3207

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify) Election Cycle-to-Date 200

Date of Receipt

M M / D D / Y Y Y Y  
06 03 2013

Transaction ID : SA11AI-CN35154

Amount of Each Receipt this Period

200

Full Name (Last, First, Middle Initial)

**C. Mr. Charles Dowling**

Mailing Address 65 Meadow Rd

City Riverside State CT Zip Code 06878

FEC ID number of contributing federal political committee. **C**

Name of Employer Sullivan & Cromwell LLP Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify) Election Cycle-to-Date 1000

Date of Receipt

M M / D D / Y Y Y Y  
04 24 2013

Transaction ID : SA11AI-CN34845

Amount of Each Receipt this Period

1000

**SUBTOTAL** of Receipts This Page (optional).....

2200.00

**TOTAL** This Period (last page this line number only).....

13020280043

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 323
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Robert W Downes</b>		Date of Receipt MM / DD / YYYY 04 / 18 / 2013
Mailing Address 1220 Park Ave Apt 5-C		Transaction ID : SA11Ai-CN34751
City New York	State NY	Zip Code 10128
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 1000
Name of Employer Sullivan & Cromwell LLP	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date \$ 1000	

Full Name (Last, First, Middle Initial) <b>Ms. Margaret M Drennen</b>		Date of Receipt MM / DD / YYYY 06 / 28 / 2013
Mailing Address 82 Drennen Ct.		Transaction ID : SA11Ai-CN35516
City Shepherdstown	State WV	Zip Code 25443
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 200
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date \$ 200	

Full Name (Last, First, Middle Initial) <b>Mr. Garry Drummond</b>		Date of Receipt MM / DD / YYYY 06 / 19 / 2013
Mailing Address PO Box 10246		Transaction ID : SA11Ai-CN35448
City Birmingham	State AL	Zip Code 35202
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 2600
Name of Employer Drummond Company Inc	Occupation President & CEO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date \$ 2600	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	\$ 3800.00
<b>TOTAL</b> This Period (last page this line number only).....	\$

13020280044

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**Mr. Garry Drummond**

Mailing Address **PO Box 10246**

City State Zip Code  
**Birmingham AL 35202**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**Drummond Company Inc President & CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify) Election Cycle-to-Date  
**5000**

Date of Receipt

M M / D D / Y Y Y Y  
**06 19 2013**

Transaction ID : **SA11Ai-CN35449**

Amount of Each Receipt this Period

**2400**

Full Name (Last, First, Middle Initial)  
**Mr. Robert Duncan**

Mailing Address **1152 15th St NW  
Suite 400**

City State Zip Code  
**Washington DC 20005**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**American Coalition For Clean Coal President & CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify) Election Cycle-to-Date  
**1750**

Date of Receipt

M M / D D / Y Y Y Y  
**06 30 2013**

Transaction ID : **SA11Ai-CN35559**

Amount of Each Receipt this Period

**500**

Full Name (Last, First, Middle Initial)  
**Ms. Carol Dunn**

Mailing Address **36 Carol St**

City State Zip Code  
**Buckhannon WV 26201**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**housewife Housewife**

Receipt For: 2014  
 Primary  General  
 Other (specify) Election Cycle-to-Date  
**1000**

Date of Receipt

M M / D D / Y Y Y Y  
**06 07 2013**

Transaction ID : **SA11Ai-CN35300**

Amount of Each Receipt this Period

**1000**

**SUBTOTAL** of Receipts This Page (optional).....

**3900.00**

**TOTAL** This Period (last page this line number only).....

13020280045

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 OF 323  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Lee Dunn**

Mailing Address **519 S Lee St**

City **Alexandria** State **VA** Zip Code **22314**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Google** Occupation **Counsel**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt **05 / 10 / 2013**

Transaction ID : **SA11AI-CN35018**

Amount of Each Receipt this Period **500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. David Durbin**

Mailing Address **129 Whispering Woods Rd**

City **Charleston** State **WV** Zip Code **25304**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CB Richard Ellis/ WV** Occupation **engineer**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt **05 / 10 / 2013**

Transaction ID : **SA11AI-CN34997**

Amount of Each Receipt this Period **1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Douglas Dziak**

Mailing Address **2828 21st Rd S**

City **Arlington** State **VA** Zip Code **22204**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Nixon Peabody** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt **04 / 15 / 2013**

Transaction ID : **SA11AI-CN34873**

Amount of Each Receipt this Period **250**

**SUBTOTAL** of Receipts This Page (optional)..... **1750.00**

**TOTAL** This Period (last page this line number only).....

13020280046

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Douglas Dziak</b>		Date of Receipt MM / DD / YYYY 05 / 13 / 2013	
Mailing Address 2828 21st Rd S		Transaction ID : SA11Ai-CN35050	
City Arlington	State VA	Zip Code 22204	Amount of Each Receipt this Period 250
FEC ID number of contributing federal political committee. C			
Name of Employer Nixon Peabody	Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750		

Full Name (Last, First, Middle Initial) <b>Mr. Douglas Dziak</b>		Date of Receipt MM / DD / YYYY 06 / 18 / 2013	
Mailing Address 2828 21st Rd S		Transaction ID : SA11Ai-CN35490	
City Arlington	State VA	Zip Code 22204	Amount of Each Receipt this Period 250
FEC ID number of contributing federal political committee. C			
Name of Employer Nixon Peabody	Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000		

Full Name (Last, First, Middle Initial) <b>J. Fred Earley</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013	
Mailing Address Ten Foxboro Dr		Transaction ID : SA11Ai-CN35666	
City Vienna	State WV	Zip Code 26105-1940	Amount of Each Receipt this Period 500
FEC ID number of contributing federal political committee. C			
Name of Employer Mt. State BC/BS	Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500		

SUBTOTAL of Receipts This Page (optional).....

1000.00

TOTAL This Period (last page this line number only).....

13020280047

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 48 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Mitchell Eitel</b>		Date of Receipt MM / DD / YYYY <b>04 / 24 / 2013</b>
Mailing Address <b>123 Prince St</b> <b>6th Floor</b>		Transaction ID : <b>SA11Ai-CN34841</b>
City <b>New York</b>	State <b>NY</b>	
Zip Code <b>10012</b>		Amount of Each Receipt this Period <b>1000</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer <b>Sullivan &amp; Cromwell LLP</b>	Occupation <b>Attorney</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

Full Name (Last, First, Middle Initial) <b>Mr. Joe L Ellison</b>		Date of Receipt MM / DD / YYYY <b>04 / 18 / 2013</b>
Mailing Address <b>PO Box 8</b>		Transaction ID : <b>SA11Ai-CN34687</b>
City <b>Greenville</b>	State <b>WV</b>	
Zip Code <b>24945</b>		Amount of Each Receipt this Period <b>500</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500</b>
Name of Employer <b>WV Bankers Assn</b>	Occupation <b>President</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>500</b>	

Full Name (Last, First, Middle Initial) <b>Mr. Scott Emanuelson</b>		Date of Receipt MM / DD / YYYY <b>05 / 10 / 2013</b>
Mailing Address <b>102 Trenton Circle</b>		Transaction ID : <b>SA11Ai-CN35005</b>
City <b>Mc Murray</b>	State <b>PA</b>	
Zip Code <b>15317</b>		Amount of Each Receipt this Period <b>1000</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer <b>Sledd Co.</b>	Occupation <b>Executive</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280048



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 323
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

<b>A.</b> Full Name (Last, First, Middle Initial) Mr. Harry H Esbenshade III		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2013	
Mailing Address PO Box 5310		Transaction ID : SA11AI-CN35664	
City Vienna	State WV	Zip Code 26105	Amount of Each Receipt this Period \$ 600
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Mountain Co.	Occupation Executive		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date \$ 2600		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Michael Escue		Date of Receipt M M / D D / Y Y Y Y 04 / 19 / 2013	
Mailing Address 69 Bank St Apt 502		Transaction ID : SA11AI-CN34679	
City New York	State NY	Zip Code 10014	Amount of Each Receipt this Period \$ 5000
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Sullivan & Cromwell LLP	Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date \$ 5000		

<b>C.</b> Full Name (Last, First, Middle Initial) Mr. Michael Escue		Date of Receipt M M / D D / Y Y Y Y 04 / 22 / 2013	
Mailing Address 69 Bank St Apt 502		Transaction ID : SA11AI-CN35028	
City New York	State NY	Zip Code 10014	Amount of Each Receipt this Period \$ -2400 Redesignated to General 2014 <b>[MEMO ITEM]</b> Redesignated
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Sullivan & Cromwell LLP	Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date \$ 2600		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	\$ 5600.00
<b>TOTAL</b> This Period (last page this line number only).....	\$

13020280049

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 50 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**Mr. Michael Escue**

**A.**

Mailing Address 69 Bank St

Apt 502

City

New York

State

NY

Zip Code

10014

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Sullivan & Cromwell LLP

Occupation

Attorney

Receipt For: 2014

Primary  General

Other (specify)

Election Cycle-to-Date

5000

Date of Receipt

M M / D D / Y Y Y Y  
04 22 2013

Transaction ID : SA11Ai-CN35029

Amount of Each Receipt this Period

2400

Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

Full Name (Last, First, Middle Initial)

**Mr. H. Smoot Fahlgren**

**B.**

Mailing Address 199 Thoroughbred Ln

City

Parkersburg

State

WV

Zip Code

26104

FEC ID number of contributing federal political committee.

**C**

Name of Employer

Retired

Occupation

retired

Receipt For: 2014

Primary  General

Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M / D D / Y Y Y Y  
06 30 2013

Transaction ID : SA11Ai-CN35649

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

**Raymond Fanta**

**C.**

Mailing Address 5207 Penny Ln

City

Vienna

State

WV

Zip Code

26105

FEC ID number of contributing federal political committee.

**C**

Name of Employer

self-employed

Occupation

Waters Insurance Agency

Receipt For: 2014

Primary  General

Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M / D D / Y Y Y Y  
06 30 2013

Transaction ID : SA11Ai-CN35652

Amount of Each Receipt this Period

500

**SUBTOTAL** of Receipts This Page (optional).....

1500.00

**TOTAL** This Period (last page this line number only).....

13020280050

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Douglas Farnham</b>		Date of Receipt MM / DD / YYYY 04 / 18 / 2013
Mailing Address 119 Saratoga Drive		Transaction ID : SA11AI-CN34735
City McMurray	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Self-employed	Occupation Manager	Election Cycle-to-Date 500
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Mrs. Juliette L Farson</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013
Mailing Address 2307 Elm St.		Transaction ID : SA11AI-CN35608
City Parkersburg	State WV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200
Name of Employer housewife	Occupation Housewife	Election Cycle-to-Date 300
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Mr. James D Fawcett</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013
Mailing Address 1211 Forrest Drive		Transaction ID : SA11AI-CN35612
City Hurricane	State WV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer American Electric and Power	Occupation Executive	Election Cycle-to-Date 250
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	950.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280051

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. David Feinberg</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 07 / 2013
Mailing Address 1 Riverside Plaza		Transaction ID : SA11Ai-CN35486
City Columbus	State OH	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000
Name of Employer American Electric Power	Occupation Vice President	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

Full Name (Last, First, Middle Initial) <b>Mr. Steven H Ferguson</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2013
Mailing Address 7 Alba Drive		Transaction ID : SA11Ai-CN35613
City Winfield	State WV	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250
Name of Employer Requested	Occupation Requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

Full Name (Last, First, Middle Initial) <b>Mr. Joseph E Fidler</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 10 / 2013
Mailing Address Rr 1 Box 190-1		Transaction ID : SA11Ai-CN35377
City Lost Creek	State WV	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 200
Name of Employer retired	Occupation retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1450.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280052

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 53 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**Mr. Donald Fierce**

Mailing Address 1155 F Street NW

Suite 950

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Fierce Isakowitz & Blalock Government Relations

Receipt For: 2014  
 Primary  General  
 Other (specify) Election Cycle-to-Date 1000

Date of Receipt

M M / D D / Y Y Y Y  
06 07 2013

Transaction ID : SA11AI-CN35270

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

**Ms. Sharon Fianery**

Mailing Address 1030 Shawnee Trl

City Elkview State WV Zip Code 25071

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Step toe & Johnson PLLC Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify) Election Cycle-to-Date 1000

Date of Receipt

M M / D D / Y Y Y Y  
04 18 2013

Transaction ID : SA11AI-CN34668

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

**Mr. James H Fletcher**

Mailing Address 2 Willow Glen Rd

City Huntington State WV Zip Code 25701

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
JH Fletcher & Co Vice Chairman

Receipt For: 2014  
 Primary  General  
 Other (specify) Election Cycle-to-Date 1000

Date of Receipt

M M / D D / Y Y Y Y  
06 30 2013

Transaction ID : SA11AI-CN35610

Amount of Each Receipt this Period

1000

**SUBTOTAL** of Receipts This Page (optional).....

3000.00

**TOTAL** This Period (last page this line number only).....

13020280053

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: (check only one)	PAGE 54 OF 323
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Vincent Foglia</b>		Date of Receipt M M / D D / Y Y Y Y <b>06 30 2013</b>
Mailing Address <b>43 Castleton t</b>		<b>Transaction ID : SA11Ai-CN35748</b>
City <b>North Barrington</b>	State <b>IL</b>	Zip Code <b>60010</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2600</b>
Name of Employer <b>Sage Products Inc</b>	Occupation <b>Executive</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2600</b>	

Full Name (Last, First, Middle Initial) <b>Mr. Vincent Foglia</b>		Date of Receipt M M / D D / Y Y Y Y <b>06 30 2013</b>
Mailing Address <b>43 Castleton t</b>		<b>Transaction ID : SA11Ai-CN35749</b>
City <b>North Barrington</b>	State <b>IL</b>	Zip Code <b>60010</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2400</b>
Name of Employer <b>Sage Products Inc</b>	Occupation <b>Executive</b>	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>5000</b>	

Full Name (Last, First, Middle Initial) <b>Mr. Charles Foster</b>		Date of Receipt M M / D D / Y Y Y Y <b>04 18 2013</b>
Mailing Address <b>1143 Leckrone-Masontown Road</b>		<b>Transaction ID : SA11Ai-CN34731</b>
City <b>McClellandtown</b>	State <b>PA</b>	Zip Code <b>15458</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer <b>C&amp;J Welding And Consulting LLC</b>	Occupation <b>President</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>6000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280054

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 323
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Paul F. Francke**

Mailing Address 1426 Connell Rd

City Charleston	State WV	Zip Code 25314
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Self	Occupation Ophthalmologist
--------------------------	-------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
MM / DD / YYYY  
05 / 10 / 2013

Transaction ID : SA11AI-CN34992

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Joseph Franklin**

Mailing Address 125 Broad St  
36th Floor

City New York	State NY	Zip Code 10004
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Sullivan & Cromwell LLP	Occupation Lawyer
---	----------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
MM / DD / YYYY  
04 / 18 / 2013

Transaction ID : SA11AI-CN34671

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Carl N Frankovitch**

Mailing Address 337 Penco Rd

City Weirton	State WV	Zip Code 26062
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Frankovitch Anetakis Colanton	Occupation Attorney
---	------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
200

Date of Receipt  
MM / DD / YYYY  
05 / 31 / 2013

Transaction ID : SA11AI-CN35199

Amount of Each Receipt this Period  
200

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2200.00

13020280055

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: (check only one)	PAGE 56 OF 323
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mrs. Cheri Freeman</b>		Date of Receipt MM / DD / YYYY <b>05 / 28 / 2013</b>
Mailing Address <b>811 Walnut Rd</b>		Transaction ID : <b>SA11AI-CN35066</b>
City <b>Charleston</b>	State <b>WV</b>	Zip Code <b>25314</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>200</b>
Name of Employer <b>Roche Co.</b>	Occupation <b>Sales Manager</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>200</b>	

Full Name (Last, First, Middle Initial) <b>Mr. Scott Michael Freeman</b>		Date of Receipt MM / DD / YYYY <b>04 / 23 / 2013</b>
Mailing Address <b>129 Whittredge Rd</b>		Transaction ID : <b>SA11AI-CN34825</b>
City <b>Summit</b>	State <b>NJ</b>	Zip Code <b>07901</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer <b>Sidley &amp; Austin</b>	Occupation <b>Attorney</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

Full Name (Last, First, Middle Initial) <b>Mr. David Freshwater</b>		Date of Receipt MM / DD / YYYY <b>05 / 09 / 2013</b>
Mailing Address <b>929 Charleston Rd</b>		Transaction ID : <b>SA11AI-CN34950</b>
City <b>Spencer</b>	State <b>WV</b>	Zip Code <b>25276</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer <b>Reserve Oil And Gas</b>	Occupation <b>Executive</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

SUBTOTAL of Receipts This Page (optional).....	<b>2200.00</b>
TOTAL This Period (last page this line number only).....	

13020280056



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Charles H Friddle III</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 18 / 2013
Mailing Address 119 Mountainview Dr		Transaction ID : SA11Ai-CN34753
City Elkins	State WV	
Zip Code 26241		Amount of Each Receipt this Period \$ 250
FEC ID number of contributing federal political committee. C		
Name of Employer Allegheny Power	Occupation Executive	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

Full Name (Last, First, Middle Initial) <b>Mr. Stephen Gainer</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2013
Mailing Address 824 Chestnut St		Transaction ID : SA11Ai-CN35658
City Parkersburg	State WV	
Zip Code 26101		Amount of Each Receipt this Period \$ 500
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

Full Name (Last, First, Middle Initial) <b>Dr. James Gann</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 18 / 2013
Mailing Address 6706 Fox Ridge Circle		Transaction ID : SA11Ai-CN34727
City Davidson	State NC	
Zip Code 28036		Amount of Each Receipt this Period \$ 2500
FEC ID number of contributing federal political committee. C		
Name of Employer Seimans Medical	Occupation Physician	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500	

SUBTOTAL of Receipts This Page (optional).....	\$ 3250.00
TOTAL This Period (last page this line number only).....	

13020280057

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 58 OF 323  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Andrew Garland</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 19 / 2013
Mailing Address 125 Broad St		Transaction ID : SA11AI-CN34678
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Sullivan & Cromwell LLP	Occupation Lawyer	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

Full Name (Last, First, Middle Initial) <b>Ms. Sylvia Garland</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 03 / 2013
Mailing Address 407 45th Pl		Transaction ID : SA11AI-CN35163
City Vienna	State WV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer retired	Occupation retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

Full Name (Last, First, Middle Initial) <b>Ms. Sylvia Garland</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 20 / 2013
Mailing Address 407 45th Pl		Transaction ID : SA11AI-CN35463
City Vienna	State WV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer retired	Occupation retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280058

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 59 OF 323

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Mrs. Shirley M Garrett</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013	
Mailing Address 105-51st St		Transaction ID : SA11Ai-CN35654	
City Vienna	State WV	Zip Code 26105	Amount of Each Receipt this Period 500
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500		

Full Name (Last, First, Middle Initial) <b>B. Ms. Sara Gaskins</b>		Date of Receipt MM / DD / YYYY 05 / 09 / 2013	
Mailing Address 1407 Connell Road		Transaction ID : SA11Ai-CN34948	
City Charleston	State WV	Zip Code 25314	Amount of Each Receipt this Period 1000
FEC ID number of contributing federal political committee. C			
Name of Employer Geraniums Inc	Occupation Sales Associates		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000		

Full Name (Last, First, Middle Initial) <b>C. Mr. JD Geist</b>		Date of Receipt MM / DD / YYYY 04 / 18 / 2013	
Mailing Address 931 San Pedro SE		Transaction ID : SA11Ai-CN34744	
City Albuquerque	State NM	Zip Code 87108	Amount of Each Receipt this Period 500
FEC ID number of contributing federal political committee. C			
Name of Employer Self Employed	Occupation Consultant		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2000.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280059

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 323
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Jay W Gerber**

Mailing Address **6 Rosemar Circle**

City **Parkersburg** State **WV** Zip Code **26104**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self Employed** Occupation **Dentist**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2013**

Transaction ID : **SA11Ai-CN35674**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Ronald J Gidwitz**

Mailing Address **200 S Wacker Ste 4000**

City **Chicago** State **IL** Zip Code **60606**

FEC ID number of contributing federal political committee. **C**

Name of Employer **GCG Partners** Occupation **Partner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2013**

Transaction ID : **SA11Ai-CN35564**

Amount of Each Receipt this Period  
**2600**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Clement P Gigliotti**

Mailing Address **727 Stockdale Ave**

City **Monongahela** State **PA** Zip Code **15063**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Merits** Occupation **Construction**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 18 / 2013**

Transaction ID : **SA11Ai-CN34720**

Amount of Each Receipt this Period  
**2600**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**5700.00**

13020280060

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 61 OF 323  
 (check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Katie B Giltinan**

Mailing Address 1411 Meadowcrest Dr

City State Zip Code  
 Charleston WV 25314

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 Retired Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 200

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 03 2013

Transaction ID : SA11AI-CN35202

Amount of Each Receipt this Period  
 100

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Robert J Giuffra Jr**

Mailing Address 125 Broad St

City State Zip Code  
 New York NY 10004

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 Sullivan & Cromwell LLP Attorney

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 1000

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 24 2013

Transaction ID : SA11AI-CN34840

Amount of Each Receipt this Period  
 1000

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Andrew Gladin**

Mailing Address 14 Overlook Road

City State Zip Code  
 Chatham NJ 07928

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
 Sullivan & Cromwell LLP Lawyer

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 1000

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 24 2013

Transaction ID : SA11AI-CN34857

Amount of Each Receipt this Period  
 1000

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2100.00

13020280061

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Sergio Glavis**

Mailing Address **830 Park Ave**

City **New York** State **NY** Zip Code **10021**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Sullivan & Cromwell LLP** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt **04 / 24 / 2013**

Transaction ID : **SA11Ai-CN34843**

Amount of Each Receipt this Period **1000**

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Glenn Goldfarb**

Mailing Address **1629 Stonehenge Rd.**

City **Charleston** State **WV** Zip Code **25314**

FEC ID number of contributing federal political committee. **C**

Name of Employer **self-employed** Occupation **Physician**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt **06 / 03 / 2013**

Transaction ID : **SA11Ai-CN35247**

Amount of Each Receipt this Period **100**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Jay Goldman**

Mailing Address **Po Box 271**

City **Charleston** State **WV** Zip Code **25321**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Goldman Associates Inc** Occupation **Real Estate**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt **05 / 09 / 2013**

Transaction ID : **SA11Ai-CN34975**

Amount of Each Receipt this Period **1000**

**SUBTOTAL** of Receipts This Page (optional)..... **2100.00**

**TOTAL** This Period (last page this line number only).....

13020280062

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. T Michael Goodrich</b>		Date of Receipt MM / DD / YYYY 06 / 19 / 2013
Mailing Address 3320 Dell Road		Transaction ID : SA11Ai-CN35450
City Birmingham	State AL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Goodrich Company	Occupation Chairman	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

Full Name (Last, First, Middle Initial) <b>Mr. Gregg Goudy</b>		Date of Receipt MM / DD / YYYY 04 / 18 / 2013
Mailing Address 9161 Edinburgh Lane		Transaction ID : SA11Ai-CN34707
City Woodbury	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer TCF Financail Corporation	Occupation EVP	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

Full Name (Last, First, Middle Initial) <b>Ms. Karen Grandstand</b>		Date of Receipt MM / DD / YYYY 04 / 18 / 2013
Mailing Address 4435 Wolverton Place		Transaction ID : SA11Ai-CN34712
City Orono	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Frederickson Byron	Occupation Lawyer	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2000.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280063

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d	<input type="checkbox"/>	15
<input type="checkbox"/>	12	<input type="checkbox"/>	13a	<input type="checkbox"/>	13b	<input type="checkbox"/>	14	<input type="checkbox"/>	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Gov Graney</b>		Date of Receipt MM / DD / YYYY <b>05 / 09 / 2013</b>
Mailing Address <b>6 Gat Creek</b>		<b>Transaction ID : SA11Ai-CN34979</b>
City <b>Charleston</b>	State <b>WV</b>	Zip Code <b>25314</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer <b>Petroleum Products Inc.</b>	Occupation <b>Salesperson</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

Full Name (Last, First, Middle Initial) <b>Mrs. Jessica Graney</b>		Date of Receipt MM / DD / YYYY <b>05 / 09 / 2013</b>
Mailing Address <b>3 Quarry Ridge Rd</b>		<b>Transaction ID : SA11Ai-CN34967</b>
City <b>Charlestown</b>	State <b>WV</b>	Zip Code <b>25304</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2500</b>
Name of Employer <b>Self Employed</b>	Occupation <b>Consultant</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2500</b>	

Full Name (Last, First, Middle Initial) <b>Mrs. Jessica Graney</b>		Date of Receipt MM / DD / YYYY <b>05 / 09 / 2013</b>
Mailing Address <b>3 Quarry Ridge Rd</b>		<b>Transaction ID : SA11Ai-CN34969</b>
City <b>Charlestown</b>	State <b>WV</b>	Zip Code <b>25304</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>100</b>
Name of Employer <b>Self Employed</b>	Occupation <b>Consultant</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2600</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>3600.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280064



**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 65 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Patrick Graney**

Mailing Address 3 Quarry Ridge

City Charleston State WV Zip Code 25304

FEC ID number of contributing federal political committee. **C**

Name of Employer One Stop Occupation Business Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt  
MM / DD / YYYY  
**05 / 09 / 2013**

Transaction ID : **SA11Ai-CN34968**

Amount of Each Receipt this Period  
**2500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Patrick Graney**

Mailing Address 3 Quarry Ridge

City Charleston State WV Zip Code 25304

FEC ID number of contributing federal political committee. **C**

Name of Employer One Stop Occupation Business Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
MM / DD / YYYY  
**05 / 09 / 2013**

Transaction ID : **SA11Ai-CN34970**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Terence Graunke**

Mailing Address 676 N Michigan Ave # 4000

City Chicago State IL Zip Code 60611

FEC ID number of contributing federal political committee. **C**

Name of Employer Lake Capital Occupation Chairman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
MM / DD / YYYY  
**06 / 18 / 2013**

Transaction ID : **SA11Ai-CN35491**

Amount of Each Receipt this Period  
**1000**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3600.00**

13020280065

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 66 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. James Grech**

Mailing Address **1000 Consol Energy Dr**

City **Canonsburg** State **PA** Zip Code **15317**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Consol Energy** Occupation **Chief Commercial Officer**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	5	/	2	0	1	3

**2013**

Transaction ID : **SA11AI-CN34576**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Harry L Green Jr.**

Mailing Address **787 W Shannon Rd**

City **Bridgeport** State **WV** Zip Code **26330**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Harry Green Chevrolet** Occupation **President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	6	/	2	0	1	3

**2013**

Transaction ID : **SA11AI-CN35707**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Jonnie Green**

Mailing Address **787 W Shannon Rd**

City **Bridgeport** State **WV** Zip Code **26330**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	6	/	2	0	1	3

**2013**

Transaction ID : **SA11AI-CN35706**

Amount of Each Receipt this Period  
**500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2500.00**

13020280066

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 OF 323  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Anne Dias Griffin**

Mailing Address **180 N Stetson Ave**  
**# 5150**

City **Chicago** State **IL** Zip Code **60601**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Aragon Global Management** Occupation **Portfolio Manager**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 30 2013**

Transaction ID : **SA11Ai-CN35759**

Amount of Each Receipt this Period  
**1500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Kenneth C Griffin**

Mailing Address **131 S Dearborn St**

City **Chicago** State **IL** Zip Code **60603**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Citadel LLC** Occupation **CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 30 2013**

Transaction ID : **SA11Ai-CN35760**

Amount of Each Receipt this Period  
**1500**

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Cheryl Grimm**

Mailing Address **123 Windermere Ct.**

City **McMurray** State **PA** Zip Code **15317**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Southwest Subway Inc.** Occupation **Administrative Assistant**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 18 2013**

Transaction ID : **SA11Ai-CN34740**

Amount of Each Receipt this Period  
**2600**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**5600.00**

13020280067

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Eric Grimm</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 18 / 2013	
Mailing Address 123 Windermere Ct.		Transaction ID : SA11Ai-CN34741	
City McMurray	State PA	Zip Code 15317	Amount of Each Receipt this Period 2600
FEC ID number of contributing federal political committee. C			
Name of Employer Dana Mining	Occupation Coal Mining		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600		

Full Name (Last, First, Middle Initial) <b>Mr. Mark A Grimmett</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 10 / 2013	
Mailing Address 2516 Kanawha Ave SE		Transaction ID : SA11Ai-CN34991	
City Charleston	State WV	Zip Code 25304	Amount of Each Receipt this Period 1000
FEC ID number of contributing federal political committee. C			
Name of Employer Narco Inc.	Occupation Executive		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000		

Full Name (Last, First, Middle Initial) <b>Ms. Priscilla M Haden</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 05 / 10 / 2013	
Mailing Address 15 Quarry Ridge		Transaction ID : SA11Ai-CN34989	
City Charleston	State WV	Zip Code 25304	Amount of Each Receipt this Period 500
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 550		

SUBTOTAL of Receipts This Page (optional).....	4100.00
TOTAL This Period (last page this line number only).....	

13020280068

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

A. Full Name (Last, First, Middle Initial) <b>Mr. Robert E Haden</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 19 / 2013
Mailing Address <b>PO Box 2639</b>		Transaction ID : <b>SA11Ai-CN35396</b>
City <b>Morgantown</b>	State <b>WV</b>	
Zip Code <b>26502-2639</b>		Amount of Each Receipt this Period <b>500</b>
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>Self</b>	Occupation <b>Attorney</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>900</b>	

B. Full Name (Last, First, Middle Initial) <b>Mr. Charles R Hageboeck</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 10 / 2013
Mailing Address <b>Post Office Box 7520</b>		Transaction ID : <b>SA11Ai-CN35017</b>
City <b>Cross Lanes</b>	State <b>WV</b>	
Zip Code <b>25356</b>		Amount of Each Receipt this Period <b>1500</b>
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>City National Bank</b>	Occupation <b>Banker</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1500</b>	

C. Full Name (Last, First, Middle Initial) <b>Mr. John Hardesty</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 19 / 2013
Mailing Address <b>3120 Greystone Dr N</b>		Transaction ID : <b>SA11Ai-CN35410</b>
City <b>Morgantown</b>	State <b>WV</b>	
Zip Code <b>26508</b>		Amount of Each Receipt this Period <b>500</b>
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>self-employed</b>	Occupation <b>consultant</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>500</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280069

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 OF 323  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Victoria G Hardy**

Mailing Address **1207 Upper Ridgeway Rd**

City **Charleston** State **WV** Zip Code **25314**

FEC ID number of contributing federal political committee. **C**

Name of Employer **None** Occupation **Housewife**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
M M / D D / Y Y Y Y  
**05 10 2013**

Transaction ID : **SA11Ai-CN34987**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Charles Hare**

Mailing Address **264 Glenwood Road**

City **Wheeling** State **WV** Zip Code **26003-6618**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**330**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 28 2013**

Transaction ID : **SA11Ai-CN35538**

Amount of Each Receipt this Period  
**200**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. David P Hariton**

Mailing Address **125 Broad St**

City **Brooklyn** State **NY** Zip Code **11201**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Sullivan & Cromwell LLP** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
M M / D D / Y Y Y Y  
**04 18 2013**

Transaction ID : **SA11Ai-CN34752**

Amount of Each Receipt this Period  
**1000**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2200.00**

13020280070

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 OF 323  
(check only one)  
 11a  11b  11c  11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Marc L Harman**

Mailing Address 460 3rd St

City Madison State WV Zip Code 25130

FEC ID number of contributing federal political committee. **C**

Name of Employer self-employed Occupation advisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt  
MM / DD / YYYY  
04 / 18 / 2013

Transaction ID : SA11AI-CN34822

Amount of Each Receipt this Period  
**200**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Thomas Harman**

Mailing Address 11776 Stratford House Pl

City Reston State VA Zip Code 20190

FEC ID number of contributing federal political committee. **C**

Name of Employer Portland Cement Assn Occupation Regulatory Affairs

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2013

Transaction ID : SA11AI-CN35733

Amount of Each Receipt this Period  
**300**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Jack H Hartley**

Mailing Address 798 Garden St

City Charleston State WV Zip Code 25302

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
MM / DD / YYYY  
06 / 10 / 2013

Transaction ID : SA11AI-CN35267

Amount of Each Receipt this Period  
**150**

**SUBTOTAL** of Receipts This Page (optional)..... **650.00**

**TOTAL** This Period (last page this line number only).....

13020280071

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. J. Brett Harvey**

Mailing Address 102 Trotwood Dr

City Venetia State PA Zip Code 15367

FEC ID number of contributing federal political committee. **C**

Name of Employer Consol Energy Inc. Occupation Chairman and CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
MM / DD / YYYY  
**04 / 30 / 2013**

Transaction ID : **SA11Ai-CN35085**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Monica Hatfield**

Mailing Address 1621 Woodvale Dr

City Charleston State WV Zip Code 25314

FEC ID number of contributing federal political committee. **C**

Name of Employer Homemaker Occupation Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
MM / DD / YYYY  
**05 / 09 / 2013**

Transaction ID : **SA11Ai-CN34949**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Megan Hauck**

Mailing Address 133 Duddington PI SE

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C**

Name of Employer Nathanson Hauck Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
MM / DD / YYYY  
**06 / 04 / 2013**

Transaction ID : **SA11Ai-CN35485**

Amount of Each Receipt this Period  
**500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2500.00**

13020280072



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Susan M Haupt**

Mailing Address **405 Quarry Pointe**

City **Charleston** State **WV** Zip Code **25304**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **manager**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450**

Date of Receipt  
M M / D D / Y Y Y Y  
**05 09 2013**

Transaction ID : **SA11Ai-CN34939**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**James B Hayhurst Jr**

Mailing Address **29 Ashwood Pl**

City **Vienna** State **WV** Zip Code **26105**

FEC ID number of contributing federal political committee. **C**

Name of Employer **United Bank** Occupation **Banker**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 30 2013**

Transaction ID : **SA11Ai-CN35675**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Robin Hayhurst**

Mailing Address **16 Boggess Street**

City **Buckhannon** State **WV** Zip Code **26201**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Tri-State Oil & Gas** Occupation **Requested**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
M M / D D / Y Y Y Y  
**04 18 2013**

Transaction ID : **SA11Ai-CN34693**

Amount of Each Receipt this Period  
**250**

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

**1000.00**

13020280073

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 74 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Mr. Ronald Hayhurst</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 18 / 2013	
Mailing Address 103 Bayberry Lane		Transaction ID : SA11Ai-CN34814	
City Fairmont	State WV	Zip Code 26554	Amount of Each Receipt this Period 250
FEC ID number of contributing federal political committee.		C	
Name of Employer Hayhurst Company	Occupation Executive		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250		

Full Name (Last, First, Middle Initial) <b>B. Mr. John Heater</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2013	
Mailing Address 106 Birch St.		Transaction ID : SA11Ai-CN34880	
City Gassaway	State WV	Zip Code 26624	Amount of Each Receipt this Period 2600
FEC ID number of contributing federal political committee.		C	
Name of Employer Go-Mart Inc.	Occupation CEO		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3600		

Full Name (Last, First, Middle Initial) <b>C. Mr. John Heater</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 02 / 2013	
Mailing Address 106 Birch St.		Transaction ID : SA11Ai-CN35393	
City Gassaway	State WV	Zip Code 26624	Amount of Each Receipt this Period -1000 Redesignated to General 2014 <b>[MEMO ITEM]</b> Redesignated
FEC ID number of contributing federal political committee.		C	
Name of Employer Go-Mart Inc.	Occupation CEO		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600		

SUBTOTAL of Receipts This Page (optional).....	2850.00
TOTAL This Period (last page this line number only).....	2850.00

13020280074

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 75 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. John Heater**

Mailing Address 106 Birch St.

City State Zip Code  
Gassaway WV 26624

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Go-Mart Inc. CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3600

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 02 2013

Transaction ID : SA11Ai-CN35394

Amount of Each Receipt this Period  
1000

Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Courtland Helbig**

Mailing Address 3029 Greystone Dr

City State Zip Code  
Morgantown WV 25401

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
G M S President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 08 2013

Transaction ID : SA11Ai-CN34931

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**Mr. William S Henak**

Mailing Address 280 Eastwood Ct

City State Zip Code  
Chanhassen MN 55317

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
TCF Corp Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 08 2013

Transaction ID : SA11Ai-CN35023

Amount of Each Receipt this Period  
500

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1500.00

13020280075

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. William Hepworth**

Mailing Address 101 Oak Trl

City Paw Paw State WV Zip Code 25434

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
MM / DD / YYYY  
**04 / 02 / 2013**

Transaction ID : **SA11Ai-CN34863**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Philip Hereford**

Mailing Address 1330 Mount Vernon Rd

City Charleston State WV Zip Code 25314

FEC ID number of contributing federal political committee. **C**

Name of Employer self-employed Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
MM / DD / YYYY  
**04 / 30 / 2013**

Transaction ID : **SA11Ai-CN35097**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Eleanor Herkness**

Mailing Address PO Box 511

City Lewisburg State WV Zip Code 24901-0511

FEC ID number of contributing federal political committee. **C**

Name of Employer Housewife Occupation Housewife

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
MM / DD / YYYY  
**04 / 30 / 2013**

Transaction ID : **SA11Ai-CN35095**

Amount of Each Receipt this Period  
**200**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1300.00**

13020280076

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Eleanor Herkness**

Mailing Address **PO Box 511**

City **Lewisburg** State **WV** Zip Code **24901-0511**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Housewife** Occupation **Housewife**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2600**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 03 2013**

Transaction ID : **SA11Ai-CN35212**

Amount of Each Receipt this Period  
**2400**

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Eleanor Herkness**

Mailing Address **PO Box 511**

City **Lewisburg** State **WV** Zip Code **24901-0511**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Housewife** Occupation **Housewife**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2800**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 03 2013**

Transaction ID : **SA11Ai-CN35213**

Amount of Each Receipt this Period  
**200**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Wayne Herkness II**

Mailing Address **PO Box 511**

City **Lewisburg** State **WV** Zip Code **24901**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2600**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 19 2013**

Transaction ID : **SA11Ai-CN35430**

Amount of Each Receipt this Period  
**2600**

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

**5200.00**

13020280077

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 78 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. William Heyman**

Mailing Address **133 East 64th St**  
**Apt 4B**

City **New York** State **NY** Zip Code **10065**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Traveless Companies** Occupation **Vice Chairman-CIO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
MM / DD / YYYY  
**05 / 22 / 2013**

Transaction ID : **SA11Ai-CN35049**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Diana Hicks**

Mailing Address **310 Eastview Dr**

City **Parkersburg** State **WV** Zip Code **26104**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Housewife** Occupation **Housewife**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
MM / DD / YYYY  
**05 / 31 / 2013**

Transaction ID : **SA11Ai-CN35237**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Tracy High**

Mailing Address **125 Broad St**

City **New York** State **NY** Zip Code **10004**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Sullivan & Cromwell LLP** Occupation **Lawyer**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
MM / DD / YYYY  
**04 / 18 / 2013**

Transaction ID : **SA11Ai-CN34673**

Amount of Each Receipt this Period  
**1000**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2100.00**

13020280078

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. C.R. Hill</b>		Date of Receipt M M / D D / Y Y Y Y 06 19 2013	
Mailing Address 233 Hawks Chase Ln		Transaction ID : SA11Ai-CN35428	
City Daniels	State WV	Zip Code 25832	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500	
Name of Employer Phillips Machine Service Inc.	Occupation Executive		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500		
Full Name (Last, First, Middle Initial) <b>Ms. Elsie Hillman</b>		Date of Receipt M M / D D / Y Y Y Y 05 09 2013	
Mailing Address 5120 Holyrood Rd		Transaction ID : SA11Ai-CN34935	
City Pittsburgh	State PA	Zip Code 15213	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500	
Name of Employer housewife	Occupation Housewife		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500		
Full Name (Last, First, Middle Initial) <b>Mr. John Hoblitzell</b>		Date of Receipt M M / D D / Y Y Y Y 06 28 2013	
Mailing Address 1535 Thomas Cir		Transaction ID : SA11Ai-CN35536	
City Charleston	State WV	Zip Code 25314	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250	
Name of Employer Kay Casto & Chaney	Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250		
SUBTOTAL of Receipts This Page (optional).....		1250.00	
TOTAL This Period (last page this line number only).....		1250.00	

13020280079

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 80 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Sara Z Hoblitzell**

Mailing Address 1535 Thomas Cir

City Charleston State WV Zip Code 25314

FEC ID number of contributing federal political committee. **C**

Name of Employer Housewife Occupation Housewife

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
MM / DD / YYYY  
**06 / 28 / 2013**

Transaction ID : **SA11Ai-CN35535**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Joey B Holland Jr**

Mailing Address 2141 Presidential Dr

City Charleston State WV Zip Code 25314

FEC ID number of contributing federal political committee. **C**

Name of Employer Joe Holland Chevrolet Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
MM / DD / YYYY  
**04 / 18 / 2013**

Transaction ID : **SA11Ai-CN34809**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Tom L. Horn**

Mailing Address 1205 Upper Ridgeway

City Charleston State WV Zip Code 25314

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
MM / DD / YYYY  
**05 / 10 / 2013**

Transaction ID : **SA11Ai-CN34998**

Amount of Each Receipt this Period  
**1000**

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

**2250.00**

13020280080



**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 81 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Mr. David Horst</b>		Date of Receipt MM / DD / YY 06 / 07 / 2013	
Mailing Address 300 Seattle Slew Dr		Transaction ID : SA11Ai-CN35302	
City Milton	State WV	Zip Code 25541	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100	
Name of Employer Mountwest Community College	Occupation Adjunct Faculty		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 200	

Full Name (Last, First, Middle Initial) <b>B. Ms. Bertha Hoskins</b>		Date of Receipt MM / DD / YY 05 / 09 / 2013	
Mailing Address 2202 Spinnake Court		Transaction ID : SA11Ai-CN34960	
City Reston	State VA	Zip Code 20191	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500	
Name of Employer Self Employed	Occupation Accountant		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500	

Full Name (Last, First, Middle Initial) <b>C. Mr. John A Hotopp</b>		Date of Receipt MM / DD / YY 06 / 10 / 2013	
Mailing Address 1575 Clark Rd		Transaction ID : SA11Ai-CN35334	
City Charleston	State WV	Zip Code 25314	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250	
Name of Employer Retired	Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 300	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	850.00
<b>TOTAL</b> This Period (last page this line number only).....	850.00

13020280081

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 82 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Kenneth Hoy</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 09 / 2013
Mailing Address 133 Tiffany Lane		Transaction ID : SA11AI-CN34940
City Gettysburg	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Retired	Occupation Retired	Election Cycle-to-Date 2014
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Ms. Karen Hughes</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 05 / 2013
Mailing Address 453 Fairview Hill Rd.		Transaction ID : SA11AI-CN34865
City Masontown	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600
Name of Employer Mepco LLC	Occupation Officer	Election Cycle-to-Date 2014
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Mr. Mark Hughes</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 05 / 2013
Mailing Address 453 Fairview Hill Rd.		Transaction ID : SA11AI-CN34866
City Masontown	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600
Name of Employer Alpha Natural Resources	Occupation Miner	Election Cycle-to-Date 2014
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6200.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280082

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 83 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Charles Huguenard</b>		Date of Receipt MM / DD / YYYY <b>04 / 18 / 2013</b>
Mailing Address <b>1256 Cambridge Ave</b>		Transaction ID : <b>SA11Ai-CN34716</b>
City <b>Morgantown</b>	State <b>WV</b>	
Zip Code <b>26505-3259</b>		Amount of Each Receipt this Period <b>1000</b>
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>Genpower Holdings</b>	Occupation <b>Senior Vice President</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

Full Name (Last, First, Middle Initial) <b>Ms. Kate Hull</b>		Date of Receipt MM / DD / YYYY <b>06 / 27 / 2013</b>
Mailing Address <b>409 Jackson PL</b>		Transaction ID : <b>SA11Ai-CN35710</b>
City <b>Alexandria</b>	State <b>VA</b>	
Zip Code <b>22302</b>		Amount of Each Receipt this Period <b>1000</b>
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>Fierce Isakowitz &amp; Blalcock</b>	Occupation <b>Consultant</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

Full Name (Last, First, Middle Initial) <b>Mr. Clint Hurt</b>		Date of Receipt MM / DD / YYYY <b>05 / 28 / 2013</b>
Mailing Address <b>PO Box 1973</b>		Transaction ID : <b>SA11Ai-CN35058</b>
City <b>Midland</b>	State <b>TX</b>	
Zip Code <b>79702</b>		Amount of Each Receipt this Period <b>500</b>
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>self-employed</b>	Occupation <b>Oil/gas exploration</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>500</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280083

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 84 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Wilma L Hutton**

Mailing Address **2718 Cottageville Rd**

City **Mt. Alto** State **WV** Zip Code **25264**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 / 03 / 2013**

Transaction ID : **SA11AI-CN35144**

Amount of Each Receipt this Period  
**150**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Bart J Hyita**

Mailing Address **4 Intermediate Unit Dr**

City **Coal Center** State **PA** Zip Code **15423**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Consol Energy** Occupation **COO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1100**

Date of Receipt  
M M / D D / Y Y Y Y  
**04 / 18 / 2013**

Transaction ID : **SA11AI-CN34736**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Mark Isakowitz**

Mailing Address **3198 Pond Mist Way**

City **Oak Hill** State **VA** Zip Code **20171**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Fierce & Isakowitz** Occupation **Executive**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 / 07 / 2013**

Transaction ID : **SA11AI-CN35271**

Amount of Each Receipt this Period  
**1000**

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

**2150.00**

13020280084

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 85 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Mr. Andrew Jackson</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 18 / 2013	
Mailing Address 5200 France Ave S Unit 32 City Edina State MN Zip Code 55410		Transaction ID : SA11AI-CN34677	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500	
Name of Employer TCF Financial Occupation Auditor			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500	
Full Name (Last, First, Middle Initial) <b>B. Mr. Tom Jasper</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 18 / 2013	
Mailing Address 2102 Sugarwood Drive City Long Drive State MN Zip Code 55356		Transaction ID : SA11AI-CN34695	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000	
Name of Employer TCF Financial Corporation Occupation CFO			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000	
Full Name (Last, First, Middle Initial) <b>C. Mr. Tom Jasper</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 18 / 2013	
Mailing Address 2102 Sugarwood Drive City Long Drive State MN Zip Code 55356		Transaction ID : SA11AI-CN34705	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250	
Name of Employer TCF Financial Corporation Occupation CFO			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1250	
SUBTOTAL of Receipts This Page (optional).....		1750.00	
TOTAL This Period (last page this line number only).....			

13020280085

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 86 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

A. Full Name (Last, First, Middle Initial) <b>Ms. Linda Jernigan</b>		Date of Receipt MM / DD / YYYY 05 / 02 / 2013
Mailing Address 326 Southpointe Dr		Transaction ID : SA11Ai-CN35043
City Charleston	State WV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600
Name of Employer housewife	Occupation Housewife	Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Election Cycle-to-Date 2600		

B. Full Name (Last, First, Middle Initial) <b>Mr. Mark Jeter</b>		Date of Receipt MM / DD / YYYY 04 / 18 / 2013
Mailing Address 6442 Smithtown Road		Transaction ID : SA11Ai-CN34711
City Excelsior	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer TCF Financial Corporation	Occupation Banking	Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Election Cycle-to-Date 250		

C. Full Name (Last, First, Middle Initial) <b>Mr. Mark Joensen</b>		Date of Receipt MM / DD / YYYY 04 / 18 / 2013
Mailing Address 117 Seminary Avenue		Transaction ID : SA11Ai-CN34717
City Greensburg	State PA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300
Name of Employer Allegheny Energy	Occupation Executive	Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Election Cycle-to-Date 300		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3150.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280086

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 87 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

A. Full Name (Last, First, Middle Initial) <b>Mrs. Denise John</b>		Date of Receipt MM / DD / YYYY 06 / 28 / 2013
Mailing Address 1205 Williamsburg Way		Transaction ID : SA11AI-CN35711
City Charleston	State WV	
Zip Code 25314		Amount of Each Receipt this Period 250
FEC ID number of contributing federal political committee. C		
Name of Employer housewife	Occupation Housewife	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

B. Full Name (Last, First, Middle Initial) <b>Mr. Mark Johnson</b>		Date of Receipt MM / DD / YYYY 04 / 01 / 2013
Mailing Address 11893 Bristow Village Blvd		Transaction ID : SA11AI-CN34862
City Bristow	State VA	
Zip Code 20136		Amount of Each Receipt this Period 1000
FEC ID number of contributing federal political committee. C		
Name of Employer Toyota Motor North America Inc	Occupation legislative affairs	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

C. Full Name (Last, First, Middle Initial) <b>Mr. Stephen Johnson</b>		Date of Receipt MM / DD / YYYY 04 / 18 / 2013
Mailing Address 222 Parkman Ave		Transaction ID : SA11AI-CN34721
City Pittsburgh	State PA	
Zip Code 15213		Amount of Each Receipt this Period 1000
FEC ID number of contributing federal political committee. C		
Name of Employer CONSOL	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

SUBTOTAL of Receipts This Page (optional).....	2250.00
TOTAL This Period (last page this line number only).....	

13020280087

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 88 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. T Oliver Johnson III**

Mailing Address **629 Quincy Ln**

City <b>Wexford</b>	State <b>PA</b>	Zip Code <b>15090</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer <b>Consol Energy</b>	Occupation <b>Vice President</b>
--	-------------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
MM / DD / YYYY  
**05 / 01 / 2013**

Transaction ID : **SA11AI-CN34879**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Robert A Johnston**

Mailing Address **1550 Mount Alpha Rd**

City <b>Charleston</b>	State <b>WV</b>	Zip Code <b>25304</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>River Trading Co.</b>	Occupation <b>Executive</b>
--	--------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**2600**

Date of Receipt  
MM / DD / YYYY  
**05 / 09 / 2013**

Transaction ID : **SA11AI-CN34937**

Amount of Each Receipt this Period  
**2600**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Charles T. Jones**

Mailing Address **Rt 2 Box 336A**

City <b>Charleston</b>	State <b>WV</b>	Zip Code <b>25306</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>Amherst Industries Inc</b>	Occupation <b>Executive</b>
---	--------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
MM / DD / YYYY  
**05 / 10 / 2013**

Transaction ID : **SA11AI-CN35016**

Amount of Each Receipt this Period  
**1000**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**4600.00**

13020280088



**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 89 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Laurance Jones**

Mailing Address **229 Stringtown Rd**

City **Looneyville** State **WV** Zip Code **25259**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
M M / D D / Y Y Y Y  
**05 08 2013**

Transaction ID : **SA11AI-CN35046**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Michael Jones**

Mailing Address **2392 Wildwood Dr**

City **Shakopee** State **MN** Zip Code **55379**

FEC ID number of contributing federal political committee. **C**

Name of Employer **TCF Financial Corp** Occupation **Executive**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
M M / D D / Y Y Y Y  
**04 18 2013**

Transaction ID : **SA11AI-CN34714**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Robert Q. Jones**

Mailing Address **PO Box 657**

City **White Sulphur Springs** State **WV** Zip Code **24986-0657**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
M M / D D / Y Y Y Y  
**05 01 2013**

Transaction ID : **SA11AI-CN34892**

Amount of Each Receipt this Period  
**1000**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2500.00**

13020280089

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 90 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Thomas Jones</b>		Date of Receipt MM / DD / YYYY <b>04 / 18 / 2013</b>
Mailing Address <b>2301 Ben Franklin Dr</b>		Transaction ID : <b>SA11Ai-CN34726</b>
City <b>Pittsburgh</b>	State <b>PA</b>	Zip Code <b>15237</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2600</b>
Name of Employer <b>Camelot Coal Co</b>	Occupation <b>Sales</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2600</b>	

Full Name (Last, First, Middle Initial) <b>Mr. Andrew B Jordon</b>		Date of Receipt MM / DD / YYYY <b>05 / 10 / 2013</b>
Mailing Address <b>One Norwood Rd</b>		Transaction ID : <b>SA11Ai-CN35000</b>
City <b>Charleston</b>	State <b>WV</b>	Zip Code <b>25314</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2300</b>
Name of Employer <b>Pritchard Mining Co.</b>	Occupation <b>Executive</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2300</b>	

Full Name (Last, First, Middle Initial) <b>Mr. Eric J Kadel Jr</b>		Date of Receipt MM / DD / YYYY <b>04 / 25 / 2013</b>
Mailing Address <b>1009 Gelston Cir</b>		Transaction ID : <b>SA11Ai-CN34860</b>
City <b>Mclean</b>	State <b>VA</b>	Zip Code <b>22102</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer <b>Sullivan &amp; Cromwell LLP</b>	Occupation <b>Attorney</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>5900.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280090

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 91 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**Mr. Michael L Keiser**

Mailing Address 2450 Lakeview

City State Zip Code  
Chicago IL 60614

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
BDGR Inc. Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt

MM / DD / YYYY  
06 / 20 / 2013

Transaction ID : SA11Ai-CN35454

Amount of Each Receipt this Period

1600

Full Name (Last, First, Middle Initial)

**Mr. Michael E Kelly**

Mailing Address 1 Pavilion Dr

City State Zip Code  
Daniels WV 25832

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
McDermott & Bonenberger PLLC Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1600

Date of Receipt

MM / DD / YYYY  
05 / 09 / 2013

Transaction ID : SA11Ai-CN34946

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

**Mr. Patrick Kelly**

Mailing Address 1614 Teter Rd

City State Zip Code  
Charleston WV 25314

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
WV Health Care Assn CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt

MM / DD / YYYY  
04 / 18 / 2013

Transaction ID : SA11Ai-CN34686

Amount of Each Receipt this Period

500

**SUBTOTAL** of Receipts This Page (optional).....

3100.00

**TOTAL** This Period (last page this line number only).....

13020280091

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 92 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Timothy Kelly**

Mailing Address **3720 IDS Center**  
**80 S 8th St**

City **Minneapolis** State **MN** Zip Code **55402**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Tim Kelly** Occupation **Lawyer**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
MM / DD / YYYY  
**04 / 18 / 2013**

Transaction ID : **SA11AI-CN34700**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. John W Kepner**

Mailing Address **215 Carmel Road**

City **Wheeling** State **WV** Zip Code **26003**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
MM / DD / YYYY  
**06 / 28 / 2013**

Transaction ID : **SA11AI-CN35514**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Kathleen Kies**

Mailing Address **6109 Franklin Park Rd.**

City **Mc Lean** State **VA** Zip Code **22101**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Not Employed** Occupation **Not Employed**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
MM / DD / YYYY  
**06 / 30 / 2013**

Transaction ID : **SA11AI-CN35562**

Amount of Each Receipt this Period  
**2600**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3350.00**

13020280092

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**Mr. Kenenth Kies**

Mailing Address **6109 Franklin Park Rd.**

City	State	Zip Code
Mc Lean	VA	22101

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2013

Transaction ID : SA11Ai-CN35561

Amount of Each Receipt this Period

2600

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Federal Policy Group	Consultant

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

2600

Full Name (Last, First, Middle Initial)  
**Mr. Arthur King**

Mailing Address **748 Myrtle Rd**

City	State	Zip Code
Charleston	WV	25314

Date of Receipt

M M / D D / Y Y Y Y  
05 / 10 / 2013

Transaction ID : SA11Ai-CN34986

Amount of Each Receipt this Period

2600

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Kanawha Stone Co.	Executive

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

2600

Full Name (Last, First, Middle Initial)  
**Mr. David A. King**

Mailing Address **1514 Stonehenge Rd**

City	State	Zip Code
Charleston	WV	25314-1660

Date of Receipt

M M / D D / Y Y Y Y  
06 / 10 / 2013

Transaction ID : SA11Ai-CN35367

Amount of Each Receipt this Period

500

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Retired	Retired

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

500

**SUBTOTAL** of Receipts This Page (optional).....

5700.00

**TOTAL** This Period (last page this line number only).....

13020280093

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 94 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

A. Full Name (Last, First, Middle Initial) <b>Michael A. King</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2013
Mailing Address 1503 Greenmont Hills Dr		Transaction ID : SA11Ai-CN35662
City Vienna	State WV	
Zip Code 26105		Amount of Each Receipt this Period 1000
FEC ID number of contributing federal political committee. C		
Name of Employer Parkersburg Hospital	Occupation Chairman and CEO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

B. Full Name (Last, First, Middle Initial) <b>Mrs. Virginia L King</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 10 / 2013
Mailing Address 748 Myrtle Rd		Transaction ID : SA11Ai-CN34985
City Charleston	State WV	
Zip Code 25314		Amount of Each Receipt this Period 2600
FEC ID number of contributing federal political committee. C		
Name of Employer Kanawha Stone Co.	Occupation Executive	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600	

C. Full Name (Last, First, Middle Initial) <b>Mr. James A. Kinsey</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 04 / 2013
Mailing Address Rural Route One Box 169		Transaction ID : SA11Ai-CN35130
City Flemington	State WV	
Zip Code 26347		Amount of Each Receipt this Period 250
FEC ID number of contributing federal political committee. C		
Name of Employer self-employed	Occupation Farmer	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3850.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280094

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Oren Kitts**

Mailing Address 1509 Mount Vernon Rd

City Charleston State WV Zip Code 25314

FEC ID number of contributing federal political committee. **C**

Name of Employer ICG Inc. Occupation Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
05 09 2013

Transaction ID : SA11Ai-CN34942

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Andrew Kligerman**

Mailing Address 38 Brown Ave

City Rye State NY Zip Code 10580

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Finance

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
06 19 2013

Transaction ID : SA11Ai-CN35436

Amount of Each Receipt this Period  
2600

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Edward D Knight**

Mailing Address PO Box 109

City Lewisburg State WV Zip Code 24901

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
06 19 2013

Transaction ID : SA11Ai-CN35423

Amount of Each Receipt this Period  
200

**SUBTOTAL** of Receipts This Page (optional)..... 3800.00

**TOTAL** This Period (last page this line number only).....

13020280095

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 96 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mrs. Miriam W. Knight</b>		Date of Receipt MM / DD / YYYY 06 / 03 / 2013
Mailing Address PO Box 111 Tuscowilla Farm		Transaction ID : SA11Ai-CN35172
City Lewisburg	State WV	
Zip Code 24901		Amount of Each Receipt this Period 1000
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

Full Name (Last, First, Middle Initial) <b>Mr. Harlan Korenraes</b>		Date of Receipt MM / DD / YYYY 06 / 20 / 2013
Mailing Address 5423 Park Ln		Transaction ID : SA11Ai-CN35403
City Dallas	State TX	
Zip Code 75220		Amount of Each Receipt this Period 2500
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500
Name of Employer Korenvaes Mgmt LLC	Occupation Investment Mgmt	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500	

Full Name (Last, First, Middle Initial) <b>Ms. Alexandra D Korry</b>		Date of Receipt MM / DD / YYYY 05 / 08 / 2013
Mailing Address 262 Central Park W #3A		Transaction ID : SA11Ai-CN35025
City New York	State NY	
Zip Code 10024		Amount of Each Receipt this Period 1000
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Sullivan & Cromwell LLP	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4500.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280096



**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 97 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Ms. Clare L Kremer</b>		Date of Receipt MM / DD / YYYY 06 / 20 / 2013
Mailing Address 915 St. James Ln.		Transaction ID : SA11AI-CN35460
City Vero Beach	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer Housewife	Occupation Housewife	Election Cycle-to-Date 450
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>B. Mr. Don Kresen</b>		Date of Receipt MM / DD / YYYY 06 / 03 / 2013
Mailing Address 186 Glenwood Rd		Transaction ID : SA11AI-CN35169
City Wheeling	State WV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200
Name of Employer Self Employed	Occupation Attorney	Election Cycle-to-Date 200
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>C. Mrs. Dorothy E Kugel</b>		Date of Receipt MM / DD / YYYY 05 / 01 / 2013
Mailing Address 502 N York Rd		Transaction ID : SA11AI-CN34881
City Hinsdale	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300
Name of Employer Retired	Occupation Retired R.N.	Election Cycle-to-Date 300
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional).....	750.00
TOTAL This Period (last page this line number only).....	

13020280097

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 98 OF 323  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Jeff LaFleur**

Mailing Address **303 Creekstone Rdg**

City **Charleston** State **WV** Zip Code **25309**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AEP** Occupation **Executive**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 30 2013**

Transaction ID : **SA11AI-CN35614**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Charlotte R Lane**

Mailing Address **411 Virginia East Suit**

City **Charleston** State **WV** Zip Code **25339**

FEC ID number of contributing federal political committee. **C**

Name of Employer **US International Trade Comm.** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 18 2013**

Transaction ID : **SA11AI-CN34692**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Charlotte R Lane**

Mailing Address **411 Virginia East Suit**

City **Charleston** State **WV** Zip Code **25339**

FEC ID number of contributing federal political committee. **C**

Name of Employer **US International Trade Comm.** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 10 2013**

Transaction ID : **SA11AI-CN34984**

Amount of Each Receipt this Period  
**500**

**SUBTOTAL** of Receipts This Page (optional)..... **1000.00**

**TOTAL** This Period (last page this line number only).....

13020280098

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 99 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Charles C. Lanham</b>		Date of Receipt MM / DD / YYYY <b>06 28 2013</b>
Mailing Address <b>1003 Simpson Pl</b>		<b>Transaction ID : SA11Ai-CN35550</b>
City <b>Point Pleasant</b>	State <b>WV</b>	Zip Code <b>25550</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>200</b>
Name of Employer <b>Retired</b>	Occupation <b>Retired</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>650</b>	

Full Name (Last, First, Middle Initial) <b>Mr. David Lanham</b>		Date of Receipt MM / DD / YYYY <b>05 09 2013</b>
Mailing Address <b>2067 Smith Rd</b>		<b>Transaction ID : SA11Ai-CN34978</b>
City <b>Charleston</b>	State <b>WV</b>	Zip Code <b>25314</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer <b>Self Employed</b>	Occupation <b>Executive</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

Full Name (Last, First, Middle Initial) <b>Mr. James L Laurita Jr</b>		Date of Receipt MM / DD / YYYY <b>05 08 2013</b>
Mailing Address <b>2367 Grafton Rd</b>		<b>Transaction ID : SA11Ai-CN35021</b>
City <b>Morgantown</b>	State <b>WV</b>	Zip Code <b>26508-3504</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2600</b>
Name of Employer <b>Mepco Inc</b>	Occupation <b>Executive</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2600</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>3800.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280099

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 100 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. James L Laurita Sr</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 18 / 2013
Mailing Address 28 Keener Road		Transaction ID : SA11Ai-CN35032
City Morgantown	State WV	Zip Code 26508
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 1000
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	\$ 1000

Full Name (Last, First, Middle Initial) <b>Mrs. Rebecca L Laurita</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 08 / 2013
Mailing Address 2367 Grafton Rd		Transaction ID : SA11Ai-CN35020
City Morgantown	State WV	Zip Code 26508-3504
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 2600
Name of Employer Housewife	Occupation Housewife	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	\$ 2600

Full Name (Last, First, Middle Initial) <b>Mr. Hank Lawrence</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 18 / 2013
Mailing Address 411 W Philadelphia Ave		Transaction ID : SA11Ai-CN34719
City Bridgeport	State WV	Zip Code 26330
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 1000
Name of Employer Steptoe & Johnson PLLC	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	\$ 1000

<b>SUBTOTAL</b> of Receipts This Page (optional).....	\$ 4600.00
<b>TOTAL</b> This Period (last page this line number only).....	\$

13020280100

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Michael Lawrence**

Mailing Address **120 Tiskelwah Ave**

City **Elkview** State **WV** Zip Code **25071-9219**

FEC ID number of contributing federal political committee. **C**

Name of Employer **West Virginia American Water** Occupation **Working Crew Leader**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 10 2013**

Transaction ID : **SA11AI-CN35364**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Michael Lawrence**

Mailing Address **120 Tiskelwah Ave**

City **Elkview** State **WV** Zip Code **25071-9219**

FEC ID number of contributing federal political committee. **C**

Name of Employer **West Virginia American Water** Occupation **Working Crew Leader**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 28 2013**

Transaction ID : **SA11AI-CN35551**

Amount of Each Receipt this Period  
**200**

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Thomas H Layne III**

Mailing Address **119 Court St Box 746 S**

City **Ripley** State **WV** Zip Code **25271**

FEC ID number of contributing federal political committee. **C**

Name of Employer **self-employed** Occupation **Dentist**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 20 2013**

Transaction ID : **SA11AI-CN35048**

Amount of Each Receipt this Period  
**1000**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1300.00**

13020280101

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 102 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Michael H Lee</b>		Date of Receipt MM / DD / YYYY <b>04 / 18 / 2013</b>
Mailing Address <b>PO Box 35</b>		Transaction ID : <b>SA11Ai-CN34729</b>
City <b>Charlertoi</b>	State <b>PA</b>	
Zip Code <b>15022</b>		Amount of Each Receipt this Period <b>1000</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer <b>Lee Supply Co.</b>	Occupation <b>Owner</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1500</b>	

Full Name (Last, First, Middle Initial) <b>Ms. Mary M Lemmon</b>		Date of Receipt MM / DD / YYYY <b>06 / 30 / 2013</b>
Mailing Address <b>284 Wildwood Lake</b>		Transaction ID : <b>SA11Ai-CN35601</b>
City <b>Morgantown</b>	State <b>WV</b>	
Zip Code <b>26508-3541</b>		Amount of Each Receipt this Period <b>100</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>100</b>
Name of Employer <b>retired</b>	Occupation <b>retired</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>200</b>	

Full Name (Last, First, Middle Initial) <b>Ms. Ruth Lemmon</b>		Date of Receipt MM / DD / YYYY <b>04 / 18 / 2013</b>
Mailing Address <b>225 Brooke Lane Dr</b>		Transaction ID : <b>SA11Ai-CN34821</b>
City <b>Nitro</b>	State <b>WV</b>	
Zip Code <b>25143</b>		Amount of Each Receipt this Period <b>250</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250</b>
Name of Employer <b>Auto Dealers Association</b>	Occupation <b>Director</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>250</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1350.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280102

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 103 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Ms. Ruth Lemmon</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 10 / 2013
Mailing Address 225 Brooke Lane Dr		Transaction ID : SA11Ai-CN35003
City Nitro	State WV Zip Code 25143	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 1000
Name of Employer Auto Dealers Association	Occupation Director	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1250	

Full Name (Last, First, Middle Initial) <b>B. Ms. Ruth Lemmon</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 30 / 2013
Mailing Address 225 Brooke Lane Dr		Transaction ID : SA11Ai-CN35532
City Nitro	State WV Zip Code 25143	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 1000
Name of Employer Auto Dealers Association	Occupation Director	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2250	

Full Name (Last, First, Middle Initial) <b>C. Mr. Joseph M Letnaunchyn</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 18 / 2013
Mailing Address 225 Ariel Heights		Transaction ID : SA11Ai-CN34819
City Charleston	State WV Zip Code 25311	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 250
Name of Employer WV Hospital Association	Occupation President	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1750	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2250.00
<b>TOTAL</b> This Period (last page this line number only) .....	

13020280103

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 104 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Charles S Lewis</b>		Date of Receipt M M / D D / Y Y Y Y Y Y <b>06 30 2013</b>
Mailing Address <b>31 Michael St</b>		<b>Transaction ID : SA11AI-CN35628</b>
City <b>Scott Depot</b>	State <b>WV</b>	Zip Code <b>25560</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>100</b>
Name of Employer <b>CAMC</b>	Occupation <b>Pharmacist</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>200</b>	

Full Name (Last, First, Middle Initial) <b>Ms. Mary M Lewis</b>		Date of Receipt M M / D D / Y Y Y Y Y Y <b>05 07 2013</b>
Mailing Address <b>6506 Blue Wing Dr</b>		<b>Transaction ID : SA11AI-CN34918</b>
City <b>Alexandria</b>	State <b>VA</b>	Zip Code <b>22307</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500</b>
Name of Employer <b>The Fritts Group</b>	Occupation <b>Government Relations</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>500</b>	

Full Name (Last, First, Middle Initial) <b>Mr. William Lieberman</b>		Date of Receipt M M / D D / Y Y Y Y Y Y <b>04 18 2013</b>
Mailing Address <b>625 Liberty Ave</b> <b>Floor 10</b>		<b>Transaction ID : SA11AI-CN34667</b>
City <b>Pittsburgh</b>	State <b>PA</b>	Zip Code <b>15222</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer <b>Quality Insurance Concepts Inc.</b>	Occupation <b>President</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1600.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280104



**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 105 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Mr. Mark S Lillie</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013	
Mailing Address 1161 Midwest Lane		Transaction ID : SA11Ai-CN35751	
City Wheaton	State IL	Zip Code 60189	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250	
Name of Employer Kirkland & Ellis	Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250		

Full Name (Last, First, Middle Initial) <b>B. Mr. Kristopher Lilly</b>		Date of Receipt MM / DD / YYYY 04 / 18 / 2013	
Mailing Address 1047 Autumn Ave		Transaction ID : SA11Ai-CN34734	
City Morgantown	State WV	Zip Code 26508	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250	
Name of Employer Red Bone Mining Company	Occupation Mine Manager		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250		

Full Name (Last, First, Middle Initial) <b>C. Mr. Erik D Lindauer</b>		Date of Receipt MM / DD / YYYY 04 / 18 / 2013	
Mailing Address 37 Seminole Way		Transaction ID : SA11Ai-CN34675	
City Short Hills	State NJ	Zip Code 07078	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000	
Name of Employer Sullivan & Cromwell LLP	Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000		

SUBTOTAL of Receipts This Page (optional).....	1500.00
TOTAL This Period (last page this line number only).....	

13020280105

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 106 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Russell Lindner</b>		Date of Receipt MM / DD / YYYY 05 / 09 / 2013
Mailing Address 1025 Thomas Jefferson St NW Suite 302 West		Transaction ID : SA11AI-CN34982
City Washington	State DC	
Zip Code 20007		Amount of Each Receipt this Period 2500
FEC ID number of contributing federal political committee. C		
Name of Employer The Forge Company	Occupation CEO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500	

Full Name (Last, First, Middle Initial) <b>Mr. James F Linsenmeyer</b>		Date of Receipt MM / DD / YYYY 05 / 01 / 2013
Mailing Address 106 Yorktowne Place		Transaction ID : SA11AI-CN34887
City Charleston	State WV	
Zip Code 25309		Amount of Each Receipt this Period 500
FEC ID number of contributing federal political committee. C		
Name of Employer Proud Eagle Inc.	Occupation COO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

Full Name (Last, First, Middle Initial) <b>Ms. Diana Long</b>		Date of Receipt MM / DD / YYYY 04 / 18 / 2013
Mailing Address 1410 Woodmere Dr		Transaction ID : SA11AI-CN34803
City Charleston	State WV	
Zip Code 25314		Amount of Each Receipt this Period 1000
FEC ID number of contributing federal political committee. C		
Name of Employer retired	Occupation retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4000.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280106

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 107 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Maria Lorensen**

Mailing Address **903 Race St W**

City **Martinsburg** State **WV** Zip Code **25401**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Hospice Of Teh Panhandle** Occupation **Assistant**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 18 / 2013**

Transaction ID : **SA11AI-CN34666**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Dr. M Barry Loudon MD**

Mailing Address **5503 River Road**

City **Vienna** State **WV** Zip Code **26105**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Parkersburg Neurological Associates** Occupation **Neurologist**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 20 / 2013**

Transaction ID : **SA11AI-CN35458**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Robert R Luchetti**

Mailing Address **Plesant Cove Farm**  
**145 Point Run Road**

City **Triadelphia** State **WV** Zip Code **26059**

FEC ID number of contributing federal political committee. **C**

Name of Employer **self-employed** Occupation **Farmer**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 03 / 2013**

Transaction ID : **SA11AI-CN35211**

Amount of Each Receipt this Period  
**100**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**600.00**

13020280107

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Lawrence B Lyons**

Mailing Address 114 Center St

City Madison State WV Zip Code 25130

FEC ID number of contributing federal political committee. **C**

Name of Employer Lyon Oil Co Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
\$ 500

Date of Receipt  
MM / DD / YYYY  
06 / 03 / 2013

Transaction ID : SA11AI-CN35261

Amount of Each Receipt this Period  
\$ 200

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Lawrence B Lyons**

Mailing Address 114 Center St

City Madison State WV Zip Code 25130

FEC ID number of contributing federal political committee. **C**

Name of Employer Lyon Oil Co Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
\$ 900

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2013

Transaction ID : SA11AI-CN35690

Amount of Each Receipt this Period  
\$ 400

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Brian Maass**

Mailing Address 2626 Clover Field Cir

City Chaska State MN Zip Code 55318

FEC ID number of contributing federal political committee. **C**

Name of Employer TCF Occupation Treasurer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
\$ 200

Date of Receipt  
MM / DD / YYYY  
04 / 18 / 2013

Transaction ID : SA11AI-CN34676

Amount of Each Receipt this Period  
\$ 200

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

\$ 800.00

13020280108

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: (check only one)	PAGE 109 OF 323
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Peter Magnotta</b>		Date of Receipt MM / DD / YYYY 04 / 30 / 2013
Mailing Address 211 Mitchell Road		Transaction ID : SA11AI-CN35084
City Eighty Four	State PA	
Zip Code 15330		Amount of Each Receipt this Period \$ 500
FEC ID number of contributing federal political committee. C		
Name of Employer 18 Karat Inc.	Occupation President	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date \$ 500	

Full Name (Last, First, Middle Initial) <b>Mr. Eric Mandel</b>		Date of Receipt MM / DD / YYYY 06 / 20 / 2013
Mailing Address 5 Heather Ln		Transaction ID : SA11Ai-CN35404
City White Plains	State NY	
Zip Code 10605		Amount of Each Receipt this Period \$ 2600
FEC ID number of contributing federal political committee. C		
Name of Employer Self Employed	Occupation Physician	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date \$ 2600	

Full Name (Last, First, Middle Initial) <b>Mr. Jimmie Lee Mangus</b>		Date of Receipt MM / DD / YYYY 06 / 10 / 2013
Mailing Address 3800 Virginia Avenue SE		Transaction ID : SA11AI-CN35357
City Charleston	State WV	
Zip Code 25304-1508		Amount of Each Receipt this Period \$ 250
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date \$ 500	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3350.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280109

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Peter I Mason</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013
Mailing Address 311 S Wacker Dr S # 3000		Transaction ID : SA11Ai-CN35761
City Chicago	State IL	
Zip Code 60606		Amount of Each Receipt this Period 1000
FEC ID number of contributing federal political committee. C		
Name of Employer Freeborn & Peters	Occupation Lawyer	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

Full Name (Last, First, Middle Initial) <b>Mr. Mike Matheny</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013
Mailing Address 1001 51st St		Transaction ID : SA11Ai-CN35663
City Vienna	State WV	
Zip Code 26105		Amount of Each Receipt this Period 1000
FEC ID number of contributing federal political committee. C		
Name of Employer Matheny Motor Trucks	Occupation CEO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

Full Name (Last, First, Middle Initial) <b>Mr. J. S. McClinton III</b>		Date of Receipt MM / DD / YYYY 06 / 20 / 2013
Mailing Address 1325 7th St		Transaction ID : SA11Ai-CN35462
City Parkersburg	State WV	
Zip Code 26101		Amount of Each Receipt this Period 500
FEC ID number of contributing federal political committee. C		
Name of Employer McClinton Chevrolet Co.	Occupation Auto Dealer	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2500.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280110

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Linda B McCormick**

Mailing Address 5604 Greenmont Pl

City Vienna State WV Zip Code 26105

FEC ID number of contributing federal political committee. **C**

Name of Employer self-employed Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **700**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 30 2013**

Transaction ID : **SA11Ai-CN35655**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Tom McCoy**

Mailing Address 359 Baker Lane

City Charleston State WV Zip Code 25302

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 18 2013**

Transaction ID : **SA11Ai-CN34801**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Mark McCullough**

Mailing Address 8963 Winding Creek Way

City Pinkerington State OH Zip Code 43147

FEC ID number of contributing federal political committee. **C**

Name of Employer American Electric Power Occupation Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **800**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 03 2013**

Transaction ID : **SA11Ai-CN35166**

Amount of Each Receipt this Period  
**800**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2300.00**

13020280111

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 112 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. M. Patrick McCune</b>		Date of Receipt M M / D D / Y Y Y Y <b>04 18 2013</b>
Mailing Address <b>2212 Ashbury Close</b>		<b>Transaction ID : SA11AI-CN34724</b>
City <b>Powell</b>	State <b>OH</b>	Zip Code <b>43065</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer <b>Consol Energy Inc.</b>	Occupation <b>State Lobbyist</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

Full Name (Last, First, Middle Initial) <b>Daniel McGraw</b>		Date of Receipt M M / D D / Y Y Y Y <b>06 30 2013</b>
Mailing Address <b>5227 Glenbrook Dr</b>		<b>Transaction ID : SA11AI-CN35667</b>
City <b>Vienna</b>	State <b>WV</b>	Zip Code <b>26105</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2600</b>
Name of Employer <b>self-employed</b>	Occupation <b>Physician</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2600</b>	

Full Name (Last, First, Middle Initial) <b>Mr. Brent McIntosh</b>		Date of Receipt M M / D D / Y Y Y Y <b>04 24 2013</b>
Mailing Address <b>6610 Braeburn Pkwy</b>		<b>Transaction ID : SA11AI-CN34847</b>
City <b>Bethesda</b>	State <b>MD</b>	Zip Code <b>20817</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500</b>
Name of Employer <b>Sullivan &amp; Cromwell LLP</b>	Occupation <b>Attorney</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>500</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>4100.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280112



**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**Mr. Jeffrey McIntyre**

A. Mailing Address **15 Presidio Place**

City **Cross Lanes** State **WV** Zip Code **25313**

FEC ID number of contributing federal political committee. **C**

Name of Employer **West Virginia American Water** Occupation **President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 18 2013**

Transaction ID : **SA11Ai-CN34820**

Amount of Each Receipt this Period  
**250**

Full Name (Last, First, Middle Initial)  
**Dr. Douglas E McKinney**

B. Mailing Address **127 Willis Ave**

City **Bridgeport** State **WV** Zip Code **26330**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BSA INC.** Occupation **Urologist**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 01 2013**

Transaction ID : **SA11Ai-CN34896**

Amount of Each Receipt this Period  
**500**

Full Name (Last, First, Middle Initial)  
**Mr. Felicidad McKown**

C. Mailing Address **4 Quarry Ridge**

City **Charleston** State **WV** Zip Code **25304**

FEC ID number of contributing federal political committee. **C**

Name of Employer **None** Occupation **Housewife**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 10 2013**

Transaction ID : **SA11Ai-CN35006**

Amount of Each Receipt this Period  
**1000**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1750.00**

13020280113

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 114 OF 323

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Joseph McLaughlin</b>		Date of Receipt MM / DD / YYYY <b>04 / 23 / 2013</b>
Mailing Address <b>12 Colonial Ln</b>		<b>Transaction ID : SA11Ai-CN34824</b>
City <b>Riverside</b>	State <b>CT</b>	Zip Code <b>06878</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer <b>Sidley Austin LLP</b>	Occupation <b>Lawyer</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

Full Name (Last, First, Middle Initial) <b>Dr. Richard E. McWhorter</b>		Date of Receipt MM / DD / YYYY <b>04 / 24 / 2013</b>
Mailing Address <b>PO Box 328</b>		<b>Transaction ID : SA11Ai-CN35034</b>
City <b>Huntington</b>	State <b>WV</b>	Zip Code <b>25708-0328</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>100</b>
Name of Employer <b>Retired</b>	Occupation <b>Retired</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>400</b>	

Full Name (Last, First, Middle Initial) <b>Dr. Richard E. McWhorter</b>		Date of Receipt MM / DD / YYYY <b>05 / 24 / 2013</b>
Mailing Address <b>PO Box 328</b>		<b>Transaction ID : SA11Ai-CN35215</b>
City <b>Huntington</b>	State <b>WV</b>	Zip Code <b>25708-0328</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>100</b>
Name of Employer <b>Retired</b>	Occupation <b>Retired</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>500</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1200.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280114

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Dr. Richard E. McWhorter</b>		Date of Receipt MM / DD / YYYY <b>06 / 24 / 2013</b>
Mailing Address <b>PO Box 328</b>		<b>Transaction ID : SA11AI-CN35700</b>
City <b>Huntington</b>	State <b>WV</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>100</b>
Name of Employer <b>Retired</b>	Occupation <b>Retired</b>	Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Election Cycle-to-Date <b>600</b>		

Full Name (Last, First, Middle Initial) <b>Mr. John Mead</b>		Date of Receipt MM / DD / YYYY <b>04 / 24 / 2013</b>
Mailing Address <b>411 Mill River Rd</b>		<b>Transaction ID : SA11AI-CN34846</b>
City <b>Upper Brookville</b>	State <b>NY</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer <b>Sullivan &amp; Cromwell LLP</b>	Occupation <b>Lawyer</b>	Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Election Cycle-to-Date <b>1000</b>		

Full Name (Last, First, Middle Initial) <b>Mr. C. Kenton Meadows</b>		Date of Receipt MM / DD / YYYY <b>05 / 10 / 2013</b>
Mailing Address <b>822 Canoe Run Rd</b>		<b>Transaction ID : SA11AI-CN35009</b>
City <b>Gassaway</b>	State <b>WV</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer <b>Kenton Meadows Co.</b>	Occupation <b>Executive</b>	Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Election Cycle-to-Date <b>1000</b>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2100.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280115

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Dr. Robert T Means Jr</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 01 / 2013
Mailing Address 2204 Abbeywood Rd		Transaction ID : SA11AI-CN34902
City Lexington	State KY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer University Of KY	Occupation Physician	Election Cycle-to-Date 500
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Mr. Thomas Medaglia III</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 18 / 2013
Mailing Address 17054 Bold Venture Dr		Transaction ID : SA11AI-CN34669
City Leesburg	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500
Name of Employer Thomas Advisors Inc.	Occupation Government Relations	Election Cycle-to-Date 2500
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Mr. Enerio Melis</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 14 / 2013
Mailing Address 1108 Skytop Cir		Transaction ID : SA11AI-CN35051
City Charleston	State WV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer retired	Occupation retired	Election Cycle-to-Date 500
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3500.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280116

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Jeffrey Merzel</b>		Date of Receipt MM / DD / YYYY <b>05 / 29 / 2013</b>	
Mailing Address <b>2685 Brentwood Rd</b>		<b>Transaction ID : SA11Ai-CN35221</b>	
City <b>Columbus</b>	State <b>OH</b>	Zip Code <b>43209</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250</b>	
Name of Employer <b>American Electric Power</b>	Occupation <b>Energy Trader</b>		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>250</b>		

Full Name (Last, First, Middle Initial) <b>Mr. Joseph Messina</b>		Date of Receipt MM / DD / YYYY <b>06 / 07 / 2013</b>	
Mailing Address <b>42 Seven Oaks Road</b>		<b>Transaction ID : SA11Ai-CN35308</b>	
City <b>Marrero</b>	State <b>LA</b>	Zip Code <b>70072</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250</b>	
Name of Employer <b>Receivable Recovery Services LLC</b>	Occupation <b>Owner</b>		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>250</b>		

Full Name (Last, First, Middle Initial) <b>Mr. Morton Meyerson</b>		Date of Receipt MM / DD / YYYY <b>06 / 19 / 2013</b>	
Mailing Address <b>4441 Buena Vista</b>		<b>Transaction ID : SA11Ai-CN35437</b>	
City <b>Dallas</b>	State <b>TX</b>	Zip Code <b>75205</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2600</b>	
Name of Employer <b>Retired</b>	Occupation <b>Retired</b>		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2600</b>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>3100.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280117

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 118 OF 323	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Eugene Meyung**

Mailing Address 1055 Wood Lane

City Charlottesville State VA Zip Code 22901

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 250

Date of Receipt  
M M / D D / Y Y Y Y  
04 30 2013

Transaction ID : SA11AI-CN35088

Amount of Each Receipt this Period  
250

**B.** Full Name (Last, First, Middle Initial)  
**Charles Mildren**

Mailing Address Post Office Box 5424

City Vienna State WV Zip Code 26105

FEC ID number of contributing federal political committee. **C**

Name of Employer United Bank Occupation Banker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 500

Date of Receipt  
M M / D D / Y Y Y Y  
06 30 2013

Transaction ID : SA11AI-CN35665

Amount of Each Receipt this Period  
500

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Kenneth Miller**

Mailing Address 2660 Ravenwood Ct

City Wexford State PA Zip Code 15090

FEC ID number of contributing federal political committee. **C**

Name of Employer Civil & Environmental Consultants Occupation Engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
M M / D D / Y Y Y Y  
04 18 2013

Transaction ID : SA11AI-CN34789

Amount of Each Receipt this Period  
1000

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1750.00

13020280118

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 119 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Michael Miller</b>		Date of Receipt MM / DD / YYYY <b>06 / 20 / 2013</b>
Mailing Address <b>333 Butterfield Rd E</b>		Transaction ID : <b>SA11Ai-CN35401</b>
City <b>Lombard</b>	State <b>IL</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer <b>AUM</b>	Occupation <b>CEO</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

Full Name (Last, First, Middle Initial) <b>Mr. Michael Millette</b>		Date of Receipt MM / DD / YYYY <b>06 / 30 / 2013</b>
Mailing Address <b>PO Box 7138</b>		Transaction ID : <b>SA11Ai-CN35560</b>
City <b>Garden City</b>	State <b>NY</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer <b>Goldman Sachs</b>	Occupation <b>Managing Director</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

Full Name (Last, First, Middle Initial) <b>Mr. A. A. A. Modena</b>		Date of Receipt MM / DD / YYYY <b>06 / 10 / 2013</b>
Mailing Address <b>2007 Camelia Cir</b>		Transaction ID : <b>SA11Ai-CN35380</b>
City <b>Midlothian</b>	State <b>VA</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>200</b>
Name of Employer <b>retired</b>	Occupation <b>retired</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>200</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2200.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280119

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 120 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. William Mohrman</b>		Date of Receipt MM / DD / YYYY 04 / 19 / 2013
Mailing Address <b>4415 Jewel Court N</b>		Transaction ID : <b>SA11Ai-CN34715</b>
City <b>Plymouth</b>	State <b>MN</b>	Zip Code <b>55446</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500</b>
Name of Employer <b>Mohrman &amp; Kaardal Law</b>	Occupation <b>Attorney</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>500</b>	

Full Name (Last, First, Middle Initial) <b>Mr. William Monahan</b>		Date of Receipt MM / DD / YYYY 04 / 24 / 2013
Mailing Address <b>212 E 95th St Apt 1A</b>		Transaction ID : <b>SA11Ai-CN34851</b>
City <b>New York</b>	State <b>NY</b>	Zip Code <b>10128</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer <b>Sullivan &amp; Cromwell</b>	Occupation <b>Attorney</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

Full Name (Last, First, Middle Initial) <b>Mr. Thomas Moran</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013
Mailing Address <b>1 N Franklin St # 700</b>		Transaction ID : <b>SA11Ai-CN35745</b>
City <b>Chicago</b>	State <b>IL</b>	Zip Code <b>60606</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2600</b>
Name of Employer <b>Moran &amp; Co</b>	Occupation <b>Chairman</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2600</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>4100.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280120



**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 121 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Thomas Moran</b>		Date of Receipt M M / D D / Y Y Y Y 06 30 2013
Mailing Address 1 N Franklin St # 700		Transaction ID : SA11Ai-CN35746
City Chicago	State IL	
Zip Code 60606		Amount of Each Receipt this Period \$ 2400
FEC ID number of contributing federal political committee. C		
Name of Employer Moran & Co	Occupation Chairman	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date \$ 5000	

Full Name (Last, First, Middle Initial) <b>Mr. Paul V Morgan Sr.</b>		Date of Receipt M M / D D / Y Y Y Y 06 28 2013
Mailing Address RR 3 Box 100 M		Transaction ID : SA11Ai-CN35548
City Elizabeth	State WV	
Zip Code 26143-9340		Amount of Each Receipt this Period \$ 200
FEC ID number of contributing federal political committee. C		
Name of Employer retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date \$ 350	

Full Name (Last, First, Middle Initial) <b>Mr. Ted Morgan</b>		Date of Receipt M M / D D / Y Y Y Y 06 30 2013
Mailing Address 14 Pine Pl		Transaction ID : SA11Ai-CN35619
City Berkeley Springs	State WV	
Zip Code 25411		Amount of Each Receipt this Period \$ 1000
FEC ID number of contributing federal political committee. C		
Name of Employer STS International	Occupation President	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date \$ 1000	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	\$ 3600.00
<b>TOTAL</b> This Period (last page this line number only).....	\$ 3600.00

13020280121

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 323
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A. Mr. James Morphy**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4 Linday Court

City Greenwich	State CT	Zip Code 06830
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Sullivan & Cromwell LLP	Occupation Lawyer	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>500</b>	

Date of Receipt  
MM / DD / YYYY  
**04 / 24 / 2013**

Transaction ID : **SA11AI-CN34849**

Amount of Each Receipt this Period  
**500**

**B. Mr. George F Morrell**  
Full Name (Last, First, Middle Initial)  
Mailing Address 542 Beallsville Rd

City Scenery Hill	State PA	Zip Code 15360
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Royal Hydraulic Services	Occupation Owner	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2500</b>	

Date of Receipt  
MM / DD / YYYY  
**04 / 18 / 2013**

Transaction ID : **SA11AI-CN34728**

Amount of Each Receipt this Period  
**2500**

**C. Mr. Donald J Morrison**  
Full Name (Last, First, Middle Initial)  
Mailing Address 108 Scenery Dr

City Morgantown	State WV	Zip Code 26505
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>200</b>	

Date of Receipt  
MM / DD / YYYY  
**04 / 30 / 2013**

Transaction ID : **SA11AI-CN35117**

Amount of Each Receipt this Period  
**100**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>3100.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280122

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 123 OF 323	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Edward Morrison Jr</b>		Date of Receipt MM / DD / YYYY <b>06 / 28 / 2013</b>
Mailing Address <b>415 Whitaker Blvd W</b>		Transaction ID : <b>SA11AI-CN35715</b>
City <b>Huntington</b>	State <b>WV</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250</b>
Name of Employer <b>C.I. Thornburg Co Inc.</b>	Occupation <b>Executive</b>	Amount of Each Receipt this Period <b>350</b>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>350</b>	

Full Name (Last, First, Middle Initial) <b>Mr. Scott P Morse</b>		Date of Receipt MM / DD / YYYY <b>06 / 30 / 2013</b>
Mailing Address <b>PO Box 592</b>		Transaction ID : <b>SA11AI-CN35563</b>
City <b>Carrier Mills</b>	State <b>IL</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500</b>
Name of Employer <b>ACC</b>	Occupation <b>Foreman</b>	Amount of Each Receipt this Period <b>500</b>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>500</b>	

Full Name (Last, First, Middle Initial) <b>Mr. J Steven Moses</b>		Date of Receipt MM / DD / YYYY <b>05 / 01 / 2013</b>
Mailing Address <b>1 Wolf Pen Ln</b>		Transaction ID : <b>SA11AI-CN34895</b>
City <b>South Charleston</b>	State <b>WV</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer <b>Moses Automotive Network</b>	Occupation <b>Executive</b>	Amount of Each Receipt this Period <b>1000</b>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1750.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280123

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 124 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Robert L Moses**

Mailing Address 1350 Johnson Rd

City Charleston State WV Zip Code 25314

FEC ID number of contributing federal political committee. **C**

Name of Employer Moses Automotive Occupation Auto Dealer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 01 2013

Transaction ID : SA11Ai-CN34897

Amount of Each Receipt this Period  
 1000

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Neal Moszuwski**

Mailing Address 2373 Broadway

City New York State NY Zip Code 10024

FEC ID number of contributing federal political committee. **C**

Name of Employer Towerbrook Capital Occupation Investment Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 28 2013

Transaction ID : SA11Ai-CN35494

Amount of Each Receipt this Period  
 2600

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Tommy H. Mullins**

Mailing Address 1521 Spars Creek Rd.

City Danville State WV Zip Code 25053-8020

FEC ID number of contributing federal political committee. **C**

Name of Employer Boone Mem. Hospital Occupation Administration

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 10 2013

Transaction ID : SA11Ai-CN35355

Amount of Each Receipt this Period  
 150

**SUBTOTAL** of Receipts This Page (optional)..... 3750.00

**TOTAL** This Period (last page this line number only).....

13020280124

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 323
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 15	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Richard Munczinski**

Mailing Address **6957 Rothwell Street**

City **New Albany** State **OH** Zip Code **43054**

FEC ID number of contributing federal political committee. **C**

Name of Employer **American Electric Power** Occupation **Senior Vice President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **800**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 20 / 2013**

Transaction ID : **SA11Ai-CN35452**

Amount of Each Receipt this Period  
**800**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Gregory T Mutz**

Mailing Address **200 W Monroe St Ste 2200**

City **Chicago** State **IL** Zip Code **60606**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AMLI Residential** Occupation **CEO/Chairman**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2013**

Transaction ID : **SA11AI-CN35750**

Amount of Each Receipt this Period  
**2600**

**C.** Full Name (Last, First, Middle Initial)  
**John B. Myer**

Mailing Address **P.O. Box 5157**

City **Vienna** State **WV** Zip Code **26105**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self Employed** Occupation **Real Estate**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2013**

Transaction ID : **SA11AI-CN35603**

Amount of Each Receipt this Period  
**500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3900.00**

13020280125

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 126 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**Mr. Donald E. Nehlen**

**A.**

Mailing Address **2008 Magnolia Dr**

City State Zip Code  
**Morgantown WV 26508-4467**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**Retired Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**200**

Date of Receipt  
MM / DD / YYYY  
**06 30 2013**

Transaction ID : **SA11AI-CN35598**

Amount of Each Receipt this Period  
**100**

Full Name (Last, First, Middle Initial)  
**Mr. David J Neithercut**

**B.**

Mailing Address **77 E Walton St # 22-C**

City State Zip Code  
**Chicago IL 60611**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**Equity Residential CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
MM / DD / YYYY  
**06 30 2013**

Transaction ID : **SA11AI-CN35565**

Amount of Each Receipt this Period  
**1000**

Full Name (Last, First, Middle Initial)  
**Mr. Eric Nelson**

**C.**

Mailing Address **PO Box 186**

City State Zip Code  
**Charleston WV 25301**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**Nelson Enterprises Executive**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2600**

Date of Receipt  
MM / DD / YYYY  
**05 10 2013**

Transaction ID : **SA11AI-CN35012**

Amount of Each Receipt this Period  
**2600**

**SUBTOTAL** of Receipts This Page (optional).....

**3700.00**

**TOTAL** This Period (last page this line number only).....

13020280126

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Ms. Barbara Nolan</b>		Date of Receipt M M / D D / Y Y - Y Y 04 / 18 / 2013
Mailing Address 1507 Barberry Ln		Transaction ID : SA11Ai-CN34769
City Charleston	State WV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer housewife	Occupation Housewife	Election Cycle-to-Date 250
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Mr. Frank Northrup</b>		Date of Receipt M M / D D / Y Y - Y Y 06 / 20 / 2013
Mailing Address 923 51st St		Transaction ID : SA11Ai-CN35461
City Vienna	State WV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Northrup Equipment Co.	Occupation Owner/Sales	Election Cycle-to-Date 1000
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Mr. F. W. Nutter</b>		Date of Receipt M M / D D / Y Y - Y Y 06 / 07 / 2013
Mailing Address 8458 Portland Plaza		Transaction ID : SA11Ai-CN35277
City Mclean	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Reinsurance Association Of America	Occupation Attorney	Election Cycle-to-Date 500
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1750.00
<b>TOTAL</b> This Period (last page this line number only) .....	

13020280127

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**Mrs. Dawn O'Dell**

**A.** Mailing Address 169 Meadow Ridge Dr

City	State	Zip Code
Morgantown	WV	26505

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Mon County	Fitness Instructor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 08 / 2013

Transaction ID : SA11Ai-CN34870

Amount of Each Receipt this Period  
2600

Full Name (Last, First, Middle Initial)  
**Mr. Kevin O'Dell**

**B.** Mailing Address 169 Meadow Ridge Dr

City	State	Zip Code
Morgantown	WV	26505

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Mepco	Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 08 / 2013

Transaction ID : SA11Ai-CN34869

Amount of Each Receipt this Period  
2600

Full Name (Last, First, Middle Initial)  
**Paul Orlin**

**C.** Mailing Address 1016 5th Ave  
Apt 2A

City	State	Zip Code
New York	NY	10028

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
Amici Capital	Investment Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2013

Transaction ID : SA11Ai-CN35531

Amount of Each Receipt this Period  
2000

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

7200.00

13020280128



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 129 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Ms. Camille Orme</b>		Date of Receipt MM / DD / YYYY <b>04 / 18 / 2013</b>
Mailing Address <b>125 Broad St</b>		Transaction ID : <b>SA11AI-CN34674</b>
City <b>New York</b>	State <b>NY</b>	
Zip Code <b>10004</b>		Amount of Each Receipt this Period <b>1000</b>
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>Sullivan &amp; Cromwell LLP</b>	Occupation <b>Lawyer</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

Full Name (Last, First, Middle Initial) <b>Mr. Brian M. Osborn</b>		Date of Receipt MM / DD / YYYY <b>04 / 05 / 2013</b>
Mailing Address <b>110 Wheeling St.</b>		Transaction ID : <b>SA11AI-CN34867</b>
City <b>Westover</b>	State <b>WV</b>	
Zip Code <b>26501-3984</b>		Amount of Each Receipt this Period <b>2600</b>
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>MEPCO LLC</b>	Occupation <b>Engineer</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2600</b>	

Full Name (Last, First, Middle Initial) <b>Mrs. Lory Osborn</b>		Date of Receipt MM / DD / YYYY <b>04 / 05 / 2013</b>
Mailing Address <b>110 Wheeling St.</b>		Transaction ID : <b>SA11AI-CN34868</b>
City <b>Westover</b>	State <b>WV</b>	
Zip Code <b>26501-3984</b>		Amount of Each Receipt this Period <b>2600</b>
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>WVU</b>	Occupation <b>Administrator</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2600</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>6200.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280129

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Joel Oswald</b>		Date of Receipt MM / DD / YYYY <b>06 / 07 / 2013</b>
Mailing Address <b>5212 Pommeroy Drive</b>		Transaction ID : <b>SA11Ai-CN35289</b>
City <b>Fairfax</b>	State <b>VA</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500</b>
Name of Employer <b>Williams &amp; Jensen</b>	Occupation <b>Principal</b>	Election Cycle-to-Date <b>500</b>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Mr. Lawrence A Pack</b>		Date of Receipt MM / DD / YYYY <b>05 / 10 / 2013</b>
Mailing Address <b>2146 Presidential Dr</b>		Transaction ID : <b>SA11Ai-CN35007</b>
City <b>Charleston</b>	State <b>WV</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2600</b>
Name of Employer <b>Pack Lambert &amp; Burdette</b>	Occupation <b>CPA</b>	Election Cycle-to-Date <b>2600</b>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Mr. Ruffner Page</b>		Date of Receipt MM / DD / YYYY <b>06 / 19 / 2013</b>
Mailing Address <b>3122 Overhill Road</b>		Transaction ID : <b>SA11Ai-CN35445</b>
City <b>Birmingham</b>	State <b>AL</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer <b>McWare</b>	Occupation <b>Executive</b>	Election Cycle-to-Date <b>1000</b>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>4100.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280130

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 131 OF 323
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Margaret N. Palmer**

Mailing Address 1550 Mt Alpha Rd

City Charleston State WV Zip Code 25304

FEC ID number of contributing federal political committee. **C**

Name of Employer CAMC Occupation Nurse

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 09 2013

Transaction ID : **SA11AI-CN34938**

Amount of Each Receipt this Period  
**2600**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Jarvis Partner**

Mailing Address 1306 Clayborne House Ct

City Mc Lean State VA Zip Code 22101

FEC ID number of contributing federal political committee. **C**

Name of Employer Fierce Isakowitz Occupation Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 02 2013

Transaction ID : **SA11AI-CN35226**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Kiran Patel**

Mailing Address 3 Claymont Rd

City Charleston State WV Zip Code 25304

FEC ID number of contributing federal political committee. **C**

Name of Employer self-employed Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 09 2013

Transaction ID : **SA11AI-CN34973**

Amount of Each Receipt this Period  
**1000**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**4600.00**

13020280131

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 132 OF 323
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 15	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Charles R Patton**

Mailing Address **2125 Presidential Dr**

City **Charleston** State **WV** Zip Code **25314-2370**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Appalachian Power** Occupation **President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2013**

Transaction ID : **SA11Ai-CN35615**

Amount of Each Receipt this Period  
**2000**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Don Pauley**

Mailing Address **3805 Duckcove Way**

City **Cumming** State **GA** Zip Code **30041-9291**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 10 / 2013**

Transaction ID : **SA11Ai-CN35345**

Amount of Each Receipt this Period  
**200**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Amanda Pedigo**

Mailing Address **2316 Lakeshire Dr**

City **Alexandria** State **VA** Zip Code **22308**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Intuit** Occupation **Senior Manager Tech. Policy**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 / 07 / 2013**

Transaction ID : **SA11Ai-CN34920**

Amount of Each Receipt this Period  
**250**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2450.00**

13020280132

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 133 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Sanford Perl**

Mailing Address **570 Longwood Ave**

City **Glencoe** State **IL** Zip Code **60022**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Kirkland & Ellis** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt

MM / DD / YYYY  
**06 / 20 / 2013**

Transaction ID : **SA11Ai-CN35402**

Amount of Each Receipt this Period

**1000**

**B.** Full Name (Last, First, Middle Initial)  
**William Peters**

Mailing Address **147 Rosemar Meadows Dr**

City **Parkersburg** State **WV** Zip Code **26105-8136**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Auto Fleet & Ind. Supply** Occupation **President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt

MM / DD / YYYY  
**06 / 30 / 2013**

Transaction ID : **SA11Ai-CN35604**

Amount of Each Receipt this Period

**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Leslie Philip**

Mailing Address **9 Lawnsdale View**

City **Vienna** State **WV** Zip Code **26105**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt

MM / DD / YYYY  
**06 / 30 / 2013**

Transaction ID : **SA11Ai-CN35651**

Amount of Each Receipt this Period

**500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2500.00**

13020280133

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 134 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. William H Piper III**

Mailing Address **7601 Timberly Ct**

City **Mc Lean** State **VA** Zip Code **22102**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Fierce Isakowitz & Blalock** Occupation **Vice President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 02 2013**

Transaction ID : **SA11Ai-CN35044**

Amount of Each Receipt this Period  
**1600**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Mike Pleska**

Mailing Address **1843 Devondale Cir.**

City **Charleston** State **WV** Zip Code **25314**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 30 2013**

Transaction ID : **SA11Ai-CN35098**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Noel Pletcher**

Mailing Address **400 Highland St**

City **Gassaway** State **WV** Zip Code **26624**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self Employed** Occupation **Owner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 19 2013**

Transaction ID : **SA11Ai-CN35422**

Amount of Each Receipt this Period  
**200**

**SUBTOTAL** of Receipts This Page (optional)..... **2800.00**

**TOTAL** This Period (last page this line number only).....

13020280134

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 135 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Mr. Steven Polce**

Mailing Address **PO Box 413**

City **Arthurdale** State **WV** Zip Code **26520**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MEPCO Inc.** Occupation **Vice President Of WV Operations**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt

M M / D D / Y Y Y Y  
**04 18 2013**

Transaction ID : **SA11Ai-CN34739**

Amount of Each Receipt this Period

**2600**

**B. Mr. Richard W Porter**

Mailing Address **300 N La Salle Dr Ste 24**

City **Chicago** State **IL** Zip Code **60654**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Kirkland & Ellis** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt

M M / D D / Y Y Y Y  
**06 30 2013**

Transaction ID : **SA11Ai-CN35747**

Amount of Each Receipt this Period

**1000**

**C. Mr. Rob Potter**

Mailing Address **105 Newcomer Rd**

City **South Charleston** State **WV** Zip Code **25309**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Tri-Star Coal Sales** Occupation **Executive**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt

M M / D D / Y Y Y Y  
**05 09 2013**

Transaction ID : **SA11Ai-CN34976**

Amount of Each Receipt this Period

**1000**

**SUBTOTAL** of Receipts This Page (optional) .....

**4600.00**

**TOTAL** This Period (last page this line number only) .....

13020280135

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 136 OF 323

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Robert Powers</b>		Date of Receipt MM / DD / YYYY 05 / 28 / 2013
Mailing Address 749 Woods Hollow Ln		Transaction ID : SA11Ai-CN35217
City Powell	State OH	Zip Code 43065
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500
Name of Employer American Electric Power	Occupation COO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1500	

Full Name (Last, First, Middle Initial) <b>Mr. Homer K Preece</b>		Date of Receipt MM / DD / YYYY 06 / 03 / 2013
Mailing Address 2615 Mount Vernon Ave		Transaction ID : SA11Ai-CN35255
City Point Pleasant	State WV	Zip Code 25550
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100
Name of Employer Marshall University	Occupation Teacher	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

Full Name (Last, First, Middle Initial) <b>Tim Quinlan</b>		Date of Receipt MM / DD / YYYY 06 / 28 / 2013
Mailing Address 209 Parkview Dr		Transaction ID : SA11Ai-CN35547
City Saint Albans	State WV	Zip Code 25177
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer City National Bank	Occupation Banker	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1850.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280136



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:		PAGE 137 OF 323	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Yvonne Quinn**

Mailing Address 10 Gracie Square  
Apt 11G

City State Zip Code  
New York NY 10028

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Sullivan & Cromwell LLP Lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
\$ 1000

Date of Receipt  
M M / D D / Y Y Y Y  
04 24 2013

Transaction ID : SA11AI-CN34853

Amount of Each Receipt this Period  
\$ 1000

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Barbara Radous**

Mailing Address 219 Springbrook Dr

City State Zip Code  
Gahanna OH 43230

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
American Electric Power Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
\$ 350

Date of Receipt  
M M / D D / Y Y Y Y  
06 19 2013

Transaction ID : SA11AI-CN35493

Amount of Each Receipt this Period  
\$ 350

**C.** Full Name (Last, First, Middle Initial)  
**Mr. H. Raines**

Mailing Address 5252 Kanawha Blvd E

City State Zip Code  
Charleston WV 25311

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Requested Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
\$ 200

Date of Receipt  
M M / D D / Y Y Y Y  
06 03 2013

Transaction ID : SA11AI-CN35200

Amount of Each Receipt this Period  
\$ 100

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

\$ 1450.00

13020280137

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Ms. Suzette M Raines</b>		Date of Receipt MM / DD / YYYY <b>05 / 10 / 2013</b>
Mailing Address <b>850 Jonash Ln</b>		Transaction ID : <b>SA11AI-CN35011</b>
City <b>Saint Albans</b>	State <b>WV</b>	Zip Code <b>25177</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer <b>Self-employed</b>	Occupation <b>PR Consultant</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

Full Name (Last, First, Middle Initial) <b>Mr. R H Ralston II</b>		Date of Receipt MM / DD / YYYY <b>05 / 31 / 2013</b>
Mailing Address <b>10 Jarrett Dr</b>		Transaction ID : <b>SA11AI-CN35195</b>
City <b>Buckhannon</b>	State <b>WV</b>	Zip Code <b>26201-8917</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>200</b>
Name of Employer <b>Ralston Press Inc.</b>	Occupation <b>Owner</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>200</b>	

Full Name (Last, First, Middle Initial) <b>Mr. H. David Ramsey</b>		Date of Receipt MM / DD / YYYY <b>06 / 20 / 2013</b>
Mailing Address <b>101 Linwood PI N Hills</b>		Transaction ID : <b>SA11AI-CN35459</b>
City <b>Parkersburg</b>	State <b>WV</b>	Zip Code <b>26104</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500</b>
Name of Employer <b>Retired</b>	Occupation <b>Retired</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>500</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1700.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280138

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. James Ratliff</b>		Date of Receipt MM / DD / YYYY <b>06 / 20 / 2013</b>
Mailing Address <b>2334 19th St NW</b>		<b>Transaction ID : SA11AI-CN35405</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20009</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer <b>Nat'l Multi Housing Council</b>	Occupation <b>Director</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

Full Name (Last, First, Middle Initial) <b>Ms. Susanne T Ratliff</b>		Date of Receipt MM / DD / YYYY <b>06 / 30 / 2013</b>
Mailing Address <b>2737 Southwood Rd</b>		<b>Transaction ID : SA11AI-CN35757</b>
City <b>Birmingham</b>	State <b>AL</b>	Zip Code <b>35223</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer <b>Homemaker</b>	Occupation <b>Homemaker</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

Full Name (Last, First, Middle Initial) <b>Mr. Scott Reed</b>		Date of Receipt MM / DD / YYYY <b>05 / 28 / 2013</b>
Mailing Address <b>1 Damian Rd</b>		<b>Transaction ID : SA11AI-CN35057</b>
City <b>Wheeling</b>	State <b>WV</b>	Zip Code <b>26003</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer <b>Linsley School</b>	Occupation <b>Teacher</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280139

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. John S Reger II**

Mailing Address **5338 Edgebrook Rd**

City <b>Charleston</b>	State <b>WV</b>	Zip Code <b>25313</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>Capital Venture Consultants</b>	Occupation <b>consultant</b>
--	---------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 10 2013**

Transaction ID : **SA11Ai-CN34994**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Evan Reichard**

Mailing Address **156 Lois Lane**

City <b>Berkeley Springs</b>	State <b>WV</b>	Zip Code <b>25411</b>
---------------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>Retired</b>	Occupation <b>Retired</b>
------------------------------------	------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**245**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 30 2013**

Transaction ID : **SA11Ai-CN35677**

Amount of Each Receipt this Period  
**140**

**C.** Full Name (Last, First, Middle Initial)  
**Dr. John Reifsteck**

Mailing Address **2145 Presidential Dr**

City <b>Charleston</b>	State <b>WV</b>	Zip Code <b>25314</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>Self Employed</b>	Occupation <b>Physician</b>
--	--------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 18 2013**

Transaction ID : **SA11Ai-CN34761**

Amount of Each Receipt this Period  
**250**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1390.00**

13020280140

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Kristi L Remington**

Mailing Address **3313 N Kensington St**

City **Arlington** State **VA** Zip Code **22207**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Blank Rome** Occupation **Principal**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt **04 / 23 / 2013**

Transaction ID : **SA11AI-CN34830**

Amount of Each Receipt this Period **250**

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Helen Remolona**

Mailing Address **1505 Chafon Rd**

City **Charleston** State **WV** Zip Code **25314**

FEC ID number of contributing federal political committee. **C**

Name of Employer **self-employed** Occupation **Physician**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt **05 / 09 / 2013**

Transaction ID : **SA11AI-CN34974**

Amount of Each Receipt this Period **1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Mark Rhode**

Mailing Address **500 E Grant # 1010**

City **Minneapolis** State **MN** Zip Code **55401**

FEC ID number of contributing federal political committee. **C**

Name of Employer **TFC Bank** Occupation **Banker**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt **04 / 18 / 2013**

Transaction ID : **SA11AI-CN34713**

Amount of Each Receipt this Period **500**

**SUBTOTAL** of Receipts This Page (optional)..... **1750.00**

**TOTAL** This Period (last page this line number only).....

13020280141

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Stephen Roberts</b>		Date of Receipt MM / DD / YYYY 04 / 18 / 2013
Mailing Address 1326 Morningside Dr		Transaction ID : SA11AI-CN34823
City Charleston	State WV	Zip Code 25314
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer WV Chamber of Commerce	Occupation Executive	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

Full Name (Last, First, Middle Initial) <b>Mr. Ed Robinson</b>		Date of Receipt MM / DD / YYYY 06 / 10 / 2013
Mailing Address 5088 Washington St W		Transaction ID : SA11AI-CN35350
City Charleston	State WV	Zip Code 25313
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600
Name of Employer E.L. Robinson Co.	Occupation Executive	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600	

Full Name (Last, First, Middle Initial) <b>Mr. Nelson Robinson</b>		Date of Receipt MM / DD / YYYY 04 / 18 / 2013
Mailing Address 2210 Washington Street E		Transaction ID : SA11AI-CN34685
City Charleston	State WV	Zip Code 25311
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Compensation Strategies	Occupation President	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3350.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280142

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 143 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Theodore Rogers Jr</b>		Date of Receipt MM / DD / YYYY <b>04 / 24 / 2013</b>
Mailing Address <b>535 86th St E</b>		<b>Transaction ID : SA11AI-CN34844</b>
City <b>New York</b>	State <b>NY</b>	Zip Code <b>10028</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer <b>Sullivan &amp; Cromwell LLP</b>	Occupation <b>Lawyer</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

Full Name (Last, First, Middle Initial) <b>Mrs. Frannie M Rollins</b>		Date of Receipt MM / DD / YYYY <b>05 / 10 / 2013</b>
Mailing Address <b>661 Holly Rd</b>		<b>Transaction ID : SA11AI-CN34990</b>
City <b>Charleston</b>	State <b>WV</b>	Zip Code <b>25314</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer <b>Flaherty Sensabaugh &amp; Bonasso</b>	Occupation <b>Attorney</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

Full Name (Last, First, Middle Initial) <b>Mr. William Rosenthal</b>		Date of Receipt MM / DD / YYYY <b>06 / 19 / 2013</b>
Mailing Address <b>604 E 4th Street</b> <b>Suite 201</b>		<b>Transaction ID : SA11AI-CN35439</b>
City <b>Fort Worth</b>	State <b>TX</b>	Zip Code <b>76102</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2600</b>
Name of Employer <b>Penrose Group</b>	Occupation <b>Investor</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2600</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>4600.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280143

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 144 OF 323  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Samuel B Ross III**

Mailing Address 4602 River Road

City State Zip Code  
Vienna WV 26105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SBRInc. Chairman and CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2013

Transaction ID : SA11Ai-CN35671

Amount of Each Receipt this Period  
2600

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Samuel B Ross III**

Mailing Address 4602 River Road

City State Zip Code  
Vienna WV 26105

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
SBRInc. Chairman and CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2013

Transaction ID : SA11Ai-CN35672

Amount of Each Receipt this Period  
2600

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Samuel B Ross II**

Mailing Address 200 Star Ave  
# 212

City State Zip Code  
Parkersburg WV 26101

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2013

Transaction ID : SA11Ai-CN35767

Amount of Each Receipt this Period  
2600

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

7800.00

13020280144



**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 145 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**Mr. Samuel B Ross II**

**A.**

Mailing Address **200 Star Ave**  
**# 212**

City **Parkersburg** State **WV** Zip Code **26101**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5200**

Date of Receipt

M M / D D / Y Y Y Y  
**06 30 2013**

Transaction ID : **SA11Ai-CN35768**

Amount of Each Receipt this Period

**2600**

Full Name (Last, First, Middle Initial)

**Dr. Arthur Rubin**

**B.**

Mailing Address **1203 Colonial Way**

City **Charleston** State **WV** Zip Code **25314**

FEC ID number of contributing federal political committee. **C**

Name of Employer **self-employed** Occupation **Physician**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt

M M / D D / Y Y Y Y  
**04 18 2013**

Transaction ID : **SA11Ai-CN34810**

Amount of Each Receipt this Period

**1000**

Full Name (Last, First, Middle Initial)

**Mr. George Sampas**

**C.**

Mailing Address **87 President St**

City **Brooklyn** State **NY** Zip Code **11215**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Sullivan & Cromwell LLP** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt

M M / D D / Y Y Y Y  
**04 24 2013**

Transaction ID : **SA11Ai-CN34859**

Amount of Each Receipt this Period

**1000**

**SUBTOTAL** of Receipts This Page (optional).....

**4600.00**

**TOTAL** This Period (last page this line number only).....

13020280145

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 146 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Sylvia G Sanders**

Mailing Address **16505 Virginia Ave**  
**Apt 4108**

City **Williamsport** State **MD** Zip Code **21795-1469**

FEC ID number of contributing federal political committee. **C**

Name of Employer **housewife** Occupation **Housewife**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600**

Date of Receipt  
MM / DD / YYYY  
**06 / 30 / 2013**

Transaction ID : **SA11Ai-CN35684**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Mary T Sargent**

Mailing Address **25 Colony Rd**

City **West Hartford** State **CT** Zip Code **06117**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Not Employed** Occupation **Housewife**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
MM / DD / YYYY  
**06 / 30 / 2013**

Transaction ID : **SA11Ai-CN35638**

Amount of Each Receipt this Period  
**200**

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Ruth Sayre**

Mailing Address **213 Walker Drive**

City **Dunbar** State **WV** Zip Code **25064**

FEC ID number of contributing federal political committee. **C**

Name of Employer **OMS Inc.** Occupation **President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
MM / DD / YYYY  
**04 / 18 / 2013**

Transaction ID : **SA11Ai-CN34689**

Amount of Each Receipt this Period  
**200**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**900.00**

13020280146

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 147 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**Mr. John J Scalzo**

**A.**

Mailing Address 1087 Creekstone Ridge

City State Zip Code  
South Charleston WV 25309

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date  
250

Date of Receipt

MM / DD / YYYY  
06 / 30 / 2013

Transaction ID : SA11AI-CN35617

Amount of Each Receipt this Period

250

Full Name (Last, First, Middle Initial)

**Mr. Robert Scharmer**

**B.**

Mailing Address PO Box 1332

City State Zip Code  
Shepherdstown WV 25443-1332

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Sheperd University Adjunct Professor

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt

MM / DD / YYYY  
06 / 19 / 2013

Transaction ID : SA11AI-CN35407

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

**Ms. Marnie Schock**

**C.**

Mailing Address 2517 Elkridge Drive

City State Zip Code  
Wexford PA 15090

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Babot Calland Attorney

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt

MM / DD / YYYY  
04 / 18 / 2013

Transaction ID : SA11AI-CN34730

Amount of Each Receipt this Period

1000

**SUBTOTAL** of Receipts This Page (optional).....

2250.00

**TOTAL** This Period (last page this line number only).....

13020280147

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 148 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Matthew A Schwartz</b>		Date of Receipt MM / DD / YYYY 05 / 08 / 2013
Mailing Address 20 W 64th St		Transaction ID : SA11Ai-CN35024
City New York	State NY	
Zip Code 10023		Amount of Each Receipt this Period 500
FEC ID number of contributing federal political committee. C		
Name of Employer Sullivan & Cromwell	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

Full Name (Last, First, Middle Initial) <b>Mr. Jeffrey T Scott</b>		Date of Receipt MM / DD / YYYY 05 / 08 / 2013
Mailing Address 23 Kristin Pl		Transaction ID : SA11Ai-CN35026
City Old Tappan	State NJ	
Zip Code 07675		Amount of Each Receipt this Period 1000
FEC ID number of contributing federal political committee. C		
Name of Employer Sullivan & Cromwell LLP	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

Full Name (Last, First, Middle Initial) <b>Mrs. Mary O Selinger</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013
Mailing Address 1594 Mount Alpha Rd		Transaction ID : SA11Ai-CN35647
City Charleston	State WV	
Zip Code 25304		Amount of Each Receipt this Period 450
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 750	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1950.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280148

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 149 OF 323	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**A. Holmes R. Shaver**

Mailing Address 1151 Mill Run Rd

City Parkersburg State WV Zip Code 26104-7156

FEC ID number of contributing federal political committee. **C**

Name of Employer Parkersburg Reality Occupation Realtor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 30 2013

Transaction ID : SA11Ai-CN35668

Amount of Each Receipt this Period  
**750**

Full Name (Last, First, Middle Initial)  
**B. Ms. Barbara Shaw**

Mailing Address 18930 33rd Ave No

City Plymouth State MN Zip Code 55447

FEC ID number of contributing federal political committee. **C**

Name of Employer TFC Financial Corp Occupation Banker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 04 18 2013

Transaction ID : SA11Ai-CN34708

Amount of Each Receipt this Period  
**500**

Full Name (Last, First, Middle Initial)  
**C. Mr. Joseph Sherman**

Mailing Address 937 Ashbury Street

City San Francisco State CA Zip Code 94117

FEC ID number of contributing federal political committee. **C**

Name of Employer The Reliant Group Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 19 2013

Transaction ID : SA11Ai-CN35438

Amount of Each Receipt this Period  
**2500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3750.00**

13020280149

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 150 OF 323	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Robert Sherman**

Mailing Address **PO Box 273**

City **Oxford** State **OH** Zip Code **45056**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 18 2013**

Transaction ID : **SA11Ai-CN34793**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Brian Short**

Mailing Address **215 South 11th Street**

City **Minneapolis** State **MN** Zip Code **55463**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Learnington Company** Occupation **Business Manager**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 18 2013**

Transaction ID : **SA11Ai-CN34701**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Stephen Shy**

Mailing Address **3174 Rt 75**

City **Huntington** State **WV** Zip Code **25704**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Ohio Valley Physicians** Occupation **Physician**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 25 2013**

Transaction ID : **SA11Ai-CN35039**

Amount of Each Receipt this Period  
**100**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**850.00**

13020280150

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 151 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Dr. Stephen Shy</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 28 / 2013
Mailing Address 3174 Rt 75		Transaction ID : SA11AI-CN35218
City Huntington	State WV	Zip Code 25704
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100
Name of Employer Ohio Valley Physicians	Occupation Physician	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

Full Name (Last, First, Middle Initial) <b>Dr. Stephen Shy</b>		Date of Receipt M M / D D / Y Y Y Y 06 / 25 / 2013
Mailing Address 3174 Rt 75		Transaction ID : SA11AI-CN35701
City Huntington	State WV	Zip Code 25704
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100
Name of Employer Ohio Valley Physicians	Occupation Physician	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600	

Full Name (Last, First, Middle Initial) <b>Dr. Richard Sibley</b>		Date of Receipt M M / D D / Y Y Y Y 05 / 28 / 2013
Mailing Address 1 Barnes Plaza		Transaction ID : SA11AI-CN35055
City Charleston	State WV	Zip Code 25314
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer Retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280151

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 152 OF 323	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr Marvin R. Sine</b>		Date of Receipt MM / DD / YYYY 06 / 03 / 2013
Mailing Address <b>HC 71 Box 91.</b>		Transaction ID : <b>SA11Ai-CN35206</b>
City <b>Capon Bridge</b>	State <b>WV</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>75</b>
Name of Employer <b>Retired</b>	Occupation <b>Retired</b>	Election Cycle-to-Date <b>200</b>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Mr Marvin R. Sine</b>		Date of Receipt MM / DD / YYYY 06 / 28 / 2013
Mailing Address <b>HC 71 Box 91.</b>		Transaction ID : <b>SA11Ai-CN35517</b>
City <b>Capon Bridge</b>	State <b>WV</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>75</b>
Name of Employer <b>Retired</b>	Occupation <b>Retired</b>	Election Cycle-to-Date <b>275</b>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Mr. George D Six</b>		Date of Receipt MM / DD / YYYY 06 / 25 / 2013
Mailing Address <b>3729 Cambridge Drive</b>		Transaction ID : <b>SA11Ai-CN35702</b>
City <b>Hurricane</b>	State <b>WV</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>100</b>
Name of Employer <b>Retired</b>	Occupation <b>Retired</b>	Election Cycle-to-Date <b>200</b>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>250.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280152



**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 153 OF 323
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Kenneth Slater**

Mailing Address **11 Sloan's Curve Drive**

City **Palm Beach** State **FL** Zip Code **33480**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Tremont Partners** Occupation **Executive**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 07 2013**

Transaction ID : **SA11AI-CN35279**

Amount of Each Receipt this Period  
**2500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. G. N. Smith III**

Mailing Address **1592 Connell Rd**

City **Charleston** State **WV** Zip Code **25314**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Smith Co. Motorcars** Occupation **CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 10 2013**

Transaction ID : **SA11AI-CN35002**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Helen Smith**

Mailing Address **1223 Virginia Ave W**

City **Dunbar** State **WV** Zip Code **25064**

FEC ID number of contributing federal political committee. **C**

Name of Employer **housewife** Occupation **Housewife**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 10 2013**

Transaction ID : **SA11AI-CN35370**

Amount of Each Receipt this Period  
**400**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3900.00**

13020280153

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 154 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**Dr. Elizabeth Spangler**

Mailing Address **839 Gordon Dr**

City **Charleston** State **WV** Zip Code **25303**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Carelink** Occupation **Director**

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_ Election Cycle-to-Date **1100**

Date of Receipt  
M M / D D / Y Y Y Y  
**05 10 2013**

Transaction ID : **SA11Ai-CN35015**

Amount of Each Receipt this Period  
**1000**

Full Name (Last, First, Middle Initial)  
**Mr. Howard W. Speaks**

Mailing Address **2008 Golf Course Rd**

City **Martinsburg** State **WV** Zip Code **25405**

FEC ID number of contributing federal political committee. **C**

Name of Employer **self-employed** Occupation **Real Estate**

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_ Election Cycle-to-Date **200**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 03 2013**

Transaction ID : **SA11Ai-CN35152**

Amount of Each Receipt this Period  
**100**

Full Name (Last, First, Middle Initial)  
**Ms. Patricia J Spits**

Mailing Address **603 7th Ave**

City **Saint Albans** State **WV** Zip Code **25177-2927**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_ Election Cycle-to-Date **3000**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 28 2013**

Transaction ID : **SA11Ai-CN35526**

Amount of Each Receipt this Period  
**2000**

**SUBTOTAL** of Receipts This Page (optional).....

**3100.00**

**TOTAL** This Period (last page this line number only).....

13020280154

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 155 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Ms. Patricia J Spits</b>		Date of Receipt MM / DD / YYYY <b>06 / 29 / 2013</b>
Mailing Address <b>603 7th Ave</b>		Transaction ID : <b>SA11AI-CN35763</b>
City <b>Saint Albans</b>	State <b>WV</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>-400</b>
Name of Employer <b>Retired</b>	Occupation <b>Retired</b>	Redesignated to General 2014
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2600</b>	<b>[MEMO ITEM]</b> Redesignated

Full Name (Last, First, Middle Initial) <b>Ms. Patricia J Spits</b>		Date of Receipt MM / DD / YYYY <b>06 / 29 / 2013</b>
Mailing Address <b>603 7th Ave</b>		Transaction ID : <b>SA11AI-CN35764</b>
City <b>Saint Albans</b>	State <b>WV</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>400</b>
Name of Employer <b>Retired</b>	Occupation <b>Retired</b>	Redesignated from Primary 2014
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>3000</b>	<b>[MEMO ITEM]</b> Redesignation

Full Name (Last, First, Middle Initial) <b>Ms. Charlotte Stallard</b>		Date of Receipt MM / DD / YYYY <b>04 / 18 / 2013</b>
Mailing Address <b>16 Foxchase Rd</b>		Transaction ID : <b>SA11AI-CN34773</b>
City <b>Charleston</b>	State <b>WV</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer <b>housewife</b>	Occupation <b>Housewife</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280155

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 156 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Kathy Stansfield**

Mailing Address **147 Abney Cir**

City **Charleston** State **WV** Zip Code **25314**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Geraniums** Occupation **Executive**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
MM / DD / YYYY  
**06 / 19 / 2013**

Transaction ID : **SA11Ai-CN35429**

Amount of Each Receipt this Period  
**200**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. David Stautz**

Mailing Address **2923 Hillview W**

City **Roseville** State **MN** Zip Code **55113**

FEC ID number of contributing federal political committee. **C**

Name of Employer **TCF National Bank** Occupation **Executive**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
MM / DD / YYYY  
**04 / 18 / 2013**

Transaction ID : **SA11Ai-CN34710**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Richard Stephens**

Mailing Address **115 Potterfield Dr**

City **Charleston** State **WV** Zip Code **25314**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Stephens Auto Center** Occupation **Manager**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
MM / DD / YYYY  
**04 / 18 / 2013**

Transaction ID : **SA11Ai-CN34683**

Amount of Each Receipt this Period  
**300**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1000.00**

13020280156

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 157 OF 323
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Richard Stevens**

Mailing Address **Post Office Box 1301**

City **Charleston** State **WV** Zip Code **25325**

FEC ID number of contributing federal political committee. **C**

Name of Employer **WV Dental Association** Occupation **Association Executive**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 18 2013**

Transaction ID : **SA11Ai-CN34684**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Jack R Stewart Jr**

Mailing Address **336 Windsor Estates**

City **Mineral Wells** State **WV** Zip Code **26150**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Stewart's Auto Sales** Occupation **Business Owner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 30 2013**

Transaction ID : **SA11Ai-CN35653**

Amount of Each Receipt this Period  
**2600**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Steven Stewart**

Mailing Address **4578 Canterbury Court**

City **Ashland** State **KY** Zip Code **41101**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AEP** Occupation **Executive**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 30 2013**

Transaction ID : **SA11Ai-CN35611**

Amount of Each Receipt this Period  
**250**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3350.00**

13020280157

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 158 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Earl Stratton**

Mailing Address 3195 Casco Circle

City Wayzata	State MN	Zip Code 55391
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer TCF Financial Coporation	Occupation Banker
--	----------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
MM / DD / YYYY  
04 / 18 / 2013

Transaction ID : SA11AI-CN34696

Amount of Each Receipt this Period  
500

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Mary N Stultz**

Mailing Address 262 Deerfield Cir

City Kingwood	State WV	Zip Code 26537
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
800

Date of Receipt  
MM / DD / YYYY  
06 / 10 / 2013

Transaction ID : SA11AI-CN35320

Amount of Each Receipt this Period  
400

**C.** Full Name (Last, First, Middle Initial)  
**Mr. John Sutton Stump**

Mailing Address 21145 Cardinal Pond Ter # 130

City Ashburn	State VA	Zip Code 20147
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
200

Date of Receipt  
MM / DD / YYYY  
06 / 03 / 2013

Transaction ID : SA11AI-CN35246

Amount of Each Receipt this Period  
100

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1000.00

13020280158

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 159 OF 323
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Linda L. Suson**

Mailing Address **36 Birch Tree Ln**

City **Charleston** State **WV** Zip Code **25314-2274**

FEC ID number of contributing federal political committee. **C**

Name of Employer **None** Occupation **Housewife**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 28 2013**

Transaction ID : **SA11Ai-CN35079**

Amount of Each Receipt this Period  
**200**

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Swaid Swaid**

Mailing Address **513 Brookwood Blvd Suite 372**

City **Birmingham** State **AL** Zip Code **35209**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self Employed** Occupation **Physician**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 19 2013**

Transaction ID : **SA11Ai-CN35444**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Larry Swann**

Mailing Address **500 Lee Street East # 1130B**

City **Charleston** State **WV** Zip Code **25301**

FEC ID number of contributing federal political committee. **C**

Name of Employer **self-employed** Occupation **legislative affairs officer**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 18 2013**

Transaction ID : **SA11Ai-CN34688**

Amount of Each Receipt this Period  
**500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1700.00**

13020280159

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 160 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. W Mark Tatterson**

Mailing Address **1321 Greenmont Hills Drive**

City **Vienna** State **WV** Zip Code **26105**

FEC ID number of contributing federal political committee. **C**

Name of Employer **United Bank** Occupation **Banker**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt

M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2013**

Transaction ID : **SA11Ai-CN35661**

Amount of Each Receipt this Period

**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Karrim Taylor**

Mailing Address **9501 46th Pl N**

City **Phoenix** State **AZ** Zip Code **85028**

FEC ID number of contributing federal political committee. **C**

Name of Employer **DMB Associates** Occupation **Attorney/Real Estate Developer**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt

M M / D D / Y Y Y Y Y Y  
**04 / 02 / 2013**

Transaction ID : **SA11Ai-CN34529**

Amount of Each Receipt this Period

**250**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Robert K. Tebay**

Mailing Address **2416 DuPont Rd**

City **Parkersburg** State **WV** Zip Code **26101**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self** Occupation **Self Employed**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt

M M / D D / Y Y Y Y Y Y  
**06 / 28 / 2013**

Transaction ID : **SA11Ai-CN35543**

Amount of Each Receipt this Period

**100**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**850.00**

13020280160



**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 161 OF 323	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Talbott Tebay</b>		Date of Receipt MM / DD / YYYY <b>06 / 30 / 2013</b>
Mailing Address <b>1301 Grand Central Ave</b>		Transaction ID : <b>SA11Ai-CN35673</b>
City <b>Vienna</b>	State <b>WV</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>300</b>
Name of Employer self-employed	Occupation <b>Dentist</b>	Election Cycle-to-Date <b>300</b>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Mrs. Margaret Teeter</b>		Date of Receipt MM / DD / YYYY <b>05 / 10 / 2013</b>
Mailing Address <b>4307 Kanawha Avenue SE</b>		Transaction ID : <b>SA11Ai-CN35010</b>
City <b>Charleston</b>	State <b>WV</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer Old Colony	Occupation <b>Realtor</b>	Election Cycle-to-Date <b>1000</b>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Dr. Amelina Teleron</b>		Date of Receipt MM / DD / YYYY <b>05 / 09 / 2013</b>
Mailing Address <b>250 Whispering Woods Road</b>		Transaction ID : <b>SA11Ai-CN34947</b>
City <b>Charleston</b>	State <b>WV</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer Self Employed	Occupation <b>Physician</b>	Election Cycle-to-Date <b>1000</b>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2300.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280161

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 162 OF 323	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Carl Thoma**

Mailing Address **180 Pearson St E**  
**Apt 6105**

City **Chicago** State **IL** Zip Code **60611**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Thoma Bravo** Occupation **Mangaging Director**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 / 27 / 2013**

Transaction ID : **SA11AI-CN35530**

Amount of Each Receipt this Period  
**1600**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Geoffrey Thomas**

Mailing Address **5508 Brookview Ave**

City **Edina** State **MN** Zip Code **55424**

FEC ID number of contributing federal political committee. **C**

Name of Employer **TCF Bank** Occupation **Managing Director**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
M M / D D / Y Y Y Y  
**04 / 18 / 2013**

Transaction ID : **SA11AI-CN34706**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. J.T. Thomas**

Mailing Address **1204 Greenmont Hills Dr**

City **Vienna** State **WV** Zip Code **26105**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Tri-State Roofing & Sheet Meta** Occupation **Executive**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 / 10 / 2013**

Transaction ID : **SA11AI-CN35324**

Amount of Each Receipt this Period  
**2600**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**4450.00**

13020280162

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 163 OF 323	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. J.T. Thomas**

Mailing Address **1204 Greenmont Hills Dr**

City **Vienna** State **WV** Zip Code **26105**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Tri-State Roofing & Sheet Meta** Occupation **Executive**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 10 2013**

Transaction ID : **SA11Ai-CN35325**

Amount of Each Receipt this Period  
**2600**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. James R Thomas**

Mailing Address **23 Norwood Rd**

City **Charleston** State **WV** Zip Code **25314**

FEC ID number of contributing federal political committee. **C**

Name of Employer **NTV Asset Management LLC** Occupation **Asset Management**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 03 2013**

Transaction ID : **SA11Ai-CN35245**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Carroll W Thompson**

Mailing Address **PO Box 4068**

City **Parkersburg** State **WV** Zip Code **26104**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 28 2013**

Transaction ID : **SA11Ai-CN35510**

Amount of Each Receipt this Period  
**200**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3300.00**

13020280163

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 164 OF 323
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 15	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A. Mr. Brian Tierney**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1685 Arlington Ave  
 City State Zip Code  
 Upper Arlington OH 43212  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 American Electric Power Executive Vice President  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 \$ 1500

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 03 2013  
 Transaction ID : SA11Ai-CN35167  
 Amount of Each Receipt this Period  
 \$ 1500

**B. Ms. Paula Timmons**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2408 Davis Ave  
 City State Zip Code  
 Alexandria VA 22302  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Self Employed Consultant  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 \$ 500

Date of Receipt  
 M M / D D / Y Y Y Y  
 04 30 2013  
 Transaction ID : SA11Ai-CN35113  
 Amount of Each Receipt this Period  
 \$ 500

**C. Mr. Roger F Topping**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 5311  
 City State Zip Code  
 Princeton WV 24740  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Princeton Health Care Center Administrator  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 \$ 600

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 31 2013  
 Transaction ID : SA11Ai-CN35233  
 Amount of Each Receipt this Period  
 \$ 300

**SUBTOTAL** of Receipts This Page (optional).....  
**TOTAL** This Period (last page this line number only).....

\$ 2300.00

13020280164

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 165 OF 323	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Christine Toretti**

Mailing Address **2428 Oak Dr**

City **Indiana** State **PA** Zip Code **15701**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Palladio LLC** Occupation **Chairman and CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2013**

Transaction ID : **SA11Ai-CN35734**

Amount of Each Receipt this Period  
**2600**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Donald J Toumey**

Mailing Address **188 E 76th St Apt 27A**

City **New York** State **NY** Zip Code **10021**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Sullivan & Cromwell LLP** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 24 / 2013**

Transaction ID : **SA11Ai-CN34850**

Amount of Each Receipt this Period  
**2500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Phillip Trella**

Mailing Address **328 Walnut Drive**

City **Nashville** State **TN** Zip Code **37205**

FEC ID number of contributing federal political committee. **C**

Name of Employer **BPS M&M LLC** Occupation **Managing Principal**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 / 30 / 2013**

Transaction ID : **SA11Ai-CN35099**

Amount of Each Receipt this Period  
**500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**5600.00**

13020280165

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 166 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Ms. Ryan L Triplette</b>		Date of Receipt MM / DD / YYYY <b>04 / 23 / 2013</b>
Mailing Address <b>1512 Kingman PI NW</b>		<b>Transaction ID : SA11AI-CN34838</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20005</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500</b>
Name of Employer <b>Franklin Square Corp</b>	Occupation <b>Lobbyist</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>500</b>	

Full Name (Last, First, Middle Initial) <b>B. Ms. Mary Lou Trump</b>		Date of Receipt MM / DD / YYYY <b>06 / 10 / 2013</b>
Mailing Address <b>298 Grove Heights Rd</b>		<b>Transaction ID : SA11AI-CN35315</b>
City <b>Berkeley Springs</b>	State <b>WV</b>	Zip Code <b>25411-5108</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>200</b>
Name of Employer <b>retired</b>	Occupation <b>retired</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>250</b>	

Full Name (Last, First, Middle Initial) <b>C. Mr. Kevin Turner</b>		Date of Receipt MM / DD / YYYY <b>06 / 19 / 2013</b>
Mailing Address <b>10 Woodridge Street</b> <b>Unit F</b>		<b>Transaction ID : SA11AI-CN35451</b>
City <b>Montgomery</b>	State <b>AL</b>	Zip Code <b>36104</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250</b>
Name of Employer <b>Alabam Attorney General</b>	Occupation <b>Attorney</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>250</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>950.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280166

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 167 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Ms. Terese S Tweel</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 18 / 2013
Mailing Address 1116 Kingsbury Dr.		Transaction ID : SA11Ai-CN34770
City Chesapeake	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300
Name of Employer Concept Curtains	Occupation Owner	Election Cycle-to-Date 300
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>B. Mr. James Urbanek</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 18 / 2013
Mailing Address 1141 Hollybrook Drive		Transaction ID : SA11Ai-CN34699
City Wayzata	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer TCF National Bank	Occupation Managing Director-Commerical Banking	Election Cycle-to-Date 500
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>C. Ms. Kathleen Usery</b>		Date of Receipt M M / D D / Y Y Y Y 04 / 18 / 2013
Mailing Address 1036 Autumn Ave.		Transaction ID : SA11Ai-CN34738
City Morgantown	State WV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600
Name of Employer Homemaker	Occupation Homemaker	Election Cycle-to-Date 2600
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3400.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280167

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 168 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Richard R. Usery**

Mailing Address 1036 Autumn Ave.

City Morgantown	State WV	Zip Code 26508-6239
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer MEPCO LLC	Occupation Executive
-------------------------------	-------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
M M / D D / Y Y Y Y  
04 / 18 / 2013

Transaction ID : SA11AI-CN34737

Amount of Each Receipt this Period  
2600

**B.** Full Name (Last, First, Middle Initial)  
**Mark Valente III**

Mailing Address 7055 Leestone St

City Springfield	State VA	Zip Code 22151
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Valente Lopatin & Schulze	Occupation Attorney
---	------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2013

Transaction ID : SA11AI-CN35740

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Michael Van Ness**

Mailing Address 2400 Brentwood Rd NW

City Canton	State OH	Zip Code 44708
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer GI Specialists Inc.	Occupation Physician
---	-------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
300

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 10 / 2013

Transaction ID : SA11AI-CN35391

Amount of Each Receipt this Period  
200

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3800.00

13020280168



**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 169 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Nancy Allen Varlas**

Mailing Address **8 Sandy Ave**

City **Moundsville** State **WV** Zip Code **26041-1020**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 03 2013**

Transaction ID : **SA11AI-CN35183**

Amount of Each Receipt this Period  
**50**

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Nancy Allen Varlas**

Mailing Address **8 Sandy Ave**

City **Moundsville** State **WV** Zip Code **26041-1020**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 30 2013**

Transaction ID : **SA11AI-CN35695**

Amount of Each Receipt this Period  
**200**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Elizabeth Vass**

Mailing Address **PO Box 1210**

City **Lewisburg** State **WV** Zip Code **24901**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
M M / D D / Y Y Y Y  
**05 31 2013**

Transaction ID : **SA11AI-CN35235**

Amount of Each Receipt this Period  
**100**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**350.00**

13020280169

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 170 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Janet S Vineyard**

Mailing Address **114 Summit Ridge Rd**

City **Hurricane** State **WV** Zip Code **25526**

FEC ID number of contributing federal political committee. **C**

Name of Employer **OMEGA** Occupation **Executive Director**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 10 2013**

Transaction ID : **SA11AI-CN35004**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Barry Volpert**

Mailing Address **48 92nd St E**

City **New York** State **NY** Zip Code **10028**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Crestview Partners** Occupation **Finance**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 28 2013**

Transaction ID : **SA11AI-CN35495**

Amount of Each Receipt this Period  
**2600**

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Sarah Wade**

Mailing Address **340 Snowcrest Ln**

City **Point Pleasant** State **WV** Zip Code **25550**

FEC ID number of contributing federal political committee. **C**

Name of Employer **housewife** Occupation **Housewife**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 09 2013**

Transaction ID : **SA11AI-CN34943**

Amount of Each Receipt this Period  
**500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3600.00**

13020280170

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Cecil Walker</b>		Date of Receipt MM / DD / YYYY 05 / 09 / 2013
Mailing Address 1617 Kirklee Rd		Transaction ID : SA11Ai-CN34941
City Charleston	State WV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Walker Machinery	Occupation Vice President	Transaction ID : SA11Ai-CN34941
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

Full Name (Last, First, Middle Initial) <b>Ms. Diane Walker</b>		Date of Receipt MM / DD / YYYY 04 / 18 / 2013
Mailing Address 1410 Connell Rd		Transaction ID : SA11Ai-CN34807
City Charleston	State WV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 600
Name of Employer Housewife	Occupation Housewife	Transaction ID : SA11Ai-CN34807
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600	

Full Name (Last, First, Middle Initial) <b>Ms. Jean M. Warren</b>		Date of Receipt MM / DD / YYYY 06 / 20 / 2013
Mailing Address 2410 NW Grand Cir		Transaction ID : SA11Ai-CN35468
City Oklahoma City	State OK	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Retired	Occupation Retired	Transaction ID : SA11Ai-CN35468
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1300	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2100.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280171

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 172 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Ms. Jean M. Warren</b>		Date of Receipt MM / DD / YYYY 06 / 28 / 2013
Mailing Address 2410 NW Grand Cir		Transaction ID : SA11AI-CN35533
City Oklahoma City	State OK	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200
Name of Employer Retired	Occupation Retired	Election Cycle-to-Date 1500
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Ms. Jean M. Warren</b>		Date of Receipt MM / DD / YYYY 06 / 28 / 2013
Mailing Address 2410 NW Grand Cir		Transaction ID : SA11AI-CN35534
City Oklahoma City	State OK	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200
Name of Employer Retired	Occupation Retired	Election Cycle-to-Date 1700
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Mr. Henry B Wehrle Jr</b>		Date of Receipt MM / DD / YYYY 05 / 01 / 2013
Mailing Address 925 Newton Rd.		Transaction ID : SA11AI-CN34894
City Charleston	State WV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Retired	Occupation retired	Election Cycle-to-Date 1500
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	900.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280172

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 173 OF 323
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mrs. Elizabeth Weisberg</b>		Date of Receipt MM / DD / YYYY <b>05 / 01 / 2013</b>
Mailing Address <b>3 Chatsworth Ln</b>		<b>Transaction ID : SA11AI-CN34890</b>
City <b>Charleston</b>	State <b>WV</b>	Zip Code <b>25314</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2000</b>
Name of Employer <b>Housewife</b>	Occupation <b>Housewife</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2000</b>	

Full Name (Last, First, Middle Initial) <b>Mr. Dennis Welch</b>		Date of Receipt MM / DD / YYYY <b>06 / 03 / 2013</b>
Mailing Address <b>7714 Ogden Woods Blvd</b>		<b>Transaction ID : SA11AI-CN35168</b>
City <b>New Albany</b>	State <b>OH</b>	Zip Code <b>43054</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>900</b>
Name of Employer <b>American Electric Power</b>	Occupation <b>Executive Vice President</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>900</b>	

Full Name (Last, First, Middle Initial) <b>Mrs. Katherine Wellford</b>		Date of Receipt MM / DD / YYYY <b>06 / 28 / 2013</b>
Mailing Address <b>1615 Ridgeview Rd</b>		<b>Transaction ID : SA11AI-CN35528</b>
City <b>Charleston</b>	State <b>WV</b>	Zip Code <b>25314</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer <b>Executive Office Centers LLC</b>	Occupation <b>Executive</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>3900.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280173

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 174 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Gary Wells</b>		Date of Receipt MM / DD / YYYY 04 / 08 / 2013
Mailing Address 350 Presto Sygan Rd		Transaction ID : SA11AI-CN34871
City Bridgeville	State PA	Zip Code 15017
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500
Name of Employer Tetra Technologies	Occupation Manager	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500	

Full Name (Last, First, Middle Initial) <b>Mr. Thomas Wells Jr</b>		Date of Receipt MM / DD / YYYY 05 / 28 / 2013
Mailing Address 633 Solar Dr		Transaction ID : SA11AI-CN35074
City Fort Lauderdale	State FL	Zip Code 33301
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500
Name of Employer T.E. Wells & Co.	Occupation Investor	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500	

Full Name (Last, First, Middle Initial) <b>Mr. Thomas Wells Jr</b>		Date of Receipt MM / DD / YYYY 05 / 28 / 2013
Mailing Address 633 Solar Dr		Transaction ID : SA11AI-CN35075
City Fort Lauderdale	State FL	Zip Code 33301
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500
Name of Employer T.E. Wells & Co.	Occupation Investor	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7500.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280174

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 175 OF 323

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Mr. Mark J Welshimer</b>		Date of Receipt MM / DD / YYYY 04 / 24 / 2013
Mailing Address 47 Masterton Rd		Transaction ID : SA11Ai-CN34852
City Bronxville	State NY	
Zip Code 10708		
FEC ID number of contributing federal political committee. C		
Name of Employer Sullivan & Cromwell LLP	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

Full Name (Last, First, Middle Initial) <b>B. Mr. Mark Wenk</b>		Date of Receipt MM / DD / YYYY 05 / 28 / 2013
Mailing Address PO Box 62		Transaction ID : SA11Ai-CN35054
City Rio	State WV	
Zip Code 26755		
FEC ID number of contributing federal political committee. C		
Name of Employer Unemployed	Occupation Unemployed	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 325	

Full Name (Last, First, Middle Initial) <b>C. Mr. Mark Wenk</b>		Date of Receipt MM / DD / YYYY 06 / 28 / 2013
Mailing Address PO Box 62		Transaction ID : SA11Ai-CN35498
City Rio	State WV	
Zip Code 26755		
FEC ID number of contributing federal political committee. C		
Name of Employer Unemployed	Occupation Unemployed	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 375	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1125.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280175

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 176 OF 323
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Daniel B Wharton**

Mailing Address **18 Fairview Dr**

City **Parkersburg** State **WV** Zip Code **26101**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Wharton Cadillac/Olds/Jeep** Occupation **Auto Dealer**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 10 / 2013**

Transaction ID : **SA11Ai-CN35323**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**William Wheeler**

Mailing Address **147 Brite Ave**

City **Scarsdale** State **NY** Zip Code **10583**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Metlife** Occupation **President The Americas**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **-2600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2013**

Transaction ID : **SA11Ai-CN35765**

Amount of Each Receipt this Period  
**-2600**

Redesignated to General 2014

**[MEMO ITEM]**  
Redesignated

**C.** Full Name (Last, First, Middle Initial)  
**William Wheeler**

Mailing Address **147 Brite Ave**

City **Scarsdale** State **NY** Zip Code **10583**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Metlife** Occupation **President The Americas**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 / 30 / 2013**

Transaction ID : **SA11Ai-CN35766**

Amount of Each Receipt this Period  
**2600**

Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**500.00**

13020280176



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 177 OF 323	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>William Wheeler</b>		Date of Receipt MM / DD / YYYY <b>06 / 30 / 2013</b>	
Mailing Address <b>147 Brite Ave</b>		<b>Transaction ID : SA11AI-CN35762</b>	
City <b>Scarsdale</b>	State <b>NY</b>	Zip Code <b>10583</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>5200</b>	
Name of Employer <b>Metlife</b>	Occupation <b>President The Americas</b>	Election Cycle-to-Date <b>5200</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>Mr. Patrick Whitacre</b>		Date of Receipt MM / DD / YYYY <b>06 / 30 / 2013</b>	
Mailing Address <b>51 Ambassador Cir</b>		<b>Transaction ID : SA11AI-CN35644</b>	
City <b>Martinsburg</b>	State <b>WV</b>	Zip Code <b>25401</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>40</b>	
Name of Employer <b>self-employed</b>	Occupation <b>consultant</b>	Election Cycle-to-Date <b>290</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>Ms. Jo A White</b>		Date of Receipt MM / DD / YYYY <b>05 / 09 / 2013</b>	
Mailing Address <b>1643 Woodvale Dr</b>		<b>Transaction ID : SA11AI-CN34951</b>	
City <b>Charleston</b>	State <b>WV</b>	Zip Code <b>25314</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500</b>	
Name of Employer <b>Self Employed</b>	Occupation <b>Businesswoman</b>	Election Cycle-to-Date <b>500</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>5740.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280177

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 178 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Paul White**

Mailing Address **20 Bridlewood Rd**

City **Charleston** State **WV** Zip Code **25314**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Commercial Insurance Service** Occupation **Insurance Agent**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt **05 09 2013**

Transaction ID : **SA11Ai-CN34977**

Amount of Each Receipt this Period **1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. John C Whitehead**

Mailing Address **666 Fifth Ave**

City **New York** State **NY** Zip Code **10103**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt **06 30 2013**

Transaction ID : **SA11Ai-CN35756**

Amount of Each Receipt this Period **2500**

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Diana Whitehouse**

Mailing Address **PO Box 95171**

City **Albuquerque** State **NM** Zip Code **87199**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self Employed** Occupation **Domestic Engineer**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **275**

Date of Receipt **04 18 2013**

Transaction ID : **SA11Ai-CN34745**

Amount of Each Receipt this Period **275**

**SUBTOTAL** of Receipts This Page (optional) ..... **3775.00**

**TOTAL** This Period (last page this line number only) .....

13020280178

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 179 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. John Wick</b>		Date of Receipt MM / DD / YYYY 06 / 10 / 2013
Mailing Address 300 Virginia Ave		Transaction ID : SA11Ai-CN35341
City Richmond	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300
Name of Employer Dickinson Fuel Co. Inc.	Occupation VP	Transaction ID : SA11Ai-CN35341
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600	

Full Name (Last, First, Middle Initial) <b>Mr. Frank E. Williams Jr</b>		Date of Receipt MM / DD / YYYY 06 / 10 / 2013
Mailing Address 1 Lincoln Hts.		Transaction ID : SA11Ai-CN35317
City Buckhannon	State WV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer retired	Occupation retired	Transaction ID : SA11Ai-CN35317
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

Full Name (Last, First, Middle Initial) <b>Mr. Steven E Wilson</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013
Mailing Address 4601 4th St		Transaction ID : SA11Ai-CN35650
City Vienna	State WV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer United Bank	Occupation CFO	Transaction ID : SA11Ai-CN35650
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1050.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280179

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 180 OF 323

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Barry Winslow</b>		Date of Receipt MM / DD / YYYY <b>04 / 18 / 2013</b>
Mailing Address <b>1161 Wayzata Blvd E</b> <b>Box 32</b>		Transaction ID : <b>SA11Ai-CN34698</b>
City <b>Wayzata</b>	State <b>MN</b>	
Zip Code <b>55391</b>		Amount of Each Receipt this Period <b>1000</b>
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>TFC Financial Corp</b>	Occupation <b>Executive</b>	Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Election Cycle-to-Date <b>1000</b>		

Full Name (Last, First, Middle Initial) <b>Mr. Michael Wiseman</b>		Date of Receipt MM / DD / YYYY <b>04 / 24 / 2013</b>
Mailing Address <b>4 River Lane</b>		Transaction ID : <b>SA11Ai-CN34856</b>
City <b>Westport</b>	State <b>CT</b>	
Zip Code <b>06880</b>		Amount of Each Receipt this Period <b>1000</b>
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>Sullivan &amp; Cromwell LLP</b>	Occupation <b>Attorney</b>	Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Election Cycle-to-Date <b>1000</b>		

Full Name (Last, First, Middle Initial) <b>Mr. William E Witschey</b>		Date of Receipt MM / DD / YYYY <b>06 / 28 / 2013</b>
Mailing Address <b>155 North Street</b>		Transaction ID : <b>SA11Ai-CN35524</b>
City <b>New Martinsville</b>	State <b>WV</b>	
Zip Code <b>26155-1399</b>		Amount of Each Receipt this Period <b>500</b>
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>Witschey's Market Inc.</b>	Occupation <b>Retailer</b>	Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
Election Cycle-to-Date <b>500</b>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280180

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 181 OF 323
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Joseph Witt**

Mailing Address **14160 Autumn Trail**

City **Shakopee** State **MN** Zip Code **55379**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Minnesota Bankers Association** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 18 2013**

Transaction ID : **SA11Ai-CN34697**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Luther E Woods**

Mailing Address **PO Box 1330**

City **Huntington** State **WV** Zip Code **25714**

FEC ID number of contributing federal political committee. **C**

Name of Employer **retired** Occupation **retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 01 2013**

Transaction ID : **SA11Ai-CN34891**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Gina G Woodworth**

Mailing Address **2128 N Harrison St**

City **Arlington** State **VA** Zip Code **22205**

FEC ID number of contributing federal political committee. **C**

Name of Employer **The Internet Association** Occupation **Vice President Public Policy**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**05 07 2013**

Transaction ID : **SA11Ai-CN34916**

Amount of Each Receipt this Period  
**500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2000.00**

13020280181

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 182 OF 323
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Gerald Workman**

Mailing Address **515 Havana Dr**

City **Charleston** State **WV** Zip Code **25311**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self Employed** Occupation **Businessman**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
MM / DD / YYYY  
**06 / 19 / 2013**

Transaction ID : **SA11Ai-CN35414**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Philip A Wright**

Mailing Address **172 Crestridge Drive**

City **Scott Depot** State **WV** Zip Code **25560**

FEC ID number of contributing federal political committee. **C**

Name of Employer **AEP Appalachian Power Co.** Occupation **Executive**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750**

Date of Receipt  
MM / DD / YYYY  
**06 / 30 / 2013**

Transaction ID : **SA11Ai-CN35618**

Amount of Each Receipt this Period  
**750**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Greyson Yetter**

Mailing Address **1619 Janet Pl**

City **South Charleston** State **WV** Zip Code **25303**

FEC ID number of contributing federal political committee. **C**

Name of Employer **retired** Occupation **retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
MM / DD / YYYY  
**06 / 03 / 2013**

Transaction ID : **SA11Ai-CN35139**

Amount of Each Receipt this Period  
**150**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1000.00**

13020280182

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 183 OF 323
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Greyson Yetter</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013
Mailing Address 1619 Janet Pl		Transaction ID : SA11AI-CN35569
City South Charleston	State WV	Zip Code 25303
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300
Name of Employer retired	Occupation retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600	

Full Name (Last, First, Middle Initial) <b>Mr. Anthony A Yoseloff</b>		Date of Receipt MM / DD / YYYY 05 / 08 / 2013
Mailing Address 15 Central Park W Apt 34D		Transaction ID : SA11AI-CN35027
City New York	State NY	Zip Code 10023
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600
Name of Employer Davidson Kempa Capitol Management	Occupation Money Manager	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600	

Full Name (Last, First, Middle Initial) <b>Ms. Barbara A Young</b>		Date of Receipt MM / DD / YYYY 06 / 07 / 2013
Mailing Address 1125 Lyndale Drive		Transaction ID : SA11AI-CN35295
City Charleston	State WV	Zip Code 25314
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150
Name of Employer Valley Home Cleaning	Occupation Executive	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3050.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280183

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 184 OF 323	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Ms. Barbara A Young</b>		Date of Receipt M M / D D / Y Y Y Y <b>06 28 2013</b>
Mailing Address <b>1125 Lyndale Drive</b>		<b>Transaction ID : SA11Ai-CN35541</b>
City <b>Charleston</b>	State <b>WV</b>	Zip Code <b>25314</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>200</b>
Name of Employer <b>Valley Home Cleaning</b>	Occupation <b>Executive</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>650</b>	

Full Name (Last, First, Middle Initial) <b>Mr. Gary D Young</b>		Date of Receipt M M / D D / Y Y Y Y <b>05 01 2013</b>
Mailing Address <b>579 Rocky State Rd</b>		<b>Transaction ID : SA11Ai-CN34911</b>
City <b>Winfield</b>	State <b>WV</b>	Zip Code <b>25213</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500</b>
Name of Employer <b>G &amp; G Builders Inc.</b>	Occupation <b>contractor/owner</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>500</b>	

Full Name (Last, First, Middle Initial) <b>Mr. Michael Zarcone</b>		Date of Receipt M M / D D / Y Y Y Y <b>06 28 2013</b>
Mailing Address <b>5 Loudon Heights S</b>		<b>Transaction ID : SA11Ai-CN35723</b>
City <b>Loudonville</b>	State <b>NY</b>	Zip Code <b>12211</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer <b>Metlife</b>	Occupation <b>Officer</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1700.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280184



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Mr. Charles Zebula</b>		Date of Receipt MM / DD / YYYY <b>05 / 16 / 2013</b>
Mailing Address <b>5210 River Forest Rd</b>		Transaction ID : <b>SA11Ai-CN35053</b>
City <b>Dublin</b>	State <b>OH</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>700</b>
Name of Employer <b>American Electric Power</b>	Occupation <b>Vice President</b>	Election Cycle-to-Date <b>700</b>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Mr. Basil Zirinis</b>		Date of Receipt MM / DD / YYYY <b>04 / 24 / 2013</b>
Mailing Address <b>90 Round Hill Rd</b>		Transaction ID : <b>SA11Ai-CN34855</b>
City <b>Greenwich</b>	State <b>CT</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer <b>Sullivan &amp; Cromwell LLP</b>	Occupation <b>Attorney</b>	Election Cycle-to-Date <b>1000</b>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		MM / DD / YYYY
City	State	Zip Code
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period
Name of Employer	Occupation	Election Cycle-to-Date
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1700.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>483770.00</b>

13020280185

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Ace Group Holding PAC**

Mailing Address **436 Walnut St**

City **Philadelphia** State **PA** Zip Code **19106**

FEC ID number of contributing federal political committee. **C C00348938**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**06 30 2013**

Transaction ID : **SA11C-CN35580**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**ACPAC ACA Int'l PAC**

Mailing Address **509 2nd Street NE**

City **Washington** State **DC** Zip Code **20002**

FEC ID number of contributing federal political committee. **C C00034785**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**06 07 2013**

Transaction ID : **SA11C-CN35306**

Amount of Each Receipt this Period  
**5000**

**C.** Full Name (Last, First, Middle Initial)  
**Allianz/Fireman's Fund PAC**

Mailing Address **591 Redwood Hwy Bldg 4000**

City **Mill Valley** State **CA** Zip Code **94941**

FEC ID number of contributing federal political committee. **C C00095109**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**06 30 2013**

Transaction ID : **SA11C-CN35556**

Amount of Each Receipt this Period  
**500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**6500.00**

13020280186

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 187 OF 323
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**American Beverage Assoc. PAC**

Mailing Address **1101 16th Street NW**

City **Washington** State **DC** Zip Code **20036**

FEC ID number of contributing federal political committee. **C C00100107**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 18 2013**

Transaction ID : **SA11C-CN34816**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**American College Of Radiology Assn PAC**

Mailing Address **1891 Preston White Dr**

City **Reston** State **VA** Zip Code **20191**

FEC ID number of contributing federal political committee. **C C00343459**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 30 2013**

Transaction ID : **SA11C-CN35575**

Amount of Each Receipt this Period  
**1500**

**C.** Full Name (Last, First, Middle Initial)  
**American Council Of Life Insurers PAC**

Mailing Address **101 Constitution Ave NW**  
**Ste 700**

City **Washington** State **DC** Zip Code **20001**

FEC ID number of contributing federal political committee. **C C00147066**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 07 2013**

Transaction ID : **SA11C-CN35274**

Amount of Each Receipt this Period  
**1000**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3000.00**

13020280187

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 188 OF 323

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. American Dental Pac</b>		Date of Receipt MM / DD / YYYY 06 / 19 / 2013
Mailing Address 1111 14th St NW Suite 1100		Transaction ID : SA11C-CN35433
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C C00000729		Amount of Each Receipt this Period 2500
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500	

Full Name (Last, First, Middle Initial) <b>B. American Electric Power Pac</b>		Date of Receipt MM / DD / YYYY 06 / 07 / 2013
Mailing Address PO Box 16036		Transaction ID : SA11C-CN35311
City Columbus	State OH	Zip Code 43215
FEC ID number of contributing federal political committee. C C00096842		Amount of Each Receipt this Period 2500
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500	

Full Name (Last, First, Middle Initial) <b>C. American Future Fund PAC</b>		Date of Receipt MM / DD / YYYY 05 / 28 / 2013
Mailing Address 228 S. Washington St. Suite 115		Transaction ID : SA11C-CN35059
City Alexandria	State VA	Zip Code 22314
FEC ID number of contributing federal political committee. C C00449926		Amount of Each Receipt this Period 500
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5500.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280188

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 189 OF 323
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>American Hospital Assn. Pac</b>		Date of Receipt MM / DD / YYYY 05 / 07 / 2013
Mailing Address <b>325 Seventh Street NW</b>		Transaction ID : <b>SA11C-CN34921</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20004</b>
FEC ID number of contributing federal political committee. <b>C C00106146</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

Full Name (Last, First, Middle Initial) <b>B. American Insurance Assoc. PAC</b>		Date of Receipt MM / DD / YYYY 06 / 07 / 2013
Mailing Address <b>2101 L Street NW Suite 400</b>		Transaction ID : <b>SA11C-CN35278</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20037</b>
FEC ID number of contributing federal political committee. <b>C C00103143</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

Full Name (Last, First, Middle Initial) <b>C. Assn Of Private Sector Colleges &amp; Universities PAC</b>		Date of Receipt MM / DD / YYYY 05 / 07 / 2013
Mailing Address <b>1101 Connecticut Ave NW Ste 900</b>		Transaction ID : <b>SA11C-CN34924</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20036</b>
FEC ID number of contributing federal political committee. <b>C C00213066</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280189

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 190 OF 323
	<input type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input checked="" type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Bachus for Congress**

Mailing Address **PO Box 131134**

City **Birmingham** State **AL** Zip Code **35213**

FEC ID number of contributing federal political committee. **C C00260547**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **3500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 19 / 2013**

Transaction ID : **SA11C-CN35442**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Balch & Bingham LLP PAC**

Mailing Address **1275 Pennsylvania Avenue NW**  
**Tenth Floor**

City **Washington** State **DC** Zip Code **20004**

FEC ID number of contributing federal political committee. **C C00358440**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **2500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 30 / 2013**

Transaction ID : **SA11C-CN35753**

Amount of Each Receipt this Period  
**2500**

**C.** Full Name (Last, First, Middle Initial)  
**Bill Pac**

Mailing Address **228 Washington St S**  
**Ste 115**

City **Alexandria** State **VA** Zip Code **22314**

FEC ID number of contributing federal political committee. **C C00412288**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **5000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 07 / 2013**

Transaction ID : **SA11C-CN35272**

Amount of Each Receipt this Period  
**5000**

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

**8500.00**

13020280190

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 191 OF 323

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Bluegrass Committee</b>		Date of Receipt MM / DD / YYYY <b>06 / 20 / 2013</b>
Mailing Address <b>220 1/2 E St NE</b>		Transaction ID : <b>SA11C-CN35455</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20002</b>
FEC ID number of contributing federal political committee. <b>C C00235655</b>		Amount of Each Receipt this Period <b>5000</b>
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>10000</b>	

Full Name (Last, First, Middle Initial) <b>BNSF RailPac</b>		Date of Receipt MM / DD / YYYY <b>04 / 23 / 2013</b>
Mailing Address <b>Post Office Box 961039</b>		Transaction ID : <b>SA11C-CN34836</b>
City <b>Fort Worth</b>	State <b>TX</b>	Zip Code <b>76161</b>
FEC ID number of contributing federal political committee. <b>C C00235739</b>		Amount of Each Receipt this Period <b>5000</b>
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>5000</b>	

Full Name (Last, First, Middle Initial) <b>Bridgepoint Education Inc. PAC</b>		Date of Receipt MM / DD / YYYY <b>06 / 30 / 2013</b>
Mailing Address <b>13500 Evening Creek Dr. North</b>		Transaction ID : <b>SA11C-CN35624</b>
City <b>San Diego</b>	State <b>CA</b>	Zip Code <b>92128</b>
FEC ID number of contributing federal political committee. <b>C C00478404</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>11000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280191

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 192 OF 323
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Build PAC**

Mailing Address **1201 15th St NW**

City **Washington** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00000901**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **5000**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**06 30 2013**

Transaction ID : **SA11C-CN35620**

Amount of Each Receipt this Period  
**5000**

**B.** Full Name (Last, First, Middle Initial)  
**Burger King Franchisee PAC**

Mailing Address **1707 Barrett Lakes Blvd NW Ste 180**

City **Kennesaw** State **GA** Zip Code **30144**

FEC ID number of contributing federal political committee. **C C00329425**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **1500**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**04 11 2013**

Transaction ID : **SA11C-CN34680**

Amount of Each Receipt this Period  
**1500**

**C.** Full Name (Last, First, Middle Initial)  
**Castle PAC**

Mailing Address **PO Box 133**

City **Wilmington** State **DE** Zip Code **19899**

FEC ID number of contributing federal political committee. **C C00254938**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **1000**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**05 07 2013**

Transaction ID : **SA11C-CN34923**

Amount of Each Receipt this Period  
**1000**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**7500.00**

13020280192



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 193 OF 323
	<input type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input checked="" type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**CNA Citizens For Good Government**

Mailing Address **333 S. Wabash 43-S**

City **Chicago** State **IL** Zip Code **60604**

FEC ID number of contributing federal political committee. **C C00078287**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 30 2013**

Transaction ID : **SA11C-CN35758**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Committee To Elect Eric Nelson**

Mailing Address **PO Box 186**

City **Charleston** State **WV** Zip Code **25321**

FEC ID number of contributing federal political committee. **C**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 10 2013**

Transaction ID : **SA11C-CN35013**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Common Values PAC**

Mailing Address **901 N Washington St Ste 102**

City **Alexandria** State **VA** Zip Code **22314**

FEC ID number of contributing federal political committee. **C C00442368**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **5000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**05 07 2013**

Transaction ID : **SA11C-CN34915**

Amount of Each Receipt this Period  
**5000**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**7000.00**

13020280193

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 194 OF 323

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Compass BancPAC**

Mailing Address PO Box 10566

City Birmingham State AL Zip Code 35205

FEC ID number of contributing federal political committee. **C** C00142596

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt

M M / D D / Y Y Y Y  
06 07 2013

Transaction ID : SA11C-CN35304

Amount of Each Receipt this Period

5000

**B. Consol Energy Inc & CNX Gas Corp PAC**

Mailing Address Mr. Tommy Johnson  
1000 Consol Energy Dr

City Canonsburg State PA Zip Code 15317

FEC ID number of contributing federal political committee. **C** C00279331

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt

M M / D D / Y Y Y Y  
05 28 2013

Transaction ID : SA11C-CN35061

Amount of Each Receipt this Period

5000

**C. Consol Energy Inc & CNX Gas Corp PAC**

Mailing Address Mr. Tommy Johnson  
1000 Consol Energy Dr

City Canonsburg State PA Zip Code 15317

FEC ID number of contributing federal political committee. **C** C00279331

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 10000

Date of Receipt

M M / D D / Y Y Y Y  
05 28 2013

Transaction ID : SA11C-CN35062

Amount of Each Receipt this Period

5000

**SUBTOTAL** of Receipts This Page (optional).....

15000.00

**TOTAL** This Period (last page this line number only).....

13020280194

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 195 OF 323
	<input type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input checked="" type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A. Council of Insurance Agents Pac**

Full Name (Last, First, Middle Initial)  
Mailing Address 701 Pennsylvania Ave NW No.750

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00039578

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 6000

Date of Receipt  
MM / DD / YYYY  
05 / 28 / 2013

Transaction ID : SA11C-CN35056

Amount of Each Receipt this Period  
1000

**B. CSX Corporation Good Govt Fund**

Full Name (Last, First, Middle Initial)  
Mailing Address 1331 Pennsylvania Avenue NW Suite 560

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00163832

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 10000

Date of Receipt  
MM / DD / YYYY  
04 / 23 / 2013

Transaction ID : SA11C-CN34832

Amount of Each Receipt this Period  
5000

**C. DLA Piper PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 500 8th St NW Suite 700

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00151340

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3750

Date of Receipt  
MM / DD / YYYY  
04 / 23 / 2013

Transaction ID : SA11C-CN34839

Amount of Each Receipt this Period  
3000

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

9000.00

13020280195

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 196 OF 323

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Dominion Pac</b>		Date of Receipt MM / DD / YYYY 05 / 07 / 2013
Mailing Address One James River Plaza PO Box 26666		Transaction ID : SA11C-CN34926
City Richmond	State VA	
Zip Code 23261		Amount of Each Receipt this Period 2500
FEC ID number of contributing federal political committee. C C00108209		
Name of Employer	Occupation	Election Cycle-to-Date 2500
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Dorsey National Fund</b>		Date of Receipt MM / DD / YYYY 04 / 18 / 2013
Mailing Address 50 South Sixth Street Suite 1500		Transaction ID : SA11C-CN34702
City Minneapolis	State MN	
Zip Code 55402		Amount of Each Receipt this Period 500
FEC ID number of contributing federal political committee. C C00018945		
Name of Employer	Occupation	Election Cycle-to-Date 500
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>Dow Chemical Co. Pac- DePac</b>		Date of Receipt MM / DD / YYYY 06 / 07 / 2013
Mailing Address 2030 Dow Center		Transaction ID : SA11C-CN35305
City Midland	State MI	
Zip Code 48674		Amount of Each Receipt this Period 1000
FEC ID number of contributing federal political committee. C C00034124		
Name of Employer	Occupation	Election Cycle-to-Date 1000
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4000.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280196

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 197 OF 323
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>DTE Energy PAC</b>		Date of Receipt MM / DD / YYYY <b>04 / 23 / 2013</b>
Mailing Address <b>One Energy Plaza</b>		Transaction ID : <b>SA11C-CN34826</b>
City <b>Detroit</b>	State <b>MI</b>	Zip Code <b>48226</b>
FEC ID number of contributing federal political committee. <b>C C00081547</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

Full Name (Last, First, Middle Initial) <b>EBay Inc. Comm. Pac</b>		Date of Receipt MM / DD / YYYY <b>06 / 30 / 2013</b>
Mailing Address <b>228 S. Washington St. Suite 115</b>		Transaction ID : <b>SA11C-CN35577</b>
City <b>Alexandria</b>	State <b>VA</b>	Zip Code <b>22314</b>
FEC ID number of contributing federal political committee. <b>C C00342394</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>3000</b>	

Full Name (Last, First, Middle Initial) <b>Emerson Electric Co Good Govt Fund</b>		Date of Receipt MM / DD / YYYY <b>05 / 28 / 2013</b>
Mailing Address <b>8000 W Florissant Ave</b>		Transaction ID : <b>SA11C-CN35076</b>
City <b>St. Louis</b>	State <b>MO</b>	Zip Code <b>63136</b>
FEC ID number of contributing federal political committee. <b>C C00080515</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280197

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Enterprise Holdings Inc. Pac**

Mailing Address **600 Corporate Park Dr**

City **Clayton** State **MO** Zip Code **63105-4211**

FEC ID number of contributing federal political committee. **C C00219642**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_

Date of Receipt **04 18 2013**

Transaction ID : **SA11C-CN34817**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**EQT Corporation PAC**

Mailing Address **625 Liberty Ave Ste 1700**

City **Pittsburgh** State **PA** Zip Code **15222**

FEC ID number of contributing federal political committee. **C C00151175**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_

Date of Receipt **05 29 2013**

Transaction ID : **SA11C-CN35073**

Amount of Each Receipt this Period  
**2500**

**C.** Full Name (Last, First, Middle Initial)  
**Experian North America Pac**

Mailing Address **475 Anton Blvd**

City **Costa Mesa** State **CA** Zip Code **92626**

FEC ID number of contributing federal political committee. **C C00379768**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_

Date of Receipt **04 23 2013**

Transaction ID : **SA11C-CN34831**

Amount of Each Receipt this Period  
**2500**

**SUBTOTAL** of Receipts This Page (optional) ..... **6000.00**

**TOTAL** This Period (last page this line number only) .....

13020280198

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 199 OF 323  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Fifth Third Bancorp Pac**

Mailing Address 550 E Walnut St

City Columbus State OH Zip Code 43215

FEC ID number of contributing federal political committee. **C** C00290502

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2250

Date of Receipt  
MM / DD / YYYY  
04 / 23 / 2013

Transaction ID : SA11C-CN34829

Amount of Each Receipt this Period  
250

**B.** Full Name (Last, First, Middle Initial)  
**Financial Services PAC**

Mailing Address 1001 Liberty Ave

City Pittsburgh State PA Zip Code 15222

FEC ID number of contributing federal political committee. **C** C00162735

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2500

Date of Receipt  
MM / DD / YYYY  
05 / 01 / 2013

Transaction ID : SA11C-CN34883

Amount of Each Receipt this Period  
2500

**C.** Full Name (Last, First, Middle Initial)  
**Financial Services Roundtable PAC**

Mailing Address 1001 Pennsylvania Ave NW  
Suite 500

City Washington State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C00193177

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2013

Transaction ID : SA11C-CN35583

Amount of Each Receipt this Period  
4000

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

6750.00

13020280199

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 200 OF 323

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**Friends Of Ginny Brown-Waite**

Mailing Address **PO Box 865**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
06			19			2013					

Transaction ID : **SA11C-CN35432**

Amount of Each Receipt this Period

**4000**

City State Zip Code  
**Brooksville FL 34605**

FEC ID number of contributing federal political committee. **C C00367680**

Name of Employer Occupation

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

**4000**

Full Name (Last, First, Middle Initial)  
**Fund for American Op**

Mailing Address **Mr Mark Valente III**  
**Treasurer**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
06			30			2013					

Transaction ID : **SA11C-CN35741**

Amount of Each Receipt this Period

**1000**

City State Zip Code  
**Washington DC 20036**

FEC ID number of contributing federal political committee. **C C00336297**

Name of Employer Occupation

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

**1000**

Full Name (Last, First, Middle Initial)  
**Gas Pac**

Mailing Address **400 N Capitol Street NW**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
05			09			2013					

Transaction ID : **SA11C-CN34933**

Amount of Each Receipt this Period

**3000**

City State Zip Code  
**Washington DC 20001**

FEC ID number of contributing federal political committee. **C C00007450**

Name of Employer Occupation

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

**3000**

**SUBTOTAL** of Receipts This Page (optional).....

**8000.00**

**TOTAL** This Period (last page this line number only).....

13020280200



**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 201 OF 323
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Genesee & Wyoming Inc PAC**

Mailing Address **3601 Concord Road**  
**2nd Floor**

City **York** State **PA** Zip Code **17402**

FEC ID number of contributing federal political committee. **C C00289058**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **500**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 / 07 / 2013**

Transaction ID : **SA11C-CN35285**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Hartford Advocates Fund**

Mailing Address **690 Asylum Ave**

City **Hartford** State **CT** Zip Code **06115**

FEC ID number of contributing federal political committee. **C C00168864**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **1000**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 / 07 / 2013**

Transaction ID : **SA11C-CN35286**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Independent Community Bankers**

Mailing Address **1615 L St NW**  
**Ste 900**

City **Washington** State **DC** Zip Code **20036**

FEC ID number of contributing federal political committee. **C C00032698**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **6000**

Date of Receipt  
M M / D D / Y Y Y Y  
**04 / 23 / 2013**

Transaction ID : **SA11C-CN34828**

Amount of Each Receipt this Period  
**1000**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2500.00**

13020280201

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 202 OF 323	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Intel PAC</b>		Date of Receipt MM / DD / YYYY 05 / 07 / 2013
A. Mailing Address 1155 F St NW		Transaction ID : SA11C-CN34919
City Washington	State DC	Zip Code 20004
FEC ID number of contributing federal political committee. C C00125641		Amount of Each Receipt this Period 2000
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000	

Full Name (Last, First, Middle Initial) <b>Intl. Union Of Operating Engineers PAC</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013
B. Mailing Address 1125 Seventeenth Street NW		Transaction ID : SA11C-CN35571
City Washington	State DC	Zip Code 20036
FEC ID number of contributing federal political committee. C C00029504		Amount of Each Receipt this Period 5000
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 10000	

Full Name (Last, First, Middle Initial) <b>JAPAC</b>		Date of Receipt MM / DD / YYYY 06 / 19 / 2013
C. Mailing Address 52 Vanderbilt Avenue 19th Floor		Transaction ID : SA11C-CN35434
City New York	State NY	Zip Code 10017
FEC ID number of contributing federal political committee. C C00333666		Amount of Each Receipt this Period 1000
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	8000.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280202

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 203 OF 323
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**John Deere Political Pac**

**A.** Mailing Address **One John Deere Pl**

City **Moline** State **IL** Zip Code **61265**

FEC ID number of contributing federal political committee. **C C00204099**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **5000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 30 2013**

Transaction ID : **SA11C-CN35579**

Amount of Each Receipt this Period  
**5000**

Full Name (Last, First, Middle Initial)  
**Koch Industries Pac**

**B.** Mailing Address **600 14th St. NW Ste. 800**

City **Washington** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00236489**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **5000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 30 2013**

Transaction ID : **SA11C-CN35584**

Amount of Each Receipt this Period  
**5000**

Full Name (Last, First, Middle Initial)  
**Koppers Inc PAC**

**C.** Mailing Address **436 7th Ave**

City **Pittsburgh** State **PA** Zip Code **15219**

FEC ID number of contributing federal political committee. **C C00391821**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**04 18 2013**

Transaction ID : **SA11C-CN34787**

Amount of Each Receipt this Period  
**1000**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**11000.00**

13020280203

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 204 OF 323

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**L. W. Border Campaign Fund**

Mailing Address **39 Highland Meadows Drive**

City State Zip Code  
**Davisville WV 26142**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
MM / DD / YYYY  
**06 07 2013**

Transaction ID : **SA11C-CN35284**

Amount of Each Receipt this Period  
**1000**

**B.**

Full Name (Last, First, Middle Initial)  
**Liberty Mutual Insurance PAC**

Mailing Address **175 Berkeley St**

City State Zip Code  
**Boston MA 02117**

FEC ID number of contributing federal political committee. **C C00171843**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
MM / DD / YYYY  
**06 30 2013**

Transaction ID : **SA11C-CN35581**

Amount of Each Receipt this Period  
**1000**

**C.**

Full Name (Last, First, Middle Initial)  
**Lincoln PAC**

Mailing Address **PO Box A3968**

City State Zip Code  
**Chicago IL 60690**

FEC ID number of contributing federal political committee. **C C00491241**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500**

Date of Receipt  
MM / DD / YYYY  
**06 30 2013**

Transaction ID : **SA11C-CN35743**

Amount of Each Receipt this Period  
**2500**

**SUBTOTAL** of Receipts This Page (optional).....

**4500.00**

**TOTAL** This Period (last page this line number only).....

13020280204

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 205 OF 323
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 15	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>LIUNA PAC</b>		Date of Receipt MM / DD / YYYY <b>05 / 09 / 2013</b>
Mailing Address <b>905 16th Street NW</b>		<b>Transaction ID : SA11C-CN34932</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20006</b>
FEC ID number of contributing federal political committee. <b>C C00007922</b>		Amount of Each Receipt this Period <b>5000</b>
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>5000</b>	

Full Name (Last, First, Middle Initial) <b>Longhorn PAC</b>		Date of Receipt MM / DD / YYYY <b>04 / 18 / 2013</b>
Mailing Address <b>PO Box 30844</b>		<b>Transaction ID : SA11C-CN34754</b>
City <b>Bethesda</b>	State <b>MD</b>	Zip Code <b>20824</b>
FEC ID number of contributing federal political committee. <b>C C00402602</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

Full Name (Last, First, Middle Initial) <b>ManTech Inter'l Corp. PAC</b>		Date of Receipt MM / DD / YYYY <b>06 / 07 / 2013</b>
Mailing Address <b>12015 Lee Jackson Highway</b>		<b>Transaction ID : SA11C-CN35275</b>
City <b>Fairfax</b>	State <b>VA</b>	Zip Code <b>22033</b>
FEC ID number of contributing federal political committee. <b>C C00208983</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>7000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280205

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**Markwest Energy PAC**

Mailing Address **1515 Arapahoe Street**

**Tower I**

City **Denver** State **CO** Zip Code **80202**

FEC ID number of contributing federal political committee. **C C00489468**

Name of Employer Occupation

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

**1000**

Date of Receipt

**05 / 07 / 2013**

Transaction ID : **SA11C-CN34922**

Amount of Each Receipt this Period

**1000**

Full Name (Last, First, Middle Initial)

**Maynard Cooper & Gale PC PAC**

Mailing Address **2400 Regions Harbert Plaza**

City **Birmingham** State **AL** Zip Code **35203**

FEC ID number of contributing federal political committee. **C C00272724**

Name of Employer Occupation

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

**2500**

Date of Receipt

**06 / 19 / 2013**

Transaction ID : **SA11C-CN35443**

Amount of Each Receipt this Period

**2500**

Full Name (Last, First, Middle Initial)

**McGuireWoods Pac**

Mailing Address **One James Center**

**901 Cary Street**

City **Richmond** State **VA** Zip Code **23219-4030**

FEC ID number of contributing federal political committee. **C C00225342**

Name of Employer Occupation

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

**2500**

Date of Receipt

**06 / 07 / 2013**

Transaction ID : **SA11C-CN35282**

Amount of Each Receipt this Period

**2500**

**SUBTOTAL** of Receipts This Page (optional).....

**6000.00**

**TOTAL** This Period (last page this line number only).....

13020280206

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 207 OF 323	
	<input type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a	<input checked="" type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A. McKesson Corp Employees Political Fund**

Full Name (Last, First, Middle Initial)  
Mailing Address One Post St  
32nd Floor  
City San Francisco State CA Zip Code 94101

FEC ID number of contributing federal political committee. **C C00108035**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000

Date of Receipt  
MM / DD / YYYY  
05 / 07 / 2013

Transaction ID : SA11C-CN34917

Amount of Each Receipt this Period  
5000

**B. Mortgage Bankers Assn Pac**

Full Name (Last, First, Middle Initial)  
Mailing Address Len Wolfson  
1717 Rhode Island Ave NW Ste 400  
City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. **C C00004812**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3000

Date of Receipt  
MM / DD / YYYY  
06 / 30 / 2013

Transaction ID : SA11C-CN35553

Amount of Each Receipt this Period  
1000

**C. Nat. Chicken Council Pac**

Full Name (Last, First, Middle Initial)  
Mailing Address 1015 15th St NW Suite 930  
City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00034272**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
MM / DD / YYYY  
05 / 07 / 2013

Transaction ID : SA11C-CN34927

Amount of Each Receipt this Period  
1000

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

7000.00

13020280207

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Nat. Chicken Council Pac**

Mailing Address **1015 15th St NW Suite 930**

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C C00034272**

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 30 2013**

Transaction ID : **SA11C-CN35570**

Amount of Each Receipt this Period  
**2000**

**B.** Full Name (Last, First, Middle Initial)  
**National Apartment Assn. PAC**

Mailing Address **Mr. Bradley Hix**  
**4300 Wilson Blvd.**

City Arlington	State VA	Zip Code 22203
-------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C C00113241**

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 19 2013**

Transaction ID : **SA11C-CN35441**

Amount of Each Receipt this Period  
**2500**

**C.** Full Name (Last, First, Middle Initial)  
**National Association Of Mutal Insurance Co Pac**

Mailing Address **3601 Vincennes Rd**

City Indianapolis	State IN	Zip Code 46268
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C C00170258**

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**06 30 2013**

Transaction ID : **SA11C-CN35586**

Amount of Each Receipt this Period  
**1000**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**5500.00**

13020280208



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 209 OF 323

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>National Cattlemen's Beef Pac</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013
Mailing Address 9110 Nicholas Ave E Post Office Box 80112		Transaction ID : SA11C-CN35574
City Englewood	State CO	
FEC ID number of contributing federal political committee. C C00028787		Amount of Each Receipt this Period 2500
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500	

Full Name (Last, First, Middle Initial) <b>National Propane Gas</b>		Date of Receipt MM / DD / YYYY 06 / 07 / 2013
Mailing Address 1150 17th Street NW Suite 310		Transaction ID : SA11C-CN35310
City Washington	State DC	
FEC ID number of contributing federal political committee. C C00079681		Amount of Each Receipt this Period 1000
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

Full Name (Last, First, Middle Initial) <b>National Turkey Federation PAC</b>		Date of Receipt MM / DD / YYYY 06 / 30 / 2013
Mailing Address 1225 New York Ave NW Suite 400		Transaction ID : SA11C-CN35572
City Washington	State DC	
FEC ID number of contributing federal political committee. C C00076182		Amount of Each Receipt this Period 2000
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5500.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280209

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 210 OF 323

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>NemPac</b>		Date of Receipt MM / DD / YY <b>06 / 30 / 2013</b>
Mailing Address <b>PO Box 619911</b>		<b>Transaction ID : SA11C-CN35576</b>
City <b>Dallas</b>	State <b>TX</b>	Zip Code <b>75261</b>
FEC ID number of contributing federal political committee. <b>C C00140061</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>6000</b>	

Full Name (Last, First, Middle Initial) <b>Noble Energy PAC</b>		Date of Receipt MM / DD / YY <b>05 / 09 / 2013</b>
Mailing Address <b>100 Glenborough Dr Ste 100</b>		<b>Transaction ID : SA11C-CN34934</b>
City <b>Houston</b>	State <b>TX</b>	Zip Code <b>77067</b>
FEC ID number of contributing federal political committee. <b>C C00479873</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

Full Name (Last, First, Middle Initial) <b>Norfolk Southern Corp Good Govt. Fund</b>		Date of Receipt MM / DD / YY <b>04 / 23 / 2013</b>
Mailing Address <b>Three Commercial Pl</b>		<b>Transaction ID : SA11C-CN34835</b>
City <b>Norfolk</b>	State <b>VA</b>	Zip Code <b>23510</b>
FEC ID number of contributing federal political committee. <b>C C00009282</b>		Amount of Each Receipt this Period <b>5000</b>
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>10000</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>7000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280210

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 211 OF 323

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**Northern Trust Co Good Govt Comm.**

Mailing Address **50 S LaSalle St**

City State Zip Code  
**Chicago IL 60603**

FEC ID number of contributing federal political committee. **C C00024935**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 30 2013**

Transaction ID : **SA11C-CN35566**

Amount of Each Receipt this Period  
**1000**

Full Name (Last, First, Middle Initial)  
**NSSGA - RockPac**

Mailing Address **2299 Perimeter Pkwy Dr**

City State Zip Code  
**Atlanta GA 30341**

FEC ID number of contributing federal political committee. **C C00089458**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 30 2013**

Transaction ID : **SA11C-CN35625**

Amount of Each Receipt this Period  
**2500**

Full Name (Last, First, Middle Initial)  
**Oldcastle Materials Inc. PAC**

Mailing Address **101 Constitution Ave NW  
Suite 600 W**

City State Zip Code  
**Washington DC 20001**

FEC ID number of contributing federal political committee. **C C00346353**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
M M / D D / Y Y Y Y  
**04 23 2013**

Transaction ID : **SA11C-CN34833**

Amount of Each Receipt this Period  
**1000**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**4500.00**

13020280211

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 212 OF 323
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 15	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A. Pioneer PAC**

Full Name (Last, First, Middle Initial)  
**Pioneer PAC**

Mailing Address **701 8th St NW Ste 500**

City **Washington** State **DC** Zip Code **20001**

FEC ID number of contributing federal political committee. **C C00325357**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000**

Date of Receipt  
 MM / DD / YYYY  
**06 / 28 / 2013**

Transaction ID : **SA11C-CN35529**

Amount of Each Receipt this Period  
**5000**

**B. Power Pac of Energy Future Holdings**

Full Name (Last, First, Middle Initial)  
**Power Pac of Energy Future Holdings**

Mailing Address **1601 Bryan St**

City **Dallas** State **TX** Zip Code **75201**

FEC ID number of contributing federal political committee. **C C00255950**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 MM / DD / YYYY  
**06 / 30 / 2013**

Transaction ID : **SA11C-CN35558**

Amount of Each Receipt this Period  
**1000**

**C. Power Pac Of The Edison Electric Institute**

Full Name (Last, First, Middle Initial)  
**Power Pac Of The Edison Electric Institute**

Mailing Address **701 Pennsylvania Avenue NW**

City **Washington** State **DC** Zip Code **20004**

FEC ID number of contributing federal political committee. **C C00095869**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt  
 MM / DD / YYYY  
**05 / 07 / 2013**

Transaction ID : **SA11C-CN34925**

Amount of Each Receipt this Period  
**2500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**8500.00**

13020280212

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 213 OF 323

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Protective Life Corp FED PAC</b>		Date of Receipt M M / D D / Y Y Y Y <b>06 19 2013</b>
Mailing Address <b>PO Box 2606</b>		<b>Transaction ID : SA11C-CN35446</b>
City <b>Birmingham</b>	State <b>AL</b>	Zip Code <b>35202</b>
FEC ID number of contributing federal political committee. <b>C C00161414</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

Full Name (Last, First, Middle Initial) <b>Regions Financial Corp PAC</b>		Date of Receipt M M / D D / Y Y Y Y <b>06 30 2013</b>
Mailing Address <b>417 20th St N</b>		<b>Transaction ID : SA11C-CN35573</b>
City <b>Birmingham</b>	State <b>AL</b>	Zip Code <b>35202</b>
FEC ID number of contributing federal political committee. <b>C C00432252</b>		Amount of Each Receipt this Period <b>5000</b>
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>10000</b>	

Full Name (Last, First, Middle Initial) <b>REPAC</b>		Date of Receipt M M / D D / Y Y Y Y <b>06 07 2013</b>
Mailing Address <b>1445 New York Ave NW</b> <b>7th Floor</b>		<b>Transaction ID : SA11C-CN35276</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20005</b>
FEC ID number of contributing federal political committee. <b>C C00256453</b>		Amount of Each Receipt this Period <b>2000</b>
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2000</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>8000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280213

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: (check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A. Republican Mainstreet Partnership Pac**

Full Name (Last, First, Middle Initial)  
Mailing Address 1220 L St NW Suite 100-263

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00165159

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 7000

Date of Receipt 04 / 17 / 2013  
Transaction ID : SA11C-CN34681

Amount of Each Receipt this Period 5000

**B. Republican Mainstreet Partnership Pac**

Full Name (Last, First, Middle Initial)  
Mailing Address 1220 L St NW Suite 100-263

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00165159

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 10000

Date of Receipt 04 / 17 / 2013  
Transaction ID : SA11C-CN34682

Amount of Each Receipt this Period 3000

**C. Roane County Republican Executive Committee**

Full Name (Last, First, Middle Initial)  
Mailing Address Camp 810 John Boggs Rd

City Spencer State WV Zip Code 25276

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 250

Date of Receipt 06 / 28 / 2013  
Transaction ID : SA11C-CN35509

Amount of Each Receipt this Period 250

**SUBTOTAL** of Receipts This Page (optional)..... 8250.00

**TOTAL** This Period (last page this line number only).....

13020280214

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 215 OF 323  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Rock City PAC</b>		Date of Receipt MM / DD / YYYY 05 / 09 / 2013
Mailing Address 1015 Stonebridge Park Drive		Transaction ID : SA11C-CN34971
City Franklin	State TN	
FEC ID number of contributing federal political committee. C C00436410		Amount of Each Receipt this Period 5000
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000	

Full Name (Last, First, Middle Initial) <b>Rock City PAC</b>		Date of Receipt MM / DD / YYYY 05 / 09 / 2013
Mailing Address 1015 Stonebridge Park Drive		Transaction ID : SA11C-CN34972
City Franklin	State TN	
FEC ID number of contributing federal political committee. C C00436410		Amount of Each Receipt this Period 2498
Name of Employer	Occupation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 7498	

Full Name (Last, First, Middle Initial) <b>Safari Club Internat Pac</b>		Date of Receipt MM / DD / YYYY 06 / 07 / 2013
Mailing Address 4800 Gates Pass Rd W		Transaction ID : SA11C-CN35303
City Tucson	State AZ	
FEC ID number of contributing federal political committee. C C00122101		Amount of Each Receipt this Period 1000
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

SUBTOTAL of Receipts This Page (optional).....	8498.00
TOTAL This Period (last page this line number only).....	

13020280215

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 216 OF 323

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Sea Pac</b>		Date of Receipt MM / DD / YYYY <b>04 / 18 / 2013</b>
Mailing Address <b>1776 Eye ST.NW Suite 255</b>		<b>Transaction ID : SA11C-CN34725</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20006</b>
FEC ID number of contributing federal political committee. <b>C C00466458</b>		Amount of Each Receipt this Period <b>2500</b>
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2500</b>	

Full Name (Last, First, Middle Initial) <b>Smithfield Foods Inc. PAC</b>		Date of Receipt MM / DD / YYYY <b>06 / 07 / 2013</b>
Mailing Address <b>200 Commerce Street</b>		<b>Transaction ID : SA11C-CN35309</b>
City <b>Smithfield</b>	State <b>VA</b>	Zip Code <b>23430</b>
FEC ID number of contributing federal political committee. <b>C C00359075</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

Full Name (Last, First, Middle Initial) <b>Society of Thoracic Surgeons PAC</b>		Date of Receipt MM / DD / YYYY <b>05 / 01 / 2013</b>
Mailing Address <b>20 F St NW Ste 310 C</b>		<b>Transaction ID : SA11C-CN34882</b>
City <b>Washington</b>	State <b>DC</b>	Zip Code <b>20001</b>
FEC ID number of contributing federal political committee. <b>C C00325936</b>		Amount of Each Receipt this Period <b>1000</b>
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>4500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280216



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 217 OF 323
	<input type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input checked="" type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Southern Company Employee PAC**

Mailing Address **241 Ralph McGill Boulevard NE**

City **Atlanta** State **GA** Zip Code **30308**

FEC ID number of contributing federal political committee. **C C00144774**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 07 / 2013**

Transaction ID : **SA11C-CN35273**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Spectra Corp. PAC**

Mailing Address **5400 Westheimer Court**

City **Houston** State **TX** Zip Code **77056**

FEC ID number of contributing federal political committee. **C C00429662**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 / 07 / 2013**

Transaction ID : **SA11C-CN35287**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**TCF Financial Corp. PAC**

Mailing Address **801 Marquette Avenue**

City **Minneapolis** State **MN** Zip Code **55402**

FEC ID number of contributing federal political committee. **C C00218263**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 / 18 / 2013**

Transaction ID : **SA11C-CN34703**

Amount of Each Receipt this Period  
**5000**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**7000.00**

13020280217

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 218 OF 323
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**TCF Financial Corp. PAC**

Mailing Address **801 Marquette Avenue**

City **Minneapolis** State **MN** Zip Code **55402**

FEC ID number of contributing federal political committee. **C C00218263**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **10000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 18 2013**

Transaction ID : **SA11C-CN34704**

Amount of Each Receipt this Period  
**5000**

**B.** Full Name (Last, First, Middle Initial)  
**Teco Energy Inc. Employees Pac**

Mailing Address **702 Franklin St N**

City **Tampa** State **FL** Zip Code **33602**

FEC ID number of contributing federal political committee. **C C00161422**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 10 2013**

Transaction ID : **SA11C-CN35340**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**TENN PAC INC**

Mailing Address **6213 Charlotte Ave  
Suite 112**

City **Nashville** State **TN** Zip Code **37209**

FEC ID number of contributing federal political committee. **C C00388421**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **5000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 30 2013**

Transaction ID : **SA11C-CN35567**

Amount of Each Receipt this Period  
**5000**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**11000.00**

13020280218

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 219 OF 323

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>The Alamo PAC</b>		Date of Receipt MM / DD / YYYY <b>06 / 30 / 2013</b>
Mailing Address <b>919 Congress Ave</b> <b>Ste 1400</b>		Transaction ID : <b>SA11C-CN35623</b>
City <b>Austin</b>	State <b>TX</b>	
Zip Code <b>78701</b>		Amount of Each Receipt this Period <b>5000</b>
FEC ID number of contributing federal political committee. <b>C C00387464</b>		
Name of Employer	Occupation	Election Cycle-to-Date <b>5000</b>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>The Chubb Corporation Pac</b>		Date of Receipt MM / DD / YYYY <b>06 / 30 / 2013</b>
Mailing Address <b>15 Mountain View Rd</b>		Transaction ID : <b>SA11C-CN35554</b>
City <b>Plainfield</b>	State <b>NJ</b>	
Zip Code <b>07061</b>		Amount of Each Receipt this Period <b>1000</b>
FEC ID number of contributing federal political committee. <b>C C00229203</b>		
Name of Employer	Occupation	Election Cycle-to-Date <b>1000</b>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>The Williams Companies Inc. PAC</b>		Date of Receipt MM / DD / YYYY <b>06 / 07 / 2013</b>
Mailing Address <b>1627 I Street NW</b> <b>Suite 900</b>		Transaction ID : <b>SA11C-CN35312</b>
City <b>Washington</b>	State <b>DC</b>	
Zip Code <b>20006</b>		Amount of Each Receipt this Period <b>1000</b>
FEC ID number of contributing federal political committee. <b>C C00040394</b>		
Name of Employer	Occupation	Election Cycle-to-Date <b>1000</b>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>7000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280219

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

PAGE 220 OF 323

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**Title Industry Pac**

Mailing Address **1828 L St N.W Suite 705**

City State Zip Code  
**Washington DC 20036**

FEC ID number of contributing federal political committee. **C C00012914**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 07 2013**

Transaction ID : **SA11C-CN35280**

Amount of Each Receipt this Period  
**1000**

**B.**

Full Name (Last, First, Middle Initial)  
**Title Industry Pac**

Mailing Address **1828 L St N.W Suite 705**

City State Zip Code  
**Washington DC 20036**

FEC ID number of contributing federal political committee. **C C00012914**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**3500**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 30 2013**

Transaction ID : **SA11C-CN35555**

Amount of Each Receipt this Period  
**2500**

**C.**

Full Name (Last, First, Middle Initial)  
**Tuesday Group PAC**

Mailing Address **PO Box 11586**

City State Zip Code  
**Washington DC 20008**

FEC ID number of contributing federal political committee. **C C00433060**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5000**

Date of Receipt  
M M / D D / Y Y Y Y  
**06 19 2013**

Transaction ID : **SA11C-CN35435**

Amount of Each Receipt this Period  
**2500**

**SUBTOTAL** of Receipts This Page (optional)..... **6000.00**

**TOTAL** This Period (last page this line number only).....

13020280220

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 221 OF 323

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**U.S. Chamber of Commerce PAC**

A. Mailing Address **1615 H St NW**

City **Washington** State **DC** Zip Code **20062**

FEC ID number of contributing federal political committee. **C C00082040**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **10000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 18 2013**

Transaction ID : **SA11C-CN34748**

Amount of Each Receipt this Period  
**5000**

Full Name (Last, First, Middle Initial)  
**Union Pacific Corp. Fund For Effective Government**

B. Mailing Address **600 Thirteenth Street NW Suite 340**

City **Washington** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00010470**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**04 23 2013**

Transaction ID : **SA11C-CN34827**

Amount of Each Receipt this Period  
**5000**

Full Name (Last, First, Middle Initial)  
**United For Health Pac**

C. Mailing Address **701 Pennsylvania Ave NW Suite 200**

City **Washington** State **DC** Zip Code **20004**

FEC ID number of contributing federal political committee. **C C00274431**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**06 30 2013**

Transaction ID : **SA11C-CN35742**

Amount of Each Receipt this Period  
**2500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**12500.00**

13020280221

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 222 OF 323
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. US Cellular Corporation PAC</b>		Date of Receipt MM / DD / YYYY <b>06 / 30 / 2013</b>
Mailing Address <b>8410 W Bryn Mawr Ave</b> <b>Suite 700</b>		Transaction ID : <b>SA11C-CN35578</b>
City <b>Chicago</b>	State <b>IL</b>	
Zip Code <b>60631</b>		Amount of Each Receipt this Period <b>2000</b>
FEC ID number of contributing federal political committee. <b>C C00336057</b>		
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2000</b>	

Full Name (Last, First, Middle Initial) <b>B. US Steel Pac</b>		Date of Receipt MM / DD / YYYY <b>04 / 30 / 2013</b>
Mailing Address <b>600 Grant St</b>		Transaction ID : <b>SA11C-CN35086</b>
City <b>Pittsburgh</b>	State <b>PA</b>	
Zip Code <b>15219-2800</b>		Amount of Each Receipt this Period <b>2500</b>
FEC ID number of contributing federal political committee. <b>C C00030676</b>		
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>3500</b>	

Full Name (Last, First, Middle Initial) <b>C. Vulcan Materials Company PAC</b>		Date of Receipt MM / DD / YYYY <b>06 / 19 / 2013</b>
Mailing Address <b>PO Box 385014</b>		Transaction ID : <b>SA11C-CN35447</b>
City <b>Birmingham</b>	State <b>AL</b>	
Zip Code <b>35238</b>		Amount of Each Receipt this Period <b>1000</b>
FEC ID number of contributing federal political committee. <b>C C00116020</b>		
Name of Employer	Occupation	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>5500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

13020280222

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 223 OF 323

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Zurich Group</b>		Date of Receipt MM / DD / YYYY <b>06 / 30 / 2013</b>
Mailing Address <b>1201 F St NW</b> <b>Zurich Towers T1-20</b>		Transaction ID : <b>SA11C-CN35557</b>
City <b>Washington</b>	State <b>DC</b>	
Zip Code <b>20004</b>		Amount of Each Receipt this Period <b>1000</b>
FEC ID number of contributing federal political committee. <b>C C00235036</b>		
Name of Employer	Occupation	Election Cycle-to-Date <b>1000</b>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial)		Date of Receipt MM / DD / YYYY
Mailing Address		Transaction ID
City	State	
Zip Code		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation	Election Cycle-to-Date
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial)		Date of Receipt MM / DD / YYYY
Mailing Address		Transaction ID
City	State	
Zip Code		Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation	Election Cycle-to-Date
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>259998.00</b>

13020280223

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 224 OF 323  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**BB&T**

**A.** Mailing Address 300 Summers Street

City State Zip Code  
Charleston WV 25301

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
212.77

Date of Receipt  
 M M / D D / Y Y Y Y  
 05 31 2013

Transaction ID : SA15-RC560

Amount of Each Receipt this Period  
62.67  
Interest Earned

Full Name (Last, First, Middle Initial)  
**BB&T**

**B.** Mailing Address 300 Summers Street

City State Zip Code  
Charleston WV 25301

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
275.17

Date of Receipt  
 M M / D D / Y Y Y Y  
 06 30 2013

Transaction ID : SA15-RC561

Amount of Each Receipt this Period  
62.4  
Interest Earned

Full Name (Last, First, Middle Initial)

**C.** Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

125.07

**TOTAL** This Period (last page this line number only).....

125.07

13020280224



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Mary Payne</b>		Date of Disbursement MM / DD / YYYY 04 / 09 / 2013
Mailing Address 1414 Loudon Heights Road		Amount of Each Disbursement this Period 36.73 Transaction ID : SB17-EX12649
City Charleston	State WV Zip Code 25314	
Purpose of Disbursement REIMBURSEMENT: SEE BELOW		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	REIMBURSEMENT: SEE BELOW
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Sams Club</b>		Date of Disbursement MM / DD / YYYY 04 / 09 / 2013
Mailing Address RHL Blvd.		Amount of Each Disbursement this Period 36.73 Transaction ID : SB17-EX12650
City Charleston	State WV Zip Code 25304	
Purpose of Disbursement Food and Beverage		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM]
State:	District:	

Full Name (Last, First, Middle Initial) <b>c. Mary Payne</b>		Date of Disbursement MM / DD / YYYY 06 / 19 / 2013
Mailing Address 1414 Loudon Heights Road		Amount of Each Disbursement this Period 78.66 Transaction ID : SB17-EX12803
City Charleston	State WV Zip Code 25314	
Purpose of Disbursement REIMBURSEMENT: SEE BELOW		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	REIMBURSEMENT: SEE BELOW
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	115.39
<b>TOTAL</b> This Period (last page this line number only).....	

13020280225

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. U.S. Postmaster</b>		Date of Disbursement MM / DD / YYYY 06 / 19 / 2013
Mailing Address Lee Street		Amount of Each Disbursement this Period 78.66 Transaction ID : SB17-EX12804 [MEMO ITEM]
City Charleston	State WV	
Zip Code 25301	Purpose of Disbursement Postage	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Townsend Group</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2013
Mailing Address 1006 Pendleton St.		Amount of Each Disbursement this Period 11603.25 Transaction ID : SB17-EX12705 PAYMENT: SEE BELOW
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement PAYMENT: SEE BELOW	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Townsend Group</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2013
Mailing Address 1006 Pendleton St.		Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17-EX12706 [MEMO ITEM]
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Fundraising Retainer	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	11603.25
TOTAL This Period (last page this line number only).....	

13020280226

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Federal Express</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2013
Mailing Address <b>Box 1140</b>		Amount of Each Disbursement this Period 86.28 Transaction ID : <b>SB17-EX12707</b>
City <b>Memphis</b>	State <b>TN</b>	
Zip Code <b>38101</b>	Purpose of Disbursement <b>Shipping</b>	Category/ Type <b>003</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <b>Primary 2014</b>	State: District:	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. Capitol Hill Club</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2013
Mailing Address <b>300 First St.</b>		Amount of Each Disbursement this Period 44.00 Transaction ID : <b>SB17-EX12708</b>
City <b>Washington</b>	State <b>DC</b>	
Zip Code <b>20003</b>	Purpose of Disbursement <b>Parking</b>	Category/ Type <b>003</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <b>Primary 2014</b>	State: District:	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. W Millar &amp; Co Catering</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2013
Mailing Address <b>1335 14th St NW</b>		Amount of Each Disbursement this Period 398.54 Transaction ID : <b>SB17-EX12709</b>
City <b>Washington</b>	State <b>DC</b>	
Zip Code <b>20005</b>	Purpose of Disbursement <b>Catering</b>	Category/ Type <b>003</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <b>Primary 2014</b>	State: District:	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

1302028027

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Townsend Group**

Mailing Address 1006 Pendleton St.

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Parking Reimbursemenjt

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 28 / 2013

Amount of Each Disbursement this Period

15.00

Transaction ID : SB17-EX12710

[MEMO ITEM]

003

Category/  
Type

**B. The Monocle**

Full Name (Last, First, Middle Initial)

Mailing Address 107 D Street NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Food and Beverage

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 28 / 2013

Amount of Each Disbursement this Period

1770.13

Transaction ID : SB17-EX12711

[MEMO ITEM]

003

Category/  
Type

**C. Ridgewells Catering**

Full Name (Last, First, Middle Initial)

Mailing Address 5525 Dorsey Ln

City Bethesda State MD Zip Code 20816

Purpose of Disbursement  
Catering

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 28 / 2013

Amount of Each Disbursement this Period

3938.40

Transaction ID : SB17-EX12712

[MEMO ITEM]

003

Category/  
Type

SUBTOTAL of Disbursements This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

13020280228

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Sidley Austin LLP**

Mailing Address 1501 K St NW

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Room Rental

Candidate Name

003  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 28 / 2013

Amount of Each Disbursement this Period

347.50

Transaction ID : SB17-EX12713

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. XO Communications**

Mailing Address 13865 Sunrise Valley Dr

City Herndon State VA Zip Code 20171

Purpose of Disbursement  
Telephone

Candidate Name

003  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 28 / 2013

Amount of Each Disbursement this Period

3.40

Transaction ID : SB17-EX12714

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Townsend Group**

Mailing Address 1006 Pendleton St.

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
PAYMENT: SEE BELOW

Candidate Name

003  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 28 / 2013

Amount of Each Disbursement this Period

11191.42

Transaction ID : SB17-EX12828

PAYMENT: SEE BELOW

SUBTOTAL of Disbursements This Page (optional).....

11191.42

TOTAL This Period (last page this line number only).....

13020280229

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 230 OF 323

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Townsend Group**

Date of Disbursement

Mailing Address 1006 Pendleton St.

M M / D D / Y Y Y Y  
05 28 2013

City State Zip Code  
Alexandria VA 22314

Purpose of Disbursement  
Fundraising Retainer

Candidate Name

003

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014

Primary  General  
 Other (specify) Primary 2014

State: District:

Amount of Each Disbursement this Period

5000.00

Transaction ID : SB17-EX12829

[MEMO ITEM]

**B. Federal Express**

Date of Disbursement

Mailing Address Box 1140

M M / D D / Y Y Y Y  
05 28 2013

City State Zip Code  
Memphis TN 38101

Purpose of Disbursement  
Shipping

Candidate Name

003

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014

Primary  General  
 Other (specify) Primary 2014

State: District:

Amount of Each Disbursement this Period

65.16

Transaction ID : SB17-EX12830

[MEMO ITEM]

**c. Association Of American Railroads**

Date of Disbursement

Mailing Address 425 Third Street SW

M M / D D / Y Y Y Y  
05 28 2013

City State Zip Code  
Washington DC 20024

Purpose of Disbursement  
Facility Rental

Candidate Name

003

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014

Primary  General  
 Other (specify) Primary 2014

State: District:

Amount of Each Disbursement this Period

150.00

Transaction ID : SB17-EX12831

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

13020280230

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. A Thyme &amp; Place</b>		Date of Disbursement MM / DD / YYYY 05 / 28 / 2013
Mailing Address 1606 King Street		Amount of Each Disbursement this Period 2280.00 Transaction ID : SB17-EX12832 [MEMO ITEM]
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Food and Beverage	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Fresh Connections Catering</b>		Date of Disbursement MM / DD / YYYY 05 / 28 / 2013
Mailing Address 1114 Herndon Pkwy		Amount of Each Disbursement this Period 261.68 Transaction ID : SB17-EX12833 [MEMO ITEM]
City Herndon	State VA	
Zip Code 20170	Purpose of Disbursement Food and Beverage	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Johnny's Halfshell</b>		Date of Disbursement MM / DD / YYYY 05 / 28 / 2013
Mailing Address North Capitol St NW		Amount of Each Disbursement this Period 2099.83 Transaction ID : SB17-EX12834 [MEMO ITEM]
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Food and Beverage	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

13020280231

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 232 OF 323

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. W Millar &amp; Co Catering</b>		Date of Disbursement MM / DD / YYYY 05 / 28 / 2013
Mailing Address 1335 14th St NW		Amount of Each Disbursement this Period 415.80 Transaction ID : SB17-EX12835 <b>[MEMO ITEM]</b>
City Washington	State DC	
Zip Code 20005	Purpose of Disbursement Food and Beverage	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Corner Bakery</b>		Date of Disbursement MM / DD / YYYY 05 / 28 / 2013
Mailing Address 777 6th Street NW		Amount of Each Disbursement this Period 900.00 Transaction ID : SB17-EX12836 <b>[MEMO ITEM]</b>
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Food and Beverage	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Townsend Group</b>		Date of Disbursement MM / DD / YYYY 05 / 28 / 2013
Mailing Address 1006 Pendleton St.		Amount of Each Disbursement this Period 18.95 Transaction ID : SB17-EX12837 <b>[MEMO ITEM]</b>
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Parking	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280232



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Lumos Networks**

Mailing Address PO Box 11171

City Charleston State WV Zip Code 25339

Purpose of Disbursement Telephone Expense

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2013

Amount of Each Disbursement this Period

90.41

Transaction ID : SB17-EX12721

Telephone Expense

Full Name (Last, First, Middle Initial)

**B. Lumos Networks**

Mailing Address PO Box 11171

City Charleston State WV Zip Code 25339

Purpose of Disbursement Telephone Expense

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 28 / 2013

Amount of Each Disbursement this Period

88.87

Transaction ID : SB17-EX12768

Telephone Expense

Full Name (Last, First, Middle Initial)

**C. AT&T Mobility**

Mailing Address PO Box 6463

City Carol Stream State IL Zip Code 60197

Purpose of Disbursement Telephone Expense

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2013

Amount of Each Disbursement this Period

732.87

Transaction ID : SB17-EX12717

Telephone Expense

SUBTOTAL of Disbursements This Page (optional).....

912.15

TOTAL This Period (last page this line number only).....

13020280233

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T Mobility</b>		Date of Disbursement MM / DD / YYYY 05 / 28 / 2013
Mailing Address PO Box 6463		Amount of Each Disbursement this Period 525.88 Transaction ID : SB17-EX12770
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement Telephone Expense	Telephone Expense
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Goldman &amp; Associates</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2013
Mailing Address 1014 Bridge Rd.		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17-EX12509
City Charleston	State WV	
Zip Code 25314	Purpose of Disbursement Office Rent	Office Rent
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Goldman &amp; Associates</b>		Date of Disbursement MM / DD / YYYY 05 / 01 / 2013
Mailing Address 1014 Bridge Rd.		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17-EX12668
City Charleston	State WV	
Zip Code 25314	Purpose of Disbursement Office Rent	Office Rent
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1325.88
<b>TOTAL</b> This Period (last page this line number only).....	

13020280234

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 235 OF 323

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Goldman & Associates**

Mailing Address 1014 Bridge Rd.

City Charleston State WV Zip Code 25314

Purpose of Disbursement  
Office Rent

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 01 / 2013

Amount of Each Disbursement this Period

400.00

Transaction ID : SB17-EX12845

Office Rent

**B. Meticulous**

Mailing Address 1034 Bridge Rd.

City Charleston State WV Zip Code 25314

Purpose of Disbursement  
Catering

Candidate Name

007  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 07 / 2013

Amount of Each Disbursement this Period

2642.58

Transaction ID : SB17-EX12736

Catering

**C. Artistic Promotions LLC**

Mailing Address 2306 Charles Ave.

City Dunbar State WV Zip Code 25064

Purpose of Disbursement  
Bumper Stickers

Candidate Name

006  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 01 / 2013

Amount of Each Disbursement this Period

524.80

Transaction ID : SB17-EX12525

Bumper Stickers

SUBTOTAL of Disbursements This Page (optional).....

3567.38

TOTAL This Period (last page this line number only).....

13020280235

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 236 OF 323

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Artistic Promotions LLC</b>		Date of Disbursement MM / DD / YYYY <b>04 / 18 / 2013</b>
Mailing Address <b>2306 Charles Ave.</b>		Amount of Each Disbursement this Period <b>226.53</b> <b>Transaction ID : SB17-EX12661</b>
City <b>Dunbar</b>	State <b>WV</b>	
Zip Code <b>25064</b>	Purpose of Disbursement <b>Label Printing</b>	Category/ Type <b>006</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2014</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <b>Primary 2014</b>	Label Printing
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Artistic Promotions LLC</b>		Date of Disbursement MM / DD / YYYY <b>05 / 28 / 2013</b>
Mailing Address <b>2306 Charles Ave.</b>		Amount of Each Disbursement this Period <b>450.50</b> <b>Transaction ID : SB17-EX12769</b>
City <b>Dunbar</b>	State <b>WV</b>	
Zip Code <b>25064</b>	Purpose of Disbursement <b>T-Shirt Printing</b>	Category/ Type <b>001</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2014</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <b>Primary 2014</b>	T-Shirt Printing
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Artistic Promotions LLC</b>		Date of Disbursement MM / DD / YYYY <b>06 / 07 / 2013</b>
Mailing Address <b>2306 Charles Ave.</b>		Amount of Each Disbursement this Period <b>1717.36</b> <b>Transaction ID : SB17-EX12792</b>
City <b>Dunbar</b>	State <b>WV</b>	
Zip Code <b>25064</b>	Purpose of Disbursement <b>Bumper Stickers</b>	Category/ Type <b>006</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2014</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <b>Primary 2014</b>	Bumper Stickers
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2394.39</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

13020280236

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Capitol Hill Club**

Date of Disbursement

Mailing Address 300 First St.

M	M	/	D	D	/	Y	Y	Y	Y
05			01			2013			

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Food and Beverage

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Amount of Each Disbursement this Period

132.71

Transaction ID : SB17-EX12718

Food and Beverage

Full Name (Last, First, Middle Initial)

**B. Capitol Hill Club**

Date of Disbursement

Mailing Address 300 First St.

M	M	/	D	D	/	Y	Y	Y	Y
05			16			2013			

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Food and Beverage

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Amount of Each Disbursement this Period

106.89

Transaction ID : SB17-EX12749

Food and Beverage

Full Name (Last, First, Middle Initial)

**C. Brabender & Cox**

Date of Disbursement

Mailing Address 1218 Grandview Ave.

M	M	/	D	D	/	Y	Y	Y	Y
04			15			2013			

City Pittsburgh State PA Zip Code 15211

Purpose of Disbursement  
Media Consulting

Candidate Name

004  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB17-EX12657

Media Consulting

SUBTOTAL of Disbursements This Page (optional).....

2739.60

TOTAL This Period (last page this line number only).....

13020280237

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 238 OF 323

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Brabender &amp; Cox</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2013
Mailing Address 1218 Grandview Ave.		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17-EX12748
City Pittsburgh	State PA	
Purpose of Disbursement Media Consulting	Candidate Name	Category/ Type 004 Media Consulting
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. BB&amp;T</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2013
Mailing Address 300 Summers Street		Amount of Each Disbursement this Period 174.85 Transaction ID : SB17-EX12843
City Charleston	State WV	
Purpose of Disbursement Bank Service Charge	Candidate Name	Category/ Type 001 Bank Service Charge
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. BB&amp;T</b>		Date of Disbursement MM / DD / YYYY 05 / 21 / 2013
Mailing Address 300 Summers Street		Amount of Each Disbursement this Period 53.40 Transaction ID : SB17-EX12849
City Charleston	State WV	
Purpose of Disbursement Bank Service Charge	Candidate Name	Category/ Type 001 Bank Service Charge
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2728.25
<b>TOTAL</b> This Period (last page this line number only).....	

13020280238

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. BB&amp;T</b>		Date of Disbursement MM / DD / YYYY 06 / 21 / 2013
Mailing Address 300 Summers Street		Amount of Each Disbursement this Period 33.80 Transaction ID : SB17-EX12954
City Charleston	State WV	
Zip Code 25301	Purpose of Disbursement Bank Service Charge	Bank Service Charge
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Brickstreet Insurance Co</b>		Date of Disbursement MM / DD / YYYY 04 / 18 / 2013
Mailing Address PO Box 11285		Amount of Each Disbursement this Period 46.00 Transaction ID : SB17-EX12662
City Charleston	State WV	
Zip Code 25339	Purpose of Disbursement Workers Comp Insurance	Workers Comp Insurance
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Appalachian Power</b>		Date of Disbursement MM / DD / YYYY 05 / 10 / 2013
Mailing Address PO Box24413		Amount of Each Disbursement this Period 83.77 Transaction ID : SB17-EX12740
City Canton	State OH	
Zip Code 44701	Purpose of Disbursement Office Utilities	Office Utilities
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	163.57
<b>TOTAL</b> This Period (last page this line number only).....	

13020280239

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Appalachian Power**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
06			07			2013					

Mailing Address PO Box 24413

City State Zip Code  
Canton OH 44701

Purpose of Disbursement  
Office Utilities

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Amount of Each Disbursement this Period

108.90

Transaction ID : SB17-EX12795

Office Utilities

**B. Chapman Printing**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
04			01			2013					

Mailing Address PO Box 2867

City State Zip Code  
Huntington WV 25728

Purpose of Disbursement  
Envelope Printing

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Amount of Each Disbursement this Period

190.80

Transaction ID : SB17-EX12526

Envelope Printing

**C. Chapman Printing**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
04			01			2013					

Mailing Address PO Box 2867

City State Zip Code  
Huntington WV 25728

Purpose of Disbursement  
Notepad Printing

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Amount of Each Disbursement this Period

79.50

Transaction ID : SB17-EX12528

Notepad Printing

SUBTOTAL of Disbursements This Page (optional).....

379.20

TOTAL This Period (last page this line number only).....

13020280240



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. FEC Financial Inc.</b>		Date of Disbursement MM / DD / YYYY 04 / 08 / 2013
Mailing Address PO Box 651374		Amount of Each Disbursement this Period 3958.95 Transaction ID : SB17-EX12648
City Potomac Falls	State VA	
Zip Code 20165	Purpose of Disbursement PAYMENT: SEE BELOW	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	PAYMENT: SEE BELOW

Full Name (Last, First, Middle Initial) <b>B. FEC Financial Inc.</b>		Date of Disbursement MM / DD / YYYY 04 / 08 / 2013
Mailing Address PO Box 651374		Amount of Each Disbursement this Period 3800.00 Transaction ID : SB17-EX12647 [MEMO ITEM]
City Potomac Falls	State VA	
Zip Code 20165	Purpose of Disbursement Accounting Services	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	

Full Name (Last, First, Middle Initial) <b>c. FEC Financial Inc.</b>		Date of Disbursement MM / DD / YYYY 04 / 08 / 2013
Mailing Address PO Box 651374		Amount of Each Disbursement this Period 158.95 Transaction ID : SB17-EX12648 [MEMO ITEM]
City Potomac Falls	State VA	
Zip Code 20165	Purpose of Disbursement Postage Reimbursement	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3958.95
<b>TOTAL</b> This Period (last page this line number only).....	

13020280241

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. FEC Financial Inc.**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
05			07			2013			

Mailing Address PO Box 651374

City Potomac Falls State VA Zip Code 20165

Purpose of Disbursement  
PAYMENT: SEE BELOW

Candidate Name

001

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2014

Primary  General  
 Other (specify) Primary 2014

State: District:

Amount of Each Disbursement this Period

3261.96

Transaction ID : SB17-EX12733

PAYMENT: SEE BELOW

Full Name (Last, First, Middle Initial)

**B. FEC Financial Inc.**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
05			07			2013			

Mailing Address PO Box 651374

City Potomac Falls State VA Zip Code 20165

Purpose of Disbursement  
Accounting Services

Candidate Name

001

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2014

Primary  General  
 Other (specify) Primary 2014

State: District:

Amount of Each Disbursement this Period

3250.00

Transaction ID : SB17-EX12734

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. FEC Financial Inc.**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
05			07			2013			

Mailing Address PO Box 651374

City Potomac Falls State VA Zip Code 20165

Purpose of Disbursement  
Postage Reimbursement

Candidate Name

001

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2014

Primary  General  
 Other (specify) Primary 2014

State: District:

Amount of Each Disbursement this Period

11.96

Transaction ID : SB17-EX12735

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

3261.96

TOTAL This Period (last page this line number only).....

13020280242

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. FEC Financial Inc.**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
06			06			20	13		

Mailing Address PO Box 651374

City State Zip Code  
Potomac Falls VA 20165

Purpose of Disbursement  
PAYMENT: SEE BELOW

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014

Primary  General  
 Other (specify) Primary 2014

State: District:

Amount of Each Disbursement this Period

3338.10

Transaction ID : SB17-EX12788

PAYMENT: SEE BELOW

Full Name (Last, First, Middle Initial)

**B. FEC Financial Inc.**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
06			06			20	13		

Mailing Address PO Box 651374

City State Zip Code  
Potomac Falls VA 20165

Purpose of Disbursement  
Accounting Services

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014

Primary  General  
 Other (specify) Primary 2014

State: District:

Amount of Each Disbursement this Period

3250.00

Transaction ID : SB17-EX12789

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. FEC Financial Inc.**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
06			06			20	13		

Mailing Address PO Box 651374

City State Zip Code  
Potomac Falls VA 20165

Purpose of Disbursement  
Postage

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014

Primary  General  
 Other (specify) Primary 2014

State: District:

Amount of Each Disbursement this Period

42.50

Transaction ID : SB17-EX12790

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

3338.10

TOTAL This Period (last page this line number only).....

13020280243

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
---	------------------------------------	-------------------------------------	------------------------------------

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Mountaineer Newspapers**

Mailing Address P.O. Box 550

City Buckhannon State WV Zip Code 26201

Purpose of Disbursement  
Newspaper Advertising

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 19 / 2013

Amount of Each Disbursement this Period

399.00

Transaction ID : SB17-EX12802

Newspaper Advertising

004  
Category/  
Type

**B. WV Bureau of Employment Programs**

Mailing Address P.O. Box 106

City Charleston State WV Zip Code 25321

Purpose of Disbursement  
Unemployment Insurance

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
05 / 31 / 2013

Amount of Each Disbursement this Period

789.15

Transaction ID : SB17-EX12787

Unemployment Insurance

001  
Category/  
Type

**C. Mountaineer Gas Co.**

Mailing Address PO Box 362

City Charleston State WV Zip Code 25322

Purpose of Disbursement  
Office Utilities

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
04 / 18 / 2013

Amount of Each Disbursement this Period

77.35

Transaction ID : SB17-EX12664

Office Utilities

001  
Category/  
Type

SUBTOTAL of Disbursements This Page (optional).....

1265.50

TOTAL This Period (last page this line number only).....

13020280244

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Mountaineer Gas Co.</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2013
Mailing Address PO Box 362		Amount of Each Disbursement this Period 60.70 Transaction ID : SB17-EX12745
City Charleston	State WV	
Zip Code 25322	Purpose of Disbursement Office Utilities	Office Utilities
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mountaineer Gas Co.</b>		Date of Disbursement MM / DD / YYYY 06 / 19 / 2013
Mailing Address PO Box 362		Amount of Each Disbursement this Period 27.35 Transaction ID : SB17-EX12801
City Charleston	State WV	
Zip Code 25322	Purpose of Disbursement Office Utilities	Office Utilities
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Suddenlink</b>		Date of Disbursement MM / DD / YYYY 05 / 01 / 2013
Mailing Address PO Box 660365		Amount of Each Disbursement this Period 167.65 Transaction ID : SB17-EX12722
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Internet Service	Internet Service
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	255.70
<b>TOTAL</b> This Period (last page this line number only).....	

13020280245

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Suddenlink**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	1	3

Mailing Address PO Box 660365

Amount of Each Disbursement this Period

1	6	7	.	6	5
---	---	---	---	---	---

City State Zip Code  
Dallas TX 75266

Purpose of Disbursement  
Internet Service

001  
Category/  
Type

Transaction ID : SB17-EX12766

Candidate Name

Internet Service

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Full Name (Last, First, Middle Initial)

**B. Vanco Services**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	1		2	0	1	3

Mailing Address 12600 Whitewater Dr Ste 200

Amount of Each Disbursement this Period

1	2	4	.	6	5
---	---	---	---	---	---

City State Zip Code  
Minnetonka MN 55343

Purpose of Disbursement  
Credit Card Service Fee

001  
Category/  
Type

Transaction ID : SB17-EX12676

Candidate Name

Credit Card Service Fee

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Full Name (Last, First, Middle Initial)

**c. Vanco Services**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	5		2	0	1	3

Mailing Address 12600 Whitewater Dr Ste 200

Amount of Each Disbursement this Period

2	7	.	9	5
---	---	---	---	---

City State Zip Code  
Minnetonka MN 55343

Purpose of Disbursement  
Credit Card Service Fee

001  
Category/  
Type

Transaction ID : SB17-EX12677

Candidate Name

Credit Card Service Fee

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

SUBTOTAL of Disbursements This Page (optional).....

320.25

TOTAL This Period (last page this line number only).....

13020280246

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 247 OF 323

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Vanco Services**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
04			08			2013			

Mailing Address 12600 Whitewater Dr Ste 200

Amount of Each Disbursement this Period

9.20

City State Zip Code  
Minnetonka MN 55343

Purpose of Disbursement  
Credit Card Service Fee

001  
Category/  
Type

Transaction ID : SB17-EX12678

Candidate Name

Credit Card Service Fee

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Full Name (Last, First, Middle Initial)

**B. Vanco Services**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
04			09			2013			

Mailing Address 12600 Whitewater Dr Ste 200

Amount of Each Disbursement this Period

27.95

City State Zip Code  
Minnetonka MN 55343

Purpose of Disbursement  
Credit Card Service Fee

001  
Category/  
Type

Transaction ID : SB17-EX12693

Candidate Name

Credit Card Service Fee

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Full Name (Last, First, Middle Initial)

**C. Vanco Services**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
04			15			2013			

Mailing Address 12600 Whitewater Dr Ste 200

Amount of Each Disbursement this Period

36.80

City State Zip Code  
Minnetonka MN 55343

Purpose of Disbursement  
Credit Card Service Fee

001  
Category/  
Type

Transaction ID : SB17-EX12679

Candidate Name

Credit Card Service Fee

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

SUBTOTAL of Disbursements This Page (optional).....

73.95

TOTAL This Period (last page this line number only).....

13020280247

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Vanco Services**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	1	3

Mailing Address 12600 Whitewater Dr Ste 200

Amount of Each Disbursement this Period

1	8	0	5	3
---	---	---	---	---

City State Zip Code  
Mnnetonka MN 55343

Purpose of Disbursement  
Credit Card Service Fee

001

Transaction ID : SB17-EX12694

Candidate Name

Category/  
Type

Credit Card Service Fee

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Full Name (Last, First, Middle Initial)

**B. Vanco Services**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	1	3

Mailing Address 12600 Whitewater Dr Ste 200

Amount of Each Disbursement this Period

4	4	0	6	5
---	---	---	---	---

City State Zip Code  
Mnnetonka MN 55343

Purpose of Disbursement  
Credit Card Service Fee

001

Transaction ID : SB17-EX12695

Candidate Name

Category/  
Type

Credit Card Service Fee

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Full Name (Last, First, Middle Initial)

**C. Vanco Services**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	6		2	0	1	3

Mailing Address 12600 Whitewater Dr Ste 200

Amount of Each Disbursement this Period

7	0	.	1	0
---	---	---	---	---

City State Zip Code  
Mnnetonka MN 55343

Purpose of Disbursement  
Credit Card Service Fee

001

Transaction ID : SB17-EX12696

Candidate Name

Category/  
Type

Credit Card Service Fee

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....

691.28

**TOTAL** This Period (last page this line number only).....

13020280248



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Vanco Services**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	3

Mailing Address 12600 Whitewater Dr Ste 200

Amount of Each Disbursement this Period

230.65

City State Zip Code  
Minnetonka MN 55343

Purpose of Disbursement  
Credit Card Service Fee

001  
Category/  
Type

Transaction ID : SB17-EX12777

Candidate Name

Credit Card Service Fee

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Full Name (Last, First, Middle Initial)

**B. Vanco Services**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	3		2	0	1	3

Mailing Address 12600 Whitewater Dr Ste 200

Amount of Each Disbursement this Period

89.02

City State Zip Code  
Minnetonka MN 55343

Purpose of Disbursement  
Credit Card Service Fee

001  
Category/  
Type

Transaction ID : SB17-EX12778

Candidate Name

Credit Card Service Fee

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Full Name (Last, First, Middle Initial)

**C. Vanco Services**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	1	3

Mailing Address 12600 Whitewater Dr Ste 200

Amount of Each Disbursement this Period

35.45

City State Zip Code  
Minnetonka MN 55343

Purpose of Disbursement  
Credit Card Service Fee

001  
Category/  
Type

Transaction ID : SB17-EX12779

Candidate Name

Credit Card Service Fee

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....

355.12

**TOTAL** This Period (last page this line number only).....

13020280249

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Vanco Services**

Date of Disbursement

M M / D D / Y Y Y Y  
05 / 14 / 2013

Mailing Address 12600 Whitewater Dr Ste 200

City State Zip Code  
Minnetonka MN 55343

Purpose of Disbursement  
Credit Card Service Fee

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Amount of Each Disbursement this Period

100.26

Transaction ID : SB17-EX12780

Credit Card Service Fee

Full Name (Last, First, Middle Initial)

**B. Vanco Services**

Date of Disbursement

M M / D D / Y Y Y Y  
05 / 15 / 2013

Mailing Address 12600 Whitewater Dr Ste 200

City State Zip Code  
Minnetonka MN 55343

Purpose of Disbursement  
Credit Card Service Fee

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Amount of Each Disbursement this Period

38.55

Transaction ID : SB17-EX12781

Credit Card Service Fee

Full Name (Last, First, Middle Initial)

**C. Vanco Services**

Date of Disbursement

M M / D D / Y Y Y Y  
05 / 16 / 2013

Mailing Address 12600 Whitewater Dr Ste 200

City State Zip Code  
Minnetonka MN 55343

Purpose of Disbursement  
Credit Card Service Fee

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Amount of Each Disbursement this Period

1.83

Transaction ID : SB17-EX12782

Credit Card Service Fee

SUBTOTAL of Disbursements This Page (optional) .....

140.64

TOTAL This Period (last page this line number only) .....

13020280250

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 251 OF 323

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Vanco Services</b>		Date of Disbursement MM / DD / YYYY 05 / 30 / 2013
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period 9.84 Transaction ID : SB17-EX12783
City Minnetonka	State MN	
Purpose of Disbursement Credit Card Service Fee		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Service Fee
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Vanco Services</b>		Date of Disbursement MM / DD / YYYY 06 / 06 / 2013
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period 5.03 Transaction ID : SB17-EX12850
City Minnetonka	State MN	
Purpose of Disbursement Credit Card Service Fee		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Service Fee
State:	District:	

Full Name (Last, First, Middle Initial) <b>c. Vanco Services</b>		Date of Disbursement MM / DD / YYYY 06 / 11 / 2013
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period 7.78 Transaction ID : SB17-EX12851
City Minnetonka	State MN	
Purpose of Disbursement Credit Card Service Fee		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Service Fee
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	22.65
<b>TOTAL</b> This Period (last page this line number only).....	

13020280251

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

(check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**A. Vanco Services**

Mailing Address 12600 Whitewater Dr Ste 200

City Minnetonka State MN Zip Code 55343

Purpose of Disbursement  
 Credit Card Service Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement  
 06 / 17 / 2013

Amount of Each Disbursement this Period  
 12.95

Transaction ID : SB17-EX12846

Category/Type  
 001

Credit Card Service Fee

Full Name (Last, First, Middle Initial)  
**B. Vanco Services**

Mailing Address 12600 Whitewater Dr Ste 200

City Minnetonka State MN Zip Code 55343

Purpose of Disbursement  
 Credit Card Service Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement  
 06 / 20 / 2013

Amount of Each Disbursement this Period  
 14.20

Transaction ID : SB17-EX12883

Category/Type  
 001

Credit Card Service Fee

Full Name (Last, First, Middle Initial)  
**c. Vanco Services**

Mailing Address 12600 Whitewater Dr Ste 200

City Minnetonka State MN Zip Code 55343

Purpose of Disbursement  
 Credit Card Service Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement  
 06 / 21 / 2013

Amount of Each Disbursement this Period  
 130.17

Transaction ID : SB17-EX12884

Category/Type  
 001

Credit Card Service Fee

**SUBTOTAL** of Disbursements This Page (optional)..... 157.32

**TOTAL** This Period (last page this line number only).....

13020280252

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Vanco Services**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
06			25			2013			

Mailing Address 12600 Whitewater Dr Ste 200

Amount of Each Disbursement this Period

City State Zip Code  
Minnetonka MN 55343

162.35

Purpose of Disbursement  
Credit Card Service Fee

001  
Category/  
Type

Transaction ID : SB17-EX12885

Candidate Name

Credit Card Service Fee

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Full Name (Last, First, Middle Initial)

**B. Vanco Services**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
06			29			2013			

Mailing Address 12600 Whitewater Dr Ste 200

Amount of Each Disbursement this Period

City State Zip Code  
Minnetonka MN 55343

27.95

Purpose of Disbursement  
Credit Card Service Fee

001  
Category/  
Type

Transaction ID : SB17-EX12887

Candidate Name

Credit Card Service Fee

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Full Name (Last, First, Middle Initial)

**C. Vanco Services**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2013			

Mailing Address 12600 Whitewater Dr Ste 200

Amount of Each Disbursement this Period

City State Zip Code  
Minnetonka MN 55343

188.66

Purpose of Disbursement  
Credit Card Service Fee

001  
Category/  
Type

Transaction ID : SB17-EX12886

Candidate Name

Credit Card Service Fee

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

SUBTOTAL of Disbursements This Page (optional).....

378.96

TOTAL This Period (last page this line number only).....

13020280253

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 254 OF 323			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Vanco Services</b>		Date of Disbursement MM / DD / YYYY 06 / 30 / 2013
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period 95.91 Transaction ID : SB17-EX12888
City Minnetonka	State MN	
Zip Code 55343	Purpose of Disbursement Credit Card Service Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	Credit Card Service Fee

Full Name (Last, First, Middle Initial) <b>B. Les Bagyi</b>		Date of Disbursement MM / DD / YYYY 05 / 09 / 2013
Mailing Address 716 Christian Dr		Amount of Each Disbursement this Period 954.00 Transaction ID : SB17-EX12738
City Charleston	State WV	
Zip Code 25303	Purpose of Disbursement Beverage Service	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	Beverage Service

Full Name (Last, First, Middle Initial) <b>c. Office &amp; Commercial Cleaning</b>		Date of Disbursement MM / DD / YYYY 04 / 09 / 2013
Mailing Address PO Box 18445		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17-EX12653
City South Charleston	State WV	
Zip Code 25303	Purpose of Disbursement Office Cleaning	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	Office Cleaning

SUBTOTAL of Disbursements This Page (optional).....	1249.91
TOTAL This Period (last page this line number only).....	

13020280254

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Office &amp; Commercial Cleaning</b>		Date of Disbursement 05 / 10 / 2013
Mailing Address PO Box 18445		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17-EX12741
City South Charleston	State WV	
Zip Code 25303	Purpose of Disbursement Office Cleaning	Office Cleaning
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Office &amp; Commercial Cleaning</b>		Date of Disbursement 06 / 07 / 2013
Mailing Address PO Box 18445		Amount of Each Disbursement this Period 200.00 Transaction ID : SB17-EX12791
City South Charleston	State WV	
Zip Code 25303	Purpose of Disbursement Office Cleaning	Office Cleaning
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Sodexo</b>		Date of Disbursement 04 / 11 / 2013
Mailing Address 125 Broad St 26th Floor		Amount of Each Disbursement this Period 228.64 Transaction ID : SB17-EX12656
City New York	State NY	
Zip Code 10004	Purpose of Disbursement Food and Beverage	Food and Beverage
Candidate Name	007 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	628.64
<b>TOTAL</b> This Period (last page this line number only).....	

13020280255

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 256 OF 323			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Targeted Victory**

Mailing Address **PO Box 2187**

City **Arlington** State **VA** Zip Code **22202**

Purpose of Disbursement  
**Online Advertising**

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) **Primary 2014**

Date of Disbursement  
M M / D D / Y Y Y Y  
**05 / 02 / 2013**

Amount of Each Disbursement this Period  
**500.00**

Transaction ID : **SB17-EX12731**

Online Advertising

**B. Targeted Victory**

Mailing Address **PO Box 2187**

City **Arlington** State **VA** Zip Code **22202**

Purpose of Disbursement  
**Email Marketing**

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) **Primary 2014**

Date of Disbursement  
M M / D D / Y Y Y Y  
**05 / 09 / 2013**

Amount of Each Disbursement this Period  
**5000.00**

Transaction ID : **SB17-EX12739**

Email Marketing

**c. Targeted Victory**

Mailing Address **PO Box 2187**

City **Arlington** State **VA** Zip Code **22202**

Purpose of Disbursement  
**Email Marketing**

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) **Primary 2014**

Date of Disbursement  
M M / D D / Y Y Y Y  
**05 / 17 / 2013**

Amount of Each Disbursement this Period  
**3250.00**

Transaction ID : **SB17-EX12757**

Email Marketing

**SUBTOTAL** of Disbursements This Page (optional)..... **8750.00**

**TOTAL** This Period (last page this line number only).....

13020280256



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 257 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Piryx</b>		Date of Disbursement MM / DD / YYYY 04 / 11 / 2013	
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 80.25	
City San Francisco	State CA	Zip Code 94105	Transaction ID : <b>SB17-EX12670</b>
Purpose of Disbursement Credit Card Service Fee		Category/ Type 001	
Candidate Name		Credit Card Service Fee	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement MM / DD / YYYY 04 / 12 / 2013	
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 8.50	
City San Francisco	State CA	Zip Code 94105	Transaction ID : <b>SB17-EX12671</b>
Purpose of Disbursement Credit Card Service Fee		Category/ Type 001	
Candidate Name		Credit Card Service Fee	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State:	District:		

Full Name (Last, First, Middle Initial) <b>c. Piryx</b>		Date of Disbursement MM / DD / YYYY 04 / 16 / 2013	
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 2.13	
City San Francisco	State CA	Zip Code 94105	Transaction ID : <b>SB17-EX12672</b>
Purpose of Disbursement Credit Card Service Fee		Category/ Type 001	
Candidate Name		Credit Card Service Fee	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	99.88
<b>TOTAL</b> This Period (last page this line number only).....	

13020280257

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Piryx**

Mailing Address 144 2nd St. 1st Floor

Date of Disbursement

MM / DD / YYYY  
04 / 17 / 2013

City State Zip Code  
San Francisco CA 94105

Amount of Each Disbursement this Period

884.00

Purpose of Disbursement  
Credit Card Service Fee

001  
Category/  
Type

Transaction ID : SB17-EX12673

Candidate Name

Credit Card Service Fee

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

**B. Piryx**

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY  
04 / 18 / 2013

Mailing Address 144 2nd St. 1st Floor

Amount of Each Disbursement this Period

654.50

City State Zip Code  
San Francisco CA 94105

Purpose of Disbursement  
Credit Card Service Fee

001  
Category/  
Type

Transaction ID : SB17-EX12674

Candidate Name

Credit Card Service Fee

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

**C. Piryx**

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY  
04 / 19 / 2013

Mailing Address 144 2nd St. 1st Floor

Amount of Each Disbursement this Period

25.08

City State Zip Code  
San Francisco CA 94105

Purpose of Disbursement  
Credit Card Service Fee

001  
Category/  
Type

Transaction ID : SB17-EX12675

Candidate Name

Credit Card Service Fee

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

SUBTOTAL of Disbursements This Page (optional).....

1563.58

TOTAL This Period (last page this line number only).....

13020280258

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 259 OF 323
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 4.26 <b>Transaction ID : SB17-EX12690</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	Credit Card Service Fee

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 24 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 4.25 <b>Transaction ID : SB17-EX12691</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	Credit Card Service Fee

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 29.75 <b>Transaction ID : SB17-EX12692</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	Credit Card Service Fee

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	38.26
<b>TOTAL</b> This Period (last page this line number only).....	

13020280259

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 260 OF 323

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Piryx**

Date of Disbursement

M M / D D / Y Y Y Y  
04 / 29 / 2013

Mailing Address 144 2nd St. 1st Floor

City State Zip Code  
San Francisco CA 94105

Amount of Each Disbursement this Period

25.52

Purpose of Disbursement  
Credit Card Service Fee

001

Transaction ID : SB17-EX12750

Candidate Name

Category/  
Type

Credit Card Service Fee

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Full Name (Last, First, Middle Initial)

**B. Piryx**

Date of Disbursement

M M / D D / Y Y Y Y  
04 / 30 / 2013

Mailing Address 144 2nd St. 1st Floor

City State Zip Code  
San Francisco CA 94105

Amount of Each Disbursement this Period

94.35

Purpose of Disbursement  
Credit Card Service Fee

001

Transaction ID : SB17-EX12751

Candidate Name

Category/  
Type

Credit Card Service Fee

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Full Name (Last, First, Middle Initial)

**C. Piryx**

Date of Disbursement

M M / D D / Y Y Y Y  
05 / 02 / 2013

Mailing Address 144 2nd St. 1st Floor

City State Zip Code  
San Francisco CA 94105

Amount of Each Disbursement this Period

42.50

Purpose of Disbursement  
Credit Card Service Fee

001

Transaction ID : SB17-EX12752

Candidate Name

Category/  
Type

Credit Card Service Fee

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

SUBTOTAL of Disbursements This Page (optional).....

162.37

TOTAL This Period (last page this line number only).....

13020280260

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Piryx</b>		Date of Disbursement MM / DD / YYYY 05 / 07 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 357.00
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Transaction ID : <b>SB17-EX12753</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement MM / DD / YYYY 05 / 08 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 4.25
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Transaction ID : <b>SB17-EX12754</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Piryx</b>		Date of Disbursement MM / DD / YYYY 05 / 13 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 87.13
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Transaction ID : <b>SB17-EX12755</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Service Fee
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	448.38
<b>TOTAL</b> This Period (last page this line number only).....	

13020280261

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Piryx</b>		Date of Disbursement MM / DD / YYYY 05 / 16 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 21.25 <b>Transaction ID : SB17-EX12761</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Credit Card Service Fee
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement MM / DD / YYYY 05 / 17 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 42.50 <b>Transaction ID : SB17-EX12762</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Credit Card Service Fee
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement MM / DD / YYYY 05 / 21 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 119.00 <b>Transaction ID : SB17-EX12763</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Credit Card Service Fee
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	182.75
<b>TOTAL</b> This Period (last page this line number only).....	

13020280262

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Piryx</b>		Date of Disbursement MM / DD / YYYY 05 / 22 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 8.50 Transaction ID : SB17-EX12771
City San Francisco	State CA	
Purpose of Disbursement Credit Card Service Fee	Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement MM / DD / YYYY 05 / 24 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 10.63 Transaction ID : SB17-EX12772
City San Francisco	State CA	
Purpose of Disbursement Credit Card Service Fee	Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement MM / DD / YYYY 05 / 28 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 178.50 Transaction ID : SB17-EX12773
City San Francisco	State CA	
Purpose of Disbursement Credit Card Service Fee	Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	197.63
<b>TOTAL</b> This Period (last page this line number only).....	

13020280263

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 264 OF 323

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Piryx</b>		Date of Disbursement MM / DD / YYYY 05 / 29 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 38.25
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Transaction ID : SB17-EX12774
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement MM / DD / YYYY 05 / 30 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 0.56
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Transaction ID : SB17-EX12775
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement MM / DD / YYYY 06 / 03 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 107.92
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Transaction ID : SB17-EX12776
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Service Fee
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	146.73
<b>TOTAL</b> This Period (last page this line number only).....	

13020280264



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Piryx</b>		Date of Disbursement MM / DD / YYYY 06 / 06 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 12.75 Transaction ID : SB17-EX12852
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	Credit Card Service Fee

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement MM / DD / YYYY 06 / 07 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 42.50 Transaction ID : SB17-EX12853
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	Credit Card Service Fee

Full Name (Last, First, Middle Initial) <b>c. Piryx</b>		Date of Disbursement MM / DD / YYYY 06 / 12 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 102.00 Transaction ID : SB17-EX12854
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	Credit Card Service Fee

SUBTOTAL of Disbursements This Page (optional).....	157.25
TOTAL This Period (last page this line number only).....	

13020280265

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Piryx**

Date of Disbursement

Mailing Address 144 2nd St. 1st Floor

MM / DD / YYYY  
06 / 13 / 2013

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Service Fee

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Amount of Each Disbursement this Period

8.50

Transaction ID : SB17-EX12855

Credit Card Service Fee

Full Name (Last, First, Middle Initial)

**B. Piryx**

Date of Disbursement

Mailing Address 144 2nd St. 1st Floor

MM / DD / YYYY  
06 / 18 / 2013

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Service Fee

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Amount of Each Disbursement this Period

127.50

Transaction ID : SB17-EX12856

Credit Card Service Fee

Full Name (Last, First, Middle Initial)

**C. Piryx**

Date of Disbursement

Mailing Address 144 2nd St. 1st Floor

MM / DD / YYYY  
06 / 19 / 2013

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Service Fee

Candidate Name

001  
Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Amount of Each Disbursement this Period

29.75

Transaction ID : SB17-EX12857

Credit Card Service Fee

SUBTOTAL of Disbursements This Page (optional).....

165.75

TOTAL This Period (last page this line number only).....

13020280266

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 267 OF 323	
	<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Piryx</b>		Date of Disbursement MM / DD / YYYY 06 / 24 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 17.00 <b>Transaction ID : SB17-EX12876</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Credit Card Service Fee
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement MM / DD / YYYY 06 / 25 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 21.26 <b>Transaction ID : SB17-EX12877</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Credit Card Service Fee
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement MM / DD / YYYY 06 / 26 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 214.63 <b>Transaction ID : SB17-EX12878</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Credit Card Service Fee
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	252.89
<b>TOTAL</b> This Period (last page this line number only).....	

13020280267

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 268 OF 323

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Piryx**

Date of Disbursement

M M / D D / Y Y Y Y  
06 27 2013

Mailing Address 144 2nd St. 1st Floor

Amount of Each Disbursement this Period

City State Zip Code  
San Francisco CA 94105

42.50

Purpose of Disbursement  
Credit Card Service Fee

001

Transaction ID : SB17-EX12879

Candidate Name

Category/  
Type

Credit Card Service Fee

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014

Primary  General  
 Other (specify) Primary 2014

State: District:

Full Name (Last, First, Middle Initial)

**B. Piryx**

Date of Disbursement

M M / D D / Y Y Y Y  
06 28 2013

Mailing Address 144 2nd St. 1st Floor

Amount of Each Disbursement this Period

City State Zip Code  
San Francisco CA 94105

238.89

Purpose of Disbursement  
Credit Card Service Fee

001

Transaction ID : SB17-EX12880

Candidate Name

Category/  
Type

Credit Card Service Fee

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014

Primary  General  
 Other (specify) Primary 2014

State: District:

Full Name (Last, First, Middle Initial)

**c. Piryx**

Date of Disbursement

M M / D D / Y Y Y Y  
06 29 2013

Mailing Address 144 2nd St. 1st Floor

Amount of Each Disbursement this Period

City State Zip Code  
San Francisco CA 94105

3.39

Purpose of Disbursement  
Credit Card Service Fee

001

Transaction ID : SB17-EX12881

Candidate Name

Category/  
Type

Credit Card Service Fee

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014

Primary  General  
 Other (specify) Primary 2014

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....

287.78

**TOTAL** This Period (last page this line number only).....

13020280268

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 269 OF 323

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Piryx**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
06			30			2013			

Mailing Address 144 2nd St. 1st Floor

Amount of Each Disbursement this Period

247.78

City State Zip Code  
San Francisco CA 94105

Purpose of Disbursement  
Credit Card Service Fee

001  
Category/  
Type

Transaction ID : SB17-EX12882

Candidate Name

Credit Card Service Fee

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Full Name (Last, First, Middle Initial)

**B. Mail Haus Inc.**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
05			14			2013			

Mailing Address 1745 Suburban Dr

Amount of Each Disbursement this Period

1704.61

City State Zip Code  
De Pere WI 54115

Purpose of Disbursement  
Postage

003  
Category/  
Type

Transaction ID : SB17-EX12744

Candidate Name

Postage

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Full Name (Last, First, Middle Initial)

**C. Pinnacle List Co**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
04			09			2013			

Mailing Address 2800 Shirlington Rd

Amount of Each Disbursement this Period

3898.29

City State Zip Code  
Arlington VA 22206

Purpose of Disbursement  
Mail List Rental

003  
Category/  
Type

Transaction ID : SB17-EX12654

Candidate Name

Mail List Rental

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

SUBTOTAL of Disbursements This Page (optional).....

5850.68

TOTAL This Period (last page this line number only).....

13020280269

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 270 OF 323  
(check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A. Dunbar Printing**

Full Name (Last, First, Middle Initial)

Mailing Address 1310 Ohio Ave

City Dunbar State WV Zip Code 25064

Purpose of Disbursement Letterhead Printing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement: MM/DD/YYYY  
05/28/2013

Amount of Each Disbursement this Period: 456.44

Transaction ID: SB17-EX12767

Category/Type: 001 Letterhead Printing

**B. The Lukens Co**

Full Name (Last, First, Middle Initial)

Mailing Address 2800 Shirlington Rd 9th Floor

City Arlington State VA Zip Code 22206

Purpose of Disbursement Direct Mail

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement: MM/DD/YYYY  
04/01/2013

Amount of Each Disbursement this Period: 17556.64

Transaction ID: SB17-EX12527

Category/Type: 003 Direct Mail

**c. The Lukens Co**

Full Name (Last, First, Middle Initial)

Mailing Address 2800 Shirlington Rd 9th Floor

City Arlington State VA Zip Code 22206

Purpose of Disbursement Direct Mail

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement: MM/DD/YYYY  
06/07/2013

Amount of Each Disbursement this Period: 6923.60

Transaction ID: SB17-EX12796

Category/Type: 001 Direct Mail

**SUBTOTAL** of Disbursements This Page (optional) ..... 24936.68

**TOTAL** This Period (last page this line number only) .....

13020280270

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. MDI Imaging</b>		Date of Disbursement MM / DD / YYYY 06 / 14 / 2013
Mailing Address 21955 Cascades Pkwy		Amount of Each Disbursement this Period 1653.03 Transaction ID : SB17-EX12799
City Dulles	State VA	
Zip Code 20166	Purpose of Disbursement Postage	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	Postage

Full Name (Last, First, Middle Initial) <b>B. Contact Pointe</b>		Date of Disbursement MM / DD / YYYY 04 / 18 / 2013
Mailing Address 110 Polaris Pkwy Ste 225		Amount of Each Disbursement this Period 290.70 Transaction ID : SB17-EX12663
City Westerville	State OH	
Zip Code 43082	Purpose of Disbursement IT Services	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	IT Services

Full Name (Last, First, Middle Initial) <b>C. BB&amp;T Financial</b>		Date of Disbursement MM / DD / YYYY 04 / 22 / 2013
Mailing Address PO Box 580340		Amount of Each Disbursement this Period 7426.80 Transaction ID : SB17-EX12875
City Charlotte	State NC	
Zip Code 28258	Purpose of Disbursement CREDIT CARD PAYMENT: SEE BELOW	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	CREDIT CARD PAYMENT: SEE BELOW

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9370.53
<b>TOTAL</b> This Period (last page this line number only).....	

13020280271

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 272 OF 323			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Uber</b>		Date of Disbursement MM / DD / YYYY 04 / 22 / 2013
Mailing Address 800 Market St		Amount of Each Disbursement this Period 120.00 Transaction ID : SB17-EX12860
City San Francisco	State CA	
Zip Code 94102	Purpose of Disbursement Travel Expenses	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	[MEMO ITEM] Taxi

Full Name (Last, First, Middle Initial) <b>B. Yeager Airport</b>		Date of Disbursement MM / DD / YYYY 04 / 22 / 2013
Mailing Address 100 Airport Rd		Amount of Each Disbursement this Period 14.00 Transaction ID : SB17-EX12861
City Charleston	State WV	
Zip Code 25311	Purpose of Disbursement Travel Expenses	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	[MEMO ITEM] Parking

Full Name (Last, First, Middle Initial) <b>c. The Ritz Carlton Amelia Island</b>		Date of Disbursement MM / DD / YYYY 04 / 22 / 2013
Mailing Address 4750 Amelia Island Parkway		Amount of Each Disbursement this Period 579.13 Transaction ID : SB17-EX12862
City Amelia Island	State FL	
Zip Code 32034	Purpose of Disbursement Travel Expenses	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	[MEMO ITEM] Lodging

SUBTOTAL of Disbursements This Page (optional) .....	0.00
TOTAL This Period (last page this line number only) .....	

13020280272



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page.

FOR LINE NUMBER: (check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
Capito For West Virginia

Full Name (Last, First, Middle Initial) <b>A. Exxon Mobil</b>		Date of Disbursement 04 / 22 / 2013
Mailing Address 5959 Las Colinas Boulevard		Amount of Each Disbursement this Period 148.92 Transaction ID : SB17-EX12863
City Irving	State TX Zip Code 75039	
Purpose of Disbursement Travel Expenses	Candidate Name	Category/Type 002
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	[MEMO ITEM] Fuel	

Full Name (Last, First, Middle Initial) <b>B. The Greenbrier</b>		Date of Disbursement 04 / 22 / 2013
Mailing Address 300 West Main Street		Amount of Each Disbursement this Period 164.89 Transaction ID : SB17-EX12864
City White Sulphursprings	State WV Zip Code 24986	
Purpose of Disbursement Administrative/Salary/Overhead Expenses	Candidate Name	Category/Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	[MEMO ITEM] Food and Beverage	

Full Name (Last, First, Middle Initial) <b>c. Federal Express</b>		Date of Disbursement 04 / 22 / 2013
Mailing Address Box 1140		Amount of Each Disbursement this Period 250.16 Transaction ID : SB17-EX12865
City Memphis	State TN Zip Code 38101	
Purpose of Disbursement Administrative/Salary/Overhead Expenses	Candidate Name	Category/Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	[MEMO ITEM] Delivery Expense	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

13020280273

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Vineyard Vines</b>		Date of Disbursement MM / DD / YYYY 04 / 22 / 2013
Mailing Address 37 Brown House Rd		Amount of Each Disbursement this Period 5055.00 Transaction ID : SB17-EX12866
City Stamford	State CT	
Zip Code 06902	Purpose of Disbursement Campaign Materials	Category/ Type 006
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	[MEMO ITEM] Bumper Stickers and Lapel Pins

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T</b>		Date of Disbursement MM / DD / YYYY 04 / 22 / 2013
Mailing Address P.O. Box 8212		Amount of Each Disbursement this Period 50.00 Transaction ID : SB17-EX12867
City Aurora	State IL	
Zip Code 60572	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	[MEMO ITEM] Data Plan

Full Name (Last, First, Middle Initial) <b>c. Marriott</b>		Date of Disbursement MM / DD / YYYY 04 / 22 / 2013
Mailing Address 200 Lee St.		Amount of Each Disbursement this Period 342.10 Transaction ID : SB17-EX12868
City Charleston	State WV	
Zip Code 25301	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	[MEMO ITEM] Food and Beverage

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

13020280274

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. South Hills Market**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	1	3

Mailing Address 1010 Bridge Rd.

Amount of Each Disbursement this Period

59.00

City Charleston State WV Zip Code 25314

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

001

Transaction ID : SB17-EX12869

Candidate Name

Category/  
Type

[MEMO ITEM]  
Food and Beverage

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Full Name (Last, First, Middle Initial)

**B. USPS**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	1	3

Mailing Address 1002 Lee St.

Amount of Each Disbursement this Period

362.57

City Charleston State WV Zip Code 25301

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

001

Transaction ID : SB17-EX12870

Candidate Name

Category/  
Type

[MEMO ITEM]  
Postage

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Full Name (Last, First, Middle Initial)

**C. Merchant River House**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	1	3

Mailing Address 375 South End Ave

Amount of Each Disbursement this Period

51.46

City New York State NY Zip Code 10280

Purpose of Disbursement  
Travel Expenses

002

Transaction ID : SB17-EX12871

Candidate Name

Category/  
Type

[MEMO ITEM]  
Food and Beverage

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

SUBTOTAL of Disbursements This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

13020280275

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Rio Grande Grille**

Date of Disbursement

M M / D D / Y Y Y Y
04 / 22 / 2013

Mailing Address 3913 Oneida St

Amount of Each Disbursement this Period

City State Zip Code  
New Hartford NY 13413

14.38

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

001  
Category/  
Type

Transaction ID : SB17-EX12872

Candidate Name

[MEMO ITEM]  
Food and Beverage

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Full Name (Last, First, Middle Initial)

**B. Hotel Parq Central**

Date of Disbursement

M M / D D / Y Y Y Y
04 / 22 / 2013

Mailing Address 806 Central Ave SE

Amount of Each Disbursement this Period

City State Zip Code  
Albuquerque NM 87102

185.32

Purpose of Disbursement  
Travel Expenses

002  
Category/  
Type

Transaction ID : SB17-EX12873

Candidate Name

[MEMO ITEM]  
Lodging

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Full Name (Last, First, Middle Initial)

**c. Gory Days**

Date of Disbursement

M M / D D / Y Y Y Y
04 / 22 / 2013

Mailing Address 3059 Nutley St

Amount of Each Disbursement this Period

City State Zip Code  
Alexandria VA 22301

29.87

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

001  
Category/  
Type

Transaction ID : SB17-EX12874

Candidate Name

[MEMO ITEM]  
Food and Beverage

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

SUBTOTAL of Disbursements This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

13020280276

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. BB&amp;T Financial</b>		Date of Disbursement MM / DD / YYYY 05 / 03 / 2013
Mailing Address PO Box 580340		Amount of Each Disbursement this Period 12309.75 Transaction ID : SB17-EX12920
City Charlotte	State NC	
Zip Code 28258	Purpose of Disbursement CREDIT CARD PAYMENT: SEE BELOW	CREDIT CARD PAYMENT: SEE BELOW
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Federal Express</b>		Date of Disbursement MM / DD / YYYY 05 / 03 / 2013
Mailing Address Box 1140		Amount of Each Disbursement this Period 103.66 Transaction ID : SB17-EX12890
City Memphis	State TN	
Zip Code 38101	Purpose of Disbursement Administrative/Salary/Overhead Expenses	[MEMO ITEM] Delivery Expense
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Postnet</b>		Date of Disbursement MM / DD / YYYY 05 / 03 / 2013
Mailing Address Ashton Place		Amount of Each Disbursement this Period 105.47 Transaction ID : SB17-EX12891
City Charleston	State WV	
Zip Code 25314	Purpose of Disbursement Administrative/Salary/Overhead Expenses	[MEMO ITEM] Postcard Printing
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	12309.75
<b>TOTAL</b> This Period (last page this line number only).....	

13020280277

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Rackspace Hosting</b>		Date of Disbursement MM / DD / YYYY 05 / 03 / 2013
Mailing Address 5000 Walzem Rd		Amount of Each Disbursement this Period 43.92
City San Antonio	State TX	
Zip Code 78218	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX12892
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Email Hosting
State: District:		

Full Name (Last, First, Middle Initial) <b>B. USPS</b>		Date of Disbursement MM / DD / YYYY 05 / 03 / 2013
Mailing Address 1002 Lee St.		Amount of Each Disbursement this Period 1135.17
City Charleston	State WV	
Zip Code 25301	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX12893
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Postage
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Shell</b>		Date of Disbursement MM / DD / YYYY 05 / 03 / 2013
Mailing Address 1224 TJ Jackson Dr.		Amount of Each Disbursement this Period 61.18
City Falling Waters	State WV	
Zip Code 25419	Purpose of Disbursement Travel Expenses	Transaction ID : SB17-EX12894
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Fuel
State: District:		

SUBTOTAL of Disbursements This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

13020280278

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 279 OF 323

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Comcast**

Mailing Address PO Box 3005

City Southeastern State PA Zip Code 19398

Purpose of Disbursement  
Advertising Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 03 / 2013

Amount of Each Disbursement this Period

\$ 250.96

Transaction ID : SB17-EX12895

[MEMO ITEM]  
Advertising

**B. Constant Contact**

Mailing Address 1601 Trapelp Rd. Suite 329

City Waltham State MA Zip Code 02451

Purpose of Disbursement  
Advertising Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 03 / 2013

Amount of Each Disbursement this Period

\$ 150.00

Transaction ID : SB17-EX12896

[MEMO ITEM]  
Email Newsletter

**C. Go Mart**

Mailing Address MacCorkle Ave.

City Charleston State WV Zip Code 25304

Purpose of Disbursement  
Travel Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 03 / 2013

Amount of Each Disbursement this Period

\$ 424.70

Transaction ID : SB17-EX12897

[MEMO ITEM]  
Fuel

SUBTOTAL of Disbursements This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

13020280279

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Charleston Blueprint**

Mailing Address 1203 Virginia St E

City Charleston State WV Zip Code 25301

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
05			03			2013			

Amount of Each Disbursement this Period

64.66

Transaction ID : SB17-EX12898

[MEMO ITEM]  
Printing Supplies

**B. USAirways**

Mailing Address Yeager Airport

City Charleston State WV Zip Code 25311

Purpose of Disbursement  
Travel Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
05			03			2013			

Amount of Each Disbursement this Period

288.33

Transaction ID : SB17-EX12899

[MEMO ITEM]  
Airfare

**C. BFS Foods**

Mailing Address 57 Staunton Dr

City Weston State WV Zip Code 26452

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
05			03			2013			

Amount of Each Disbursement this Period

40.50

Transaction ID : SB17-EX12900

[MEMO ITEM]  
Food and Beverage

SUBTOTAL of Disbursements This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 281 OF 323
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b
	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Office Max</b>		Date of Disbursement 05 / 03 / 2013
Mailing Address 228 RHL Blvd.		Amount of Each Disbursement this Period <b>477.82</b>
City South Charleston	State WV	
Zip Code 25309	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : <b>SB17-EX12901</b>
Candidate Name	Category/Type 001	[MEMO ITEM] Computer Supplies
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Sheetz</b>		Date of Disbursement 05 / 03 / 2013
Mailing Address 1220 Johnson Ave.		Amount of Each Disbursement this Period <b>71.37</b>
City Bridgeport	State WV	
Zip Code 26330	Purpose of Disbursement Travel Expenses	Transaction ID : <b>SB17-EX12902</b>
Candidate Name	Category/Type 002	[MEMO ITEM] Fuel
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. 7-Eleven</b>		Date of Disbursement 05 / 03 / 2013
Mailing Address Oakwood Rd.		Amount of Each Disbursement this Period <b>41.42</b>
City Charleston	State WV	
Zip Code 25314	Purpose of Disbursement Travel Expenses	Transaction ID : <b>SB17-EX12903</b>
Candidate Name	Category/Type 002	[MEMO ITEM] Fuel
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Exxon Mobil</b>		Date of Disbursement MM / DD / YYYY 05 / 03 / 2013
Mailing Address 5959 Las Colinas Boulevard		Amount of Each Disbursement this Period 209.08
City Irving	State TX	
Zip Code 75039	Purpose of Disbursement Travel Expenses	Transaction ID : <b>SB17-EX12904</b>
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Fuel
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Bridge Road Bistro</b>		Date of Disbursement MM / DD / YYYY 05 / 03 / 2013
Mailing Address 915 Bridge Rd		Amount of Each Disbursement this Period 64.68
City Charleston	State WV	
Zip Code 25314	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : <b>SB17-EX12905</b>
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Food and Beverage
State: District:		

Full Name (Last, First, Middle Initial) <b>c. United Air</b>		Date of Disbursement MM / DD / YYYY 05 / 03 / 2013
Mailing Address Yeager Airport		Amount of Each Disbursement this Period 143.90
City Charleston	State WV	
Zip Code 25311	Purpose of Disbursement Travel Expenses	Transaction ID : <b>SB17-EX12906</b>
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Airfare
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280282

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Staples**

Date of Disbursement

Mailing Address 2810 Mountaineer Blvd.

M M / D D / Y Y Y Y  
05 03 2013

City State Zip Code  
South Charleston WV 25309

Amount of Each Disbursement this Period

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

001

306.56

Candidate Name

Category/  
Type

Transaction ID : SB17-EX12907

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

**[MEMO ITEM]**  
Folders Toner & Nametags

State: District:

**B. Dunbar Printing**

Date of Disbursement

Mailing Address 1310 Ohio Ave

M M / D D / Y Y Y Y  
05 03 2013

City State Zip Code  
Dunbar WV 25064

Amount of Each Disbursement this Period

Purpose of Disbursement  
Solicitation and Fundraising Expenses

003

2624.03

Candidate Name

Category/  
Type

Transaction ID : SB17-EX12908

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

**[MEMO ITEM]**  
Direct Mail

State: District:

**C. South Hills Market**

Date of Disbursement

Mailing Address 1010 Bridge Rd.

M M / D D / Y Y Y Y  
05 03 2013

City State Zip Code  
Charleston WV 25314

Amount of Each Disbursement this Period

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

001

57.03

Candidate Name

Category/  
Type

Transaction ID : SB17-EX12909

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

**[MEMO ITEM]**  
Food and Beverage

State: District:

SUBTOTAL of Disbursements This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

13020280283

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 284 OF 323

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Ampco Parking**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
05			03			2013			

Mailing Address 4 Seagate

Amount of Each Disbursement this Period

48.00
-------

City Toledo State OH Zip Code 43604

Purpose of Disbursement  
Travel Expenses

002  
Category/  
Type

Transaction ID : SB17-EX12910

[MEMO ITEM]  
Parking

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Full Name (Last, First, Middle Initial)

**B. Marriott**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
05			03			2013			

Mailing Address 200 Lee St.

Amount of Each Disbursement this Period

1262.76
---------

City Charleston State WV Zip Code 25301

Purpose of Disbursement  
Campaign Event Expenses

007  
Category/  
Type

Transaction ID : SB17-EX12911

[MEMO ITEM]  
Catering and Room Rental

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Full Name (Last, First, Middle Initial)

**C. Marathon Oil**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
05			03			2013			

Mailing Address 703 Main St W

Amount of Each Disbursement this Period

134.64
--------

City Ripley State WV Zip Code 25271

Purpose of Disbursement  
Travel Expenses

002  
Category/  
Type

Transaction ID : SB17-EX12912

[MEMO ITEM]  
Fuel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

SUBTOTAL of Disbursements This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

0.00

13020280284

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. American Airline</b>		Date of Disbursement MM / DD / YYYY 05 / 03 / 2013
Mailing Address PO Box 619612		Amount of Each Disbursement this Period 393.90 Transaction ID : SB17-EX12913
City Dallas	State TX	
Zip Code 75261	Purpose of Disbursement Travel Expenses	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	[MEMO ITEM] Airfare

Full Name (Last, First, Middle Initial) <b>B. Liberty</b>		Date of Disbursement MM / DD / YYYY 05 / 03 / 2013
Mailing Address PO Box 225		Amount of Each Disbursement this Period 71.99 Transaction ID : SB17-EX12914
City Colonia	State NJ	
Zip Code 07067	Purpose of Disbursement Travel Expenses	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	[MEMO ITEM] Fuel

Full Name (Last, First, Middle Initial) <b>C. Beau Ties</b>		Date of Disbursement MM / DD / YYYY 05 / 03 / 2013
Mailing Address 69 Industrial Ave		Amount of Each Disbursement this Period 99.95 Transaction ID : SB17-EX12915
City Middlebury	State VT	
Zip Code 05753	Purpose of Disbursement Campaign Materials	Category/ Type 006
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	[MEMO ITEM] Neck Ties

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280285

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Stratford Springs**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
05			03			2013			

Mailing Address 100 Kensington Dr

Amount of Each Disbursement this Period

City State Zip Code  
Wheeling WV 26003

2895.74

Purpose of Disbursement  
Campaign Event Expenses

007  
Category/  
Type

Transaction ID : SB17-EX12916

Candidate Name

[MEMO ITEM]  
Food and Beverage

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Full Name (Last, First, Middle Initial)

**B. Sirius**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
05			03			2013			

Mailing Address 1221 Avenue Of The Americas

Amount of Each Disbursement this Period

City State Zip Code  
New York NY 10020

226.44

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

001  
Category/  
Type

Transaction ID : SB17-EX12917

Candidate Name

[MEMO ITEM]  
Radio Service

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Full Name (Last, First, Middle Initial)

**C. Blennerhassett Hotel**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
05			03			2013			

Mailing Address 320 Market St

Amount of Each Disbursement this Period

City State Zip Code  
Parkersburg WV 26101

450.00

Purpose of Disbursement  
Campaign Event Expenses

007  
Category/  
Type

Transaction ID : SB17-EX12918

Candidate Name

[MEMO ITEM]  
Food and Beverage

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

SUBTOTAL of Disbursements This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

13020280286

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Lus Tios Grill</b>		Date of Disbursement MM / DD / YYYY 05 / 03 / 2013
Mailing Address 2615 Mount Vernon Ave		Amount of Each Disbursement this Period 58.89
City Alexandria	State VA	
Zip Code 22301	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX12919
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Food and Beverage
State: District:		

Full Name (Last, First, Middle Initial) <b>B. BB&amp;T Financial</b>		Date of Disbursement MM / DD / YYYY 06 / 03 / 2013
Mailing Address PO Box 580340		Amount of Each Disbursement this Period 4727.71
City Charlotte	State NC	
Zip Code 28258	Purpose of Disbursement CREDIT CARD PAYMENT: SEE BELOW	Transaction ID : SB17-EX12945
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	CREDIT CARD PAYMENT: SEE BELOW
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Wireless Works</b>		Date of Disbursement MM / DD / YYYY 06 / 03 / 2013
Mailing Address 500 Summers St. Suite 300		Amount of Each Disbursement this Period 159.00
City Charleston	State WV	
Zip Code 25301	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX12921
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Telephone
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	4727.71
<b>TOTAL</b> This Period (last page this line number only).....	

13020280287

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. AT&T**

Date of Disbursement

M M / D D / Y Y Y Y
06 / 03 / 2013

Mailing Address P.O. Box 8212

Amount of Each Disbursement this Period

25.00
-------

City State Zip Code  
Aurora IL 60572

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

001
Category/ Type

Transaction ID : SB17-EX12922

[MEMO ITEM]  
Data Plan

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

**B. Uber**

Date of Disbursement

M M / D D / Y Y Y Y
06 / 03 / 2013

Mailing Address 800 Market St

Amount of Each Disbursement this Period

89.00
-------

City State Zip Code  
San Francisco CA 94102

Purpose of Disbursement  
Travel Expenses

002
Category/ Type

Transaction ID : SB17-EX12923

[MEMO ITEM]  
Taxi

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

**c. Yeager Airport**

Date of Disbursement

M M / D D / Y Y Y Y
06 / 03 / 2013

Mailing Address 100 Airport Rd

Amount of Each Disbursement this Period

21.00
-------

City State Zip Code  
Charleston WV 25311

Purpose of Disbursement  
Travel Expenses

002
Category/ Type

Transaction ID : SB17-EX12924

[MEMO ITEM]  
Parking

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

SUBTOTAL of Disbursements This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

13020280288



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
---	------------------------------------	-------------------------------------	------------------------------------

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Exxon Mobil**

Mailing Address 5959 Las Colinas Boulevard

City Irving State TX Zip Code 75039

Purpose of Disbursement  
Travel Expenses

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 03 / 2013

Amount of Each Disbursement this Period

222.39

Transaction ID : SB17-EX12925

**[MEMO ITEM]**  
Fuel

**B. Glory Days**

Mailing Address 3059 Nutley St

City Fairfax State VA Zip Code 22031

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 03 / 2013

Amount of Each Disbursement this Period

29.87

Transaction ID : SB17-EX12926

**[MEMO ITEM]**  
Food and Beverage

**C. USAirways**

Mailing Address Yeager Airport

City Charleston State WV Zip Code 25311

Purpose of Disbursement  
Travel Expenses

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 03 / 2013

Amount of Each Disbursement this Period

1621.86

Transaction ID : SB17-EX12927

**[MEMO ITEM]**  
Airfare

**SUBTOTAL** of Disbursements This Page (optional).....

0.00

**TOTAL** This Period (last page this line number only).....

13020280289

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Federal Express**

Mailing Address Box 1140

City State Zip Code  
Memphis TN 38101

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 03 2013

Amount of Each Disbursement this Period

74.53

Transaction ID : SB17-EX12928

[MEMO ITEM]  
Delivery Expense

**B. Rackspace Hosting**

Mailing Address 5000 Walzem Rd

City State Zip Code  
San Antonio TX 78218

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 03 2013

Amount of Each Disbursement this Period

22.00

Transaction ID : SB17-EX12929

[MEMO ITEM]  
Email Hosting

**C. Go Mart**

Mailing Address MacCorkle Ave.

City State Zip Code  
Charleston WV 25304

Purpose of Disbursement  
Travel Expenses

Candidate Name

002  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 03 2013

Amount of Each Disbursement this Period

141.68

Transaction ID : SB17-EX12930

[MEMO ITEM]  
Fuel

SUBTOTAL of Disbursements This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

13020280290

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 291 OF 323

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. USPS</b>		Date of Disbursement MM / DD / YYYY 06 / 03 / 2013
Mailing Address 1002 Lee St.		Amount of Each Disbursement this Period 108.56
City Charleston	State WV	
Zip Code 25301	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : <b>SB17-EX12931</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Postage
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United Air</b>		Date of Disbursement MM / DD / YYYY 06 / 03 / 2013
Mailing Address Yeager Airport		Amount of Each Disbursement this Period 143.90
City Charleston	State WV	
Zip Code 25311	Purpose of Disbursement Travel Expenses	Transaction ID : <b>SB17-EX12932</b>
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Airfare
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Constant Contact</b>		Date of Disbursement MM / DD / YYYY 06 / 03 / 2013
Mailing Address 1601 Trapelp Rd. Suite 329		Amount of Each Disbursement this Period 75.00
City Waltham	State MA	
Zip Code 02451	Purpose of Disbursement Advertising Expenses	Transaction ID : <b>SB17-EX12933</b>
Candidate Name	Category/ Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Email Newsletter
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280291

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Office Max**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
06			03			2013			

Mailing Address 228 RHL Blvd.

Amount of Each Disbursement this Period

City State Zip Code  
South Charleston WV 25309

364.96

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

001

Transaction ID : SB17-EX12934

Candidate Name

Category/  
Type

[MEMO ITEM]  
Office Furniture

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

**B. Marathon Oil**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
06			03			2013			

Mailing Address 703 Main St W

Amount of Each Disbursement this Period

City State Zip Code  
Ripley WV 25271

65.78

Purpose of Disbursement  
Travel Expenses

002

Transaction ID : SB17-EX12935

Candidate Name

Category/  
Type

[MEMO ITEM]  
Fuel

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

**c. Little General Store**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
06			03			2013			

Mailing Address 4008 Malden Dr

Amount of Each Disbursement this Period

City State Zip Code  
Charleston WV 25306

57.27

Purpose of Disbursement  
Travel Expenses

002

Transaction ID : SB17-EX12936

Candidate Name

Category/  
Type

[MEMO ITEM]  
Fuel

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

SUBTOTAL of Disbursements This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

13020280292

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Ruth Chris</b>		Date of Disbursement MM / DD / YYYY 06 / 03 / 2013
Mailing Address 724 9th St. NW		Amount of Each Disbursement this Period 166.60 Transaction ID : SB17-EX12937
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Administrative/Salary/Overhead Expenses	[MEMO ITEM] Food and Beverage
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Ampco Parking</b>		Date of Disbursement MM / DD / YYYY 06 / 03 / 2013
Mailing Address 4 Seagate		Amount of Each Disbursement this Period 10.05 Transaction ID : SB17-EX12938
City Toledo	State OH	
Zip Code 43604	Purpose of Disbursement Travel Expenses	[MEMO ITEM] Parking
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Shell</b>		Date of Disbursement MM / DD / YYYY 06 / 03 / 2013
Mailing Address 1224 TJ Jackson Dr.		Amount of Each Disbursement this Period 73.16 Transaction ID : SB17-EX12939
City Falling Waters	State WV	
Zip Code 25419	Purpose of Disbursement Travel Expenses	[MEMO ITEM] Fuel
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280293

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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17  
20a     18  
20b     19a  
20c     19b  
21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Euro-Suites Hotel**

Date of Disbursement

MM / DD / YYYY  
06 / 03 / 2013

Mailing Address 501 Chestnut Ridge Rd

City State Zip Code  
Morgantown WV 26505

Amount of Each Disbursement this Period

106.40

Purpose of Disbursement  
Travel Expenses

002

Transaction ID : SB17-EX12940

Candidate Name

Category/  
Type

[MEMO ITEM]  
Lodging

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Full Name (Last, First, Middle Initial)

**B. EvalueSoftware.com**

Date of Disbursement

MM / DD / YYYY  
06 / 03 / 2013

Mailing Address 2700 Homestead Rd

City State Zip Code  
Park City UT 84098

Amount of Each Disbursement this Period

249.00

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

001

Transaction ID : SB17-EX12941

Candidate Name

Category/  
Type

[MEMO ITEM]  
Software

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Full Name (Last, First, Middle Initial)

**C. Best Buy**

Date of Disbursement

MM / DD / YYYY  
06 / 03 / 2013

Mailing Address 4000 University Town Centre Dr

City State Zip Code  
Morgantown WV 26501

Amount of Each Disbursement this Period

805.58

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

001

Transaction ID : SB17-EX12942

Candidate Name

Category/  
Type

[MEMO ITEM]  
Computer Equipment

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

SUBTOTAL of Disbursements This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

13020280294

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. The Candy Maker</b>		Date of Disbursement MM / DD / YYYY 06 / 03 / 2013
Mailing Address 300 W Main St		Amount of Each Disbursement this Period 48.48 Transaction ID : SB17-EX12943
City White Sulphur Springs	State WV	
Zip Code 24986	Purpose of Disbursement Administrative/Salary/Overhead Expenses	[MEMO ITEM] Food and Beverage
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Taqueria El Poblano</b>		Date of Disbursement MM / DD / YYYY 06 / 03 / 2013
Mailing Address 2401 Columbia Pike		Amount of Each Disbursement this Period 46.64 Transaction ID : SB17-EX12944
City Arlington	State VA	
Zip Code 22204	Purpose of Disbursement Administrative/Salary/Overhead Expenses	[MEMO ITEM] Food and Beverage
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. The Endicott Group</b>		Date of Disbursement MM / DD / YYYY 04 / 15 / 2013
Mailing Address 209 Pennsylvania Ave SE		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17-EX12659
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Fundraising Retainer	Fundraising Retainer
Candidate Name	Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2500.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280295

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. The Endicott Group</b>		Date of Disbursement MM / DD / YYYY 04 / 26 / 2013
Mailing Address 209 Pennsylvania Ave SE		Amount of Each Disbursement this Period 1506.51 Transaction ID : SB17-EX12697
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement REIMBURSEMENT: SEE BELOW	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial) <b>B. Amtrak</b>		Date of Disbursement MM / DD / YYYY 04 / 26 / 2013
Mailing Address 50 Massachusetts Ave. NE		Amount of Each Disbursement this Period 405.00 Transaction ID : SB17-EX12698
City Washington	State DC	
Zip Code 20002	Purpose of Disbursement Train Tickets	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>c. Federal Express</b>		Date of Disbursement MM / DD / YYYY 04 / 26 / 2013
Mailing Address Box 1140		Amount of Each Disbursement this Period 48.27 Transaction ID : SB17-EX12699
City Memphis	State TN	
Zip Code 38101	Purpose of Disbursement Shipping	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1506.51
<b>TOTAL</b> This Period (last page this line number only).....	

13020280296



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 297 OF 323	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. The Endicott Group</b>		Date of Disbursement MM / DD / YYYY 04 / 26 / 2013
Mailing Address 209 Pennsylvania Ave SE		Amount of Each Disbursement this Period 77.00 Transaction ID : SB17-EX12700 [MEMO ITEM]
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Taxi Fare	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Uber</b>		Date of Disbursement MM / DD / YYYY 04 / 26 / 2013
Mailing Address 800 Market St		Amount of Each Disbursement this Period 108.00 Transaction ID : SB17-EX12701 [MEMO ITEM]
City San Francisco	State CA	
Zip Code 94102	Purpose of Disbursement Transportation	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	

Full Name (Last, First, Middle Initial) <b>c. Manny's Steakhouse</b>		Date of Disbursement MM / DD / YYYY 04 / 26 / 2013
Mailing Address 825 Marquette Ave		Amount of Each Disbursement this Period 77.14 Transaction ID : SB17-EX12702 [MEMO ITEM]
City Minneapolis	State MN	
Zip Code 55402	Purpose of Disbursement Food and Beverage	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280297

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. The Minneapolis Club</b>		Date of Disbursement MM / DD / YYYY 04 / 26 / 2013
Mailing Address <b>729 2nd Ave S</b>		Amount of Each Disbursement this Period 524.83 Transaction ID : <b>SB17-EX12703</b> <b>[MEMO ITEM]</b>
City <b>Minneapolis</b>	State <b>MN</b>	
Zip Code <b>55402</b>	Purpose of Disbursement <b>Lodging</b>	Category/ Type <b>003</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2014</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <b>Primary 2014</b>	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Double Tree</b>		Date of Disbursement MM / DD / YYYY 04 / 26 / 2013
Mailing Address <b>8 Stone St</b>		Amount of Each Disbursement this Period 266.27 Transaction ID : <b>SB17-EX12704</b> <b>[MEMO ITEM]</b>
City <b>New York</b>	State <b>NY</b>	
Zip Code <b>10004</b>	Purpose of Disbursement <b>Lodging</b>	Category/ Type <b>003</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2014</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <b>Primary 2014</b>	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. The Endicott Group</b>		Date of Disbursement MM / DD / YYYY 05 / 14 / 2013
Mailing Address <b>209 Pennsylvania Ave SE</b>		Amount of Each Disbursement this Period 5000.00 Transaction ID : <b>SB17-EX12743</b> <b>Fundraising Retainer</b>
City <b>Washington</b>	State <b>DC</b>	
Zip Code <b>20003</b>	Purpose of Disbursement <b>Fundraising Retainer</b>	Category/ Type <b>003</b>
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <b>2014</b>	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <b>Primary 2014</b>	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5000.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280298

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. The Endicott Group**

Mailing Address 209 Pennsylvania Ave SE

City State Zip Code  
Washington DC 20003

Purpose of Disbursement  
Fundraising Retainer

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 04 2013

Amount of Each Disbursement this Period

5000.00

Transaction ID : SB17-EX12785

Fundraising Retainer

**B. The Endicott Group**

Mailing Address 209 Pennsylvania Ave SE

City State Zip Code  
Washington DC 20003

Purpose of Disbursement  
REIMBURSEMENT: SEE BELOW

002

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 04 2013

Amount of Each Disbursement this Period

1540.40

Transaction ID : SB17-EX12838

REIMBURSEMENT: SEE BELOW

**c. Chicago Cut Steakhouse**

Mailing Address 300 N LaSalle St

City State Zip Code  
Chicago IL 60654

Purpose of Disbursement  
Food and Beverage

002

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
06 04 2013

Amount of Each Disbursement this Period

250.00

Transaction ID : SB17-EX12839

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional).....

6540.40

**TOTAL** This Period (last page this line number only).....

13020280299

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. USAirways**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
06			04			2013			

Mailing Address **Yeager Airport**

Amount of Each Disbursement this Period

409.80

City State Zip Code

Charleston WV 25311

Purpose of Disbursement  
Airfare

002

Transaction ID : **SB17-EX12840**

Candidate Name

Category/  
Type

[MEMO ITEM]

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014

Primary  General

Other (specify) Primary 2014

State: District:

Full Name (Last, First, Middle Initial)

**B. United Air**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
06			04			2013			

Mailing Address **Yeager Airport**

Amount of Each Disbursement this Period

880.60

City State Zip Code

Charleston WV 25311

Purpose of Disbursement  
Airfare

002

Transaction ID : **SB17-EX12841**

Candidate Name

Category/  
Type

[MEMO ITEM]

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014

Primary  General

Other (specify) Primary 2014

State: District:

Full Name (Last, First, Middle Initial)

**c. National Finance Center**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
04			01			2013			

Mailing Address **PO Box 790341**

Amount of Each Disbursement this Period

522.22

City State Zip Code

Saint Louis MO 63179

Purpose of Disbursement  
Insurance Expense

001

Transaction ID : **SB17-EX12524**

Candidate Name

Category/  
Type

Insurance Expense

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014

Primary  General

Other (specify) Primary 2014

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....

522.22

**TOTAL** This Period (last page this line number only).....

13020280300

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. National Finance Center</b>		Date of Disbursement MM / DD / YYYY 05 / 01 / 2013
Mailing Address PO Box 790341		Amount of Each Disbursement this Period 522.22 Transaction ID : SB17-EX12669
City Saint Louis	State MO	
Zip Code 63179	Purpose of Disbursement Insurance Expense	Insurance Expense
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State:    District:		

Full Name (Last, First, Middle Initial) <b>B. National Finance Center</b>		Date of Disbursement MM / DD / YYYY 06 / 01 / 2013
Mailing Address PO Box 790341		Amount of Each Disbursement this Period 522.22 Transaction ID : SB17-EX12764
City Saint Louis	State MO	
Zip Code 63179	Purpose of Disbursement Insurance Expense	Insurance Expense
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State:    District:		

Full Name (Last, First, Middle Initial) <b>C. Paychex</b>		Date of Disbursement MM / DD / YYYY 04 / 01 / 2013
Mailing Address 3960 Stillman Parkway		Amount of Each Disbursement this Period 56.02 Transaction ID : SB17-EX12724
City Glen Allen	State VA	
Zip Code 25060	Purpose of Disbursement Payroll Service Fee	Payroll Service Fee
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State:    District:		

**SUBTOTAL** of Disbursements This Page (optional).....

1100.46

**TOTAL** This Period (last page this line number only).....

13020280301

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement MM / DD / YYYY 04 / 15 / 2013
Mailing Address 3960 Stillman Parkway		Amount of Each Disbursement this Period 65.82 Transaction ID : SB17-EX12680
City Glen Allen	State VA	
Zip Code 25060	Purpose of Disbursement Payroll Service Fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	Payroll Service Fee

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		Date of Disbursement MM / DD / YYYY 04 / 15 / 2013
Mailing Address 3960 Stillman Parkway		Amount of Each Disbursement this Period 7077.73 Transaction ID : SB17-EX12686
City Glen Allen	State VA	
Zip Code 25060	Purpose of Disbursement PAYROLL: SEE BELOW	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	PAYROLL: SEE BELOW

Full Name (Last, First, Middle Initial) <b>c. Alison Bibbee</b>		Date of Disbursement MM / DD / YYYY 04 / 15 / 2013
Mailing Address 1210 Dudley Road		Amount of Each Disbursement this Period 1806.00 Transaction ID : SB17-EX12681
City Charleston	State WV	
Zip Code 25314	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	[MEMO ITEM] Net Salary

SUBTOTAL of Disbursements This Page (optional).....	7143.55
TOTAL This Period (last page this line number only).....	

13020280302

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Charles Flannery</b>		Date of Disbursement MM / DD / YYYY 04 / 15 / 2013
Mailing Address 307 Winwood Dr.		Amount of Each Disbursement this Period 2343.01 Transaction ID : SB17-EX12682
City Charleston	State WV	
Zip Code 25302	Purpose of Disbursement Administrative/Salary/Overhead Expenses	[MEMO ITEM] Net Salary
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Mary Payne</b>		Date of Disbursement MM / DD / YYYY 04 / 15 / 2013
Mailing Address 1414 Louden Heights Road		Amount of Each Disbursement this Period 621.87 Transaction ID : SB17-EX12683
City Charleston	State WV	
Zip Code 25314	Purpose of Disbursement Administrative/Salary/Overhead Expenses	[MEMO ITEM] Net Salary
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State:	District:	

Full Name (Last, First, Middle Initial) <b>c. Anne White</b>		Date of Disbursement MM / DD / YYYY 04 / 15 / 2013
Mailing Address 2610 Roselane Dr		Amount of Each Disbursement this Period 306.99 Transaction ID : SB17-EX12684
City Charleston	State WV	
Zip Code 25302	Purpose of Disbursement Administrative/Salary/Overhead Expenses	[MEMO ITEM] Net Salary
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280303

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement MM / DD / YYYY 04 / 15 / 2013
Mailing Address 3960 Stillman Parkway		Amount of Each Disbursement this Period 1999.86 Transaction ID : SB17-EX12685
City Glen Allen	State VA	
Purpose of Disbursement Administrative/Salary/Overhead Expenses		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Withholding Taxes
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		Date of Disbursement MM / DD / YYYY 04 / 16 / 2013
Mailing Address 3960 Stillman Parkway		Amount of Each Disbursement this Period 5414.80 Transaction ID : SB17-EX12689
City Glen Allen	State VA	
Purpose of Disbursement PAYROLL: SEE BELOW		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	PAYROLL: SEE BELOW
State:	District:	

Full Name (Last, First, Middle Initial) <b>c. Alison Bibbee</b>		Date of Disbursement MM / DD / YYYY 04 / 16 / 2013
Mailing Address 1210 Dudley Road		Amount of Each Disbursement this Period 3398.41 Transaction ID : SB17-EX12687
City Charleston	State WV	
Purpose of Disbursement Administrative/Salary/Overhead Expenses		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Net Salary
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5414.80
<b>TOTAL</b> This Period (last page this line number only).....	

13020280304



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 305 OF 323

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Paychex**

Mailing Address 3960 Stillman Parkway

City State Zip Code  
Glen Allen VA 25060

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 16 / 2013

Amount of Each Disbursement this Period

2016.39

Transaction ID : SB17-EX12688

[MEMO ITEM]  
Withholding Taxes

Full Name (Last, First, Middle Initial)

**B. Paychex**

Mailing Address 3960 Stillman Parkway

City State Zip Code  
Glen Allen VA 25060

Purpose of Disbursement  
PAYROLL: SEE BELOW

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 30 / 2013

Amount of Each Disbursement this Period

9997.74

Transaction ID : SB17-EX12730

PAYROLL: SEE BELOW

Full Name (Last, First, Middle Initial)

**C. Alison Bibbee**

Mailing Address 1210 Dudley Road

City State Zip Code  
Charleston WV 25314

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
04 / 30 / 2013

Amount of Each Disbursement this Period

3818.28

Transaction ID : SB17-EX12725

[MEMO ITEM]  
Net Salary

SUBTOTAL of Disbursements This Page (optional).....

9997.74

TOTAL This Period (last page this line number only).....

13020280305

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 306 OF 323

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Charles Flannery</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2013
Mailing Address 307 Winwood Dr.		Amount of Each Disbursement this Period 2343.02 Transaction ID : SB17-EX12726
City Charleston	State WV	
Zip Code 25302	Purpose of Disbursement Administrative/Salary/Overhead Expenses	[MEMO ITEM] Net Salary
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mary Payne</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2013
Mailing Address 1414 Loudon Heights Road		Amount of Each Disbursement this Period 621.88 Transaction ID : SB17-EX12727
City Charleston	State WV	
Zip Code 25314	Purpose of Disbursement Administrative/Salary/Overhead Expenses	[MEMO ITEM] Net Salary
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Anne White</b>		Date of Disbursement MM / DD / YYYY 04 / 30 / 2013
Mailing Address 2610 Roselane Dr		Amount of Each Disbursement this Period 306.98 Transaction ID : SB17-EX12728
City Charleston	State WV	
Zip Code 25302	Purpose of Disbursement Administrative/Salary/Overhead Expenses	[MEMO ITEM] Net Salary
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

13020280306

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Paychex**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	3

Mailing Address 3960 Stillman Parkway

Amount of Each Disbursement this Period

City State Zip Code  
Glen Allen VA 25060

2907.58

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

001  
Category/  
Type

Transaction ID : SB17-EX12729

Candidate Name

[MEMO ITEM]  
Withholding Taxes

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

**B. Paychex**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	3

Mailing Address 3960 Stillman Parkway

Amount of Each Disbursement this Period

City State Zip Code  
Glen Allen VA 25060

56.02

Purpose of Disbursement  
Payroll Service Fee

001  
Category/  
Type

Transaction ID : SB17-EX12737

Candidate Name

Payroll Service Fee

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

**c. Paychex**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	1	3

Mailing Address 3960 Stillman Parkway

Amount of Each Disbursement this Period

City State Zip Code  
Glen Allen VA 25060

7077.73

Purpose of Disbursement  
PAYROLL: SEE BELOW

001  
Category/  
Type

Transaction ID : SB17-EX12810

Candidate Name

PAYROLL: SEE BELOW

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

SUBTOTAL of Disbursements This Page (optional).....

7133.75

TOTAL This Period (last page this line number only).....

13020280307

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 308 OF 323

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Alison Bibbee</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2013
Mailing Address 1210 Dudley Road		Amount of Each Disbursement this Period 1806.00 Transaction ID : SB17-EX12805
City Charleston	State WV	
Zip Code 25314	Purpose of Disbursement Administrative/Salary/Overhead Expenses	[MEMO ITEM] Net Salary
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Charles Flannery</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2013
Mailing Address 307 Winwood Dr.		Amount of Each Disbursement this Period 2343.01 Transaction ID : SB17-EX12806
City Charleston	State WV	
Zip Code 25302	Purpose of Disbursement Administrative/Salary/Overhead Expenses	[MEMO ITEM] Net Salary
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Mary Payne</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2013
Mailing Address 1414 Louden Heights Road		Amount of Each Disbursement this Period 621.87 Transaction ID : SB17-EX12807
City Charleston	State WV	
Zip Code 25314	Purpose of Disbursement Administrative/Salary/Overhead Expenses	[MEMO ITEM] Net Salary
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

13020280308

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 309 OF 323

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Anne White</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2013
Mailing Address 2610 Roselane Dr		Amount of Each Disbursement this Period 306.98 Transaction ID : SB17-EX12808
City Charleston	State WV	
Zip Code 25302	Purpose of Disbursement Administrative/Salary/Overhead Expenses	[MEMO ITEM] Net Salary
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2013
Mailing Address 3960 Stillman Parkway		Amount of Each Disbursement this Period 1999.87 Transaction ID : SB17-EX12809
City Glen Allen	State VA	
Zip Code 25060	Purpose of Disbursement Administrative/Salary/Overhead Expenses	[MEMO ITEM] Withholding Taxes
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Paychex</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2013
Mailing Address 3960 Stillman Parkway		Amount of Each Disbursement this Period 58.66 Transaction ID : SB17-EX12842
City Glen Allen	State VA	
Zip Code 25060	Purpose of Disbursement Payroll Service Fee	Payroll Service Fee
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	58.66
<b>TOTAL</b> This Period (last page this line number only).....	

13020280309

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 310 OF 323
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b
	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement MM / DD / YYYY 05 / 31 / 2013
Mailing Address 3960 Stillman Parkway		Amount of Each Disbursement this Period 14159.58 <b>Transaction ID : SB17-EX12817</b>
City Glen Allen	State VA	
Zip Code 25060	Purpose of Disbursement PAYROLL: SEE BELOW	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	PAYROLL: SEE BELOW

Full Name (Last, First, Middle Initial) <b>B. Alison Bibbee</b>		Date of Disbursement MM / DD / YYYY 05 / 31 / 2013
Mailing Address 1210 Dudley Road		Amount of Each Disbursement this Period 5142.23 <b>Transaction ID : SB17-EX12811</b>
City Charleston	State WV	
Zip Code 25314	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	[MEMO ITEM] Net Salary

Full Name (Last, First, Middle Initial) <b>c. Charles Flannery</b>		Date of Disbursement MM / DD / YYYY 05 / 31 / 2013
Mailing Address 307 Winwood Dr.		Amount of Each Disbursement this Period 2343.02 <b>Transaction ID : SB17-EX12812</b>
City Charleston	State WV	
Zip Code 25302	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	[MEMO ITEM] Net Salary

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	14159.58
<b>TOTAL</b> This Period (last page this line number only).....	

13020280310

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 311 OF 323

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Mary Payne</b>		Date of Disbursement MM / DD / YYYY 05 / 31 / 2013
Mailing Address 1414 Louden Heights Road		Amount of Each Disbursement this Period 621.88
City Charleston	State WV	
Zip Code 25314	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX12813
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Net Salary
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Rebecca Trump</b>		Date of Disbursement MM / DD / YYYY 05 / 31 / 2013
Mailing Address 20007 Silverbell Drive		Amount of Each Disbursement this Period 1190.34
City Morgantown	State WV	
Zip Code 26505	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX12814
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Net Salary
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Anne White</b>		Date of Disbursement MM / DD / YYYY 05 / 31 / 2013
Mailing Address 2610 Roselane Dr		Amount of Each Disbursement this Period 306.98
City Charleston	State WV	
Zip Code 25302	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX12815
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Net Salary
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

13020280311

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement MM / DD / YYYY 05 / 31 / 2013
Mailing Address 3960 Stillman Parkway		Amount of Each Disbursement this Period 4555.13
City Glen Allen	State VA	
Zip Code 25060	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX12816
Candidate Name	001 Category/ Type	[MEMO ITEM] Withholding Taxes
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		Date of Disbursement MM / DD / YYYY 05 / 31 / 2013
Mailing Address 3960 Stillman Parkway		Amount of Each Disbursement this Period 3021.51
City Glen Allen	State VA	
Zip Code 25060	Purpose of Disbursement PAYROLL: SEE BELOW	Transaction ID : SB17-EX12820
Candidate Name	001 Category/ Type	PAYROLL: SEE BELOW
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Anne White</b>		Date of Disbursement MM / DD / YYYY 05 / 31 / 2013
Mailing Address 2610 Roselane Dr		Amount of Each Disbursement this Period 1758.06
City Charleston	State WV	
Zip Code 25302	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX12818
Candidate Name	001 Category/ Type	[MEMO ITEM] Net Salary
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3021.51
TOTAL This Period (last page this line number only).....	

13020280312



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Paychex**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	1		2	0	1	3

Mailing Address 3960 Stillman Parkway

Amount of Each Disbursement this Period

1263.45

City State Zip Code  
Glen Allen VA 25060

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

001  
Category/  
Type

Transaction ID : SB17-EX12819

[MEMO ITEM]  
Withholding Taxes

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Full Name (Last, First, Middle Initial)

**B. Paychex**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	1		2	0	1	3

Mailing Address 3960 Stillman Parkway

Amount of Each Disbursement this Period

61.71

City State Zip Code  
Glen Allen VA 25060

Purpose of Disbursement  
Payroll Service Fee

001  
Category/  
Type

Transaction ID : SB17-EX12844

Payroll Service Fee

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Full Name (Last, First, Middle Initial)

**C. Paychex**

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	4		2	0	1	3

Mailing Address 3960 Stillman Parkway

Amount of Each Disbursement this Period

8242.71

City State Zip Code  
Glen Allen VA 25060

Purpose of Disbursement  
PAYROLL: SEE BELOW

001  
Category/  
Type

Transaction ID : SB17-EX12827

PAYROLL: SEE BELOW

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

SUBTOTAL of Disbursements This Page (optional).....

8304.42

TOTAL This Period (last page this line number only).....

13020280313

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 314 OF 323

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Alison Bibbee</b>		Date of Disbursement MM / DD / YYYY 06 / 14 / 2013
Mailing Address 1210 Dudley Road		Amount of Each Disbursement this Period 1805.99 Transaction ID : SB17-EX12821
City Charleston	State WV	
Zip Code 25314	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	[MEMO ITEM] Net Salary

Full Name (Last, First, Middle Initial) <b>B. Charles Flannery</b>		Date of Disbursement MM / DD / YYYY 06 / 14 / 2013
Mailing Address 307 Winwood Dr.		Amount of Each Disbursement this Period 2343.01 Transaction ID : SB17-EX12822
City Charleston	State WV	
Zip Code 25302	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	[MEMO ITEM] Net Salary

Full Name (Last, First, Middle Initial) <b>c. Mary Payne</b>		Date of Disbursement MM / DD / YYYY 06 / 14 / 2013
Mailing Address 1414 Loudon Heights Road		Amount of Each Disbursement this Period 621.87 Transaction ID : SB17-EX12823
City Charleston	State WV	
Zip Code 25314	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	[MEMO ITEM] Net Salary

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

13020280314

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 315 OF 323

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Rebecca Trump**

Date of Disbursement

MM / DD / YYYY  
06 / 14 / 2013

Mailing Address 20007 Silverbell Drive

Amount of Each Disbursement this Period

City Morgantown State WV Zip Code 26505

1190.34

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

001

Transaction ID : SB17-EX12824

Candidate Name

Category/  
Type

[MEMO ITEM]

Net Salary

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Full Name (Last, First, Middle Initial)

**B. Anne White**

Date of Disbursement

MM / DD / YYYY  
06 / 14 / 2013

Mailing Address 2610 Roselane Dr

Amount of Each Disbursement this Period

City Charleston State WV Zip Code 25302

204.15

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

001

Transaction ID : SB17-EX12825

Candidate Name

Category/  
Type

[MEMO ITEM]

Net Salary

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Full Name (Last, First, Middle Initial)

**c. Paychex**

Date of Disbursement

MM / DD / YYYY  
06 / 14 / 2013

Mailing Address 3960 Stillman Parkway

Amount of Each Disbursement this Period

City Glen Allen State VA Zip Code 25060

2077.35

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

001

Transaction ID : SB17-EX12826

Candidate Name

Category/  
Type

[MEMO ITEM]

Withholding Taxes

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....

0.00

**TOTAL** This Period (last page this line number only).....

13020280315

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement MM / DD / YYYY 06 / 14 / 2013
Mailing Address 3960 Stillman Parkway		Amount of Each Disbursement this Period 58.86 <b>Transaction ID : SB17-EX12847</b>
City Glen Allen	State VA	
Purpose of Disbursement Payroll Service Fee		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Payroll Service Fee
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		Date of Disbursement MM / DD / YYYY 06 / 28 / 2013
Mailing Address 3960 Stillman Parkway		Amount of Each Disbursement this Period 10892.31 <b>Transaction ID : SB17-EX12953</b>
City Glen Allen	State VA	
Purpose of Disbursement Credit Card Paid by Paychex		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Paid by Paychex
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. Alison Bibbee</b>		Date of Disbursement MM / DD / YYYY 06 / 28 / 2013
Mailing Address 1210 Dudley Road		Amount of Each Disbursement this Period 2302.22 <b>Transaction ID : SB17-EX12947</b>
City Charleston	State WV	
Purpose of Disbursement Administrative/Salary/Overhead Expenses		Category/ Type 001
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014 -	[MEMO ITEM] Net Salary
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10951.17
<b>TOTAL</b> This Period (last page this line number only).....	

13020280316

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Charles Flannery</b>		Date of Disbursement MM / DD / YYYY 06 / 28 / 2013
Mailing Address 307 Winwood Dr.		Amount of Each Disbursement this Period 2343.01 Transaction ID : SB17-EX12948
City Charleston	State WV	
Zip Code 25302	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	[MEMO ITEM] Net Salary

Full Name (Last, First, Middle Initial) <b>B. Mary Payne</b>		Date of Disbursement MM / DD / YYYY 06 / 28 / 2013
Mailing Address 1414 Loudon Heights Road		Amount of Each Disbursement this Period 621.88 Transaction ID : SB17-EX12949
City Charleston	State WV	
Zip Code 25314	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	[MEMO ITEM] Net Salary

Full Name (Last, First, Middle Initial) <b>C. Rebecca Trump</b>		Date of Disbursement MM / DD / YYYY 06 / 28 / 2013
Mailing Address 20007 Silverbell Drive		Amount of Each Disbursement this Period 1190.34 Transaction ID : SB17-EX12950
City Morgantown	State WV	
Zip Code 26505	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	[MEMO ITEM] Net Salary

SUBTOTAL of Disbursements This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

13020280317

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 318 OF 323

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Anne White</b>		Date of Disbursement MM / DD / YYYY 06 / 28 / 2013
Mailing Address 2610 Roselane Dr		Amount of Each Disbursement this Period 1134.59 Transaction ID : SB17-EX12951
City Charleston	State WV	
Zip Code 25302	Purpose of Disbursement Administrative/Salary/Overhead Expenses	[MEMO ITEM] Net Salary
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		Date of Disbursement MM / DD / YYYY 06 / 28 / 2013
Mailing Address 3960 Stillman Parkway		Amount of Each Disbursement this Period 3300.27 Transaction ID : SB17-EX12952
City Glen Allen	State VA	
Zip Code 25060	Purpose of Disbursement Administrative/Salary/Overhead Expenses	[MEMO ITEM] Withholding Taxes
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. LovasCo LLC</b>		Date of Disbursement MM / DD / YYYY 04 / 11 / 2013
Mailing Address 6740 W Deer Valley Rd Ste D-107		Amount of Each Disbursement this Period 2735.00 Transaction ID : SB17-EX12655
City Glendale	State AZ	
Zip Code 85310	Purpose of Disbursement Fundraising Commission	Fundraising Commission
Candidate Name	003 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....

2735.00

TOTAL This Period (last page this line number only).....

13020280318

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 319 OF 323

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. LovasCo LLC**

Date of Disbursement

M M / D D / Y Y Y Y  
04 / 15 / 2013

Mailing Address 6740 W Deer Valley Rd  
Ste D-107

Amount of Each Disbursement this Period

500.00

City State Zip Code  
Glendale AZ 85310

Purpose of Disbursement  
Fundraising Commission

003

Transaction ID : SB17-EX12658

Candidate Name

Category/  
Type

Fundraising Commission

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Full Name (Last, First, Middle Initial)

**B. The Laymont Group**

Date of Disbursement

M M / D D / Y Y Y Y  
04 / 15 / 2013

Mailing Address 201 I St NE #917

Amount of Each Disbursement this Period

2500.00

City State Zip Code  
Washington DC 20002

Purpose of Disbursement  
Fundraising Retainer

003

Transaction ID : SB17-EX12660

Candidate Name

Category/  
Type

Fundraising Retainer

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Full Name (Last, First, Middle Initial)

**C. Alphagraphics**

Date of Disbursement

M M / D D / Y Y Y Y  
04 / 18 / 2013

Mailing Address 3700 Osuna Rd NE  
Ste 515

Amount of Each Disbursement this Period

234.87

City State Zip Code  
Albuquerque NM 87109

Purpose of Disbursement  
Invitation Printing

003

Transaction ID : SB17-EX12665

Candidate Name

Category/  
Type

Invitation Printing

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....

3234.87

**TOTAL** This Period (last page this line number only).....

13020280319

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Cole Chevrolet Cadillac Inc.**

Date of Disbursement

M M / D D / Y Y Y Y  
04 / 11 / 2013

Mailing Address PO Box 688

Amount of Each Disbursement this Period

City State Zip Code  
Bluefield WV 24701

37250.50

Purpose of Disbursement  
Campaign Vehicle Purchase

001

Transaction ID : SB17-EX12667

Candidate Name

Category/  
Type

Campaign Vehicle Purchase

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Full Name (Last, First, Middle Initial)

**B. Vineyard Vines**

Date of Disbursement

M M / D D / Y Y Y Y  
05 / 01 / 2013

Mailing Address 37 Brown House Rd

Amount of Each Disbursement this Period

City State Zip Code  
Stamford CT 06902

250.00

Purpose of Disbursement  
Campaign Neck Ties

006

Transaction ID : SB17-EX12715

Candidate Name

Category/  
Type

Campaign Neck Ties

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Full Name (Last, First, Middle Initial)

**C. Vineyard Vines**

Date of Disbursement

M M / D D / Y Y Y Y  
05 / 31 / 2013

Mailing Address 37 Brown House Rd

Amount of Each Disbursement this Period

City State Zip Code  
Stamford CT 06902

2350.00

Purpose of Disbursement  
Campaign Neck Ties

006

Transaction ID : SB17-EX12794

Candidate Name

Category/  
Type

Campaign Neck Ties

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

SUBTOTAL of Disbursements This Page (optional).....

39850.50

TOTAL This Period (last page this line number only).....

13020280320



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 321 OF 323

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Vineyard Vines</b>		Date of Disbursement MM / DD / YYYY 06 / 03 / 2013	
Mailing Address 37 Brown House Rd		Amount of Each Disbursement this Period 3015.00 Transaction ID : SB17-EX12848	
City Stamford	State CT		Zip Code 06902
Purpose of Disbursement T-Shirts	Category/ Type 006		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State:	District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	

Full Name (Last, First, Middle Initial) <b>B. Hammerstone</b>		Date of Disbursement MM / DD / YYYY 05 / 06 / 2013	
Mailing Address 1701 Pennsylvania Ave NW Ste 300		Amount of Each Disbursement this Period 1695.00 Transaction ID : SB17-EX12732	
City Washington	State DC		Zip Code 20006
Purpose of Disbursement Lapel Pins	Category/ Type 006		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State:	District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	

Full Name (Last, First, Middle Initial) <b>C. Cincinnati Insurance Co</b>		Date of Disbursement MM / DD / YYYY 05 / 15 / 2013	
Mailing Address PO Box 145620		Amount of Each Disbursement this Period 3018.00 Transaction ID : SB17-EX12746	
City Cincinnati	State OH		Zip Code 45250
Purpose of Disbursement Insurance Payment	Category/ Type 001		
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State:	District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	

**SUBTOTAL** of Disbursements This Page (optional).....  
**TOTAL** This Period (last page this line number only).....

7728.00

13020280321

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Rebecca Trump</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 14 / 2013	
Mailing Address 20007 Silverbell Drive		Amount of Each Disbursement this Period 47.06	
City Morgantown	State WV	Zip Code 26505	Transaction ID : SB17-EX12798
Purpose of Disbursement Mileage Reimbursement		Category/Type 002	
Candidate Name		Mileage Reimbursement	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State: District:			
Full Name (Last, First, Middle Initial) <b>B. Rebecca Trump</b>		Date of Disbursement M M / D D / Y Y Y Y 06 / 18 / 2013	
Mailing Address 20007 Silverbell Drive		Amount of Each Disbursement this Period 26.57	
City Morgantown	State WV	Zip Code 26505	Transaction ID : SB17-EX12800
Purpose of Disbursement Mileage Reimbursement		Category/Type 002	
Candidate Name		Mileage Reimbursement	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State: District:			
Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement M M / D D / Y Y Y Y	
Mailing Address		Amount of Each Disbursement this Period	
City	State	Zip Code	
Purpose of Disbursement		Category/Type	
Candidate Name		Mileage Reimbursement	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			
SUBTOTAL of Disbursements This Page (optional).....		73.63	
TOTAL This Period (last page this line number only).....		259844.78	

13020280322

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Mr. Douglas Dziak</b>		Date of Disbursement MM / DD / YYYY 06 / 17 / 2013
Mailing Address 2828 21st Rd S		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : SB20a-CR39</b>
City Arlington	State VA	
Zip Code 22204	Purpose of Disbursement Contribution Ref to Individual	Refund of 05/13/13 Contribution
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Mr. Douglas Dziak</b>		Date of Disbursement MM / DD / YYYY 06 / 24 / 2013
Mailing Address 2828 21st Rd S		Amount of Each Disbursement this Period 250.00 <b>Transaction ID : SB20a-CR41</b>
City Arlington	State VA	
Zip Code 22204	Purpose of Disbursement Contribution Ref to Individual	Refund o 06/18/13 Contribution
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	500.00
<b>TOTAL</b> This Period (last page this line number only).....	500.00

13020280323

NANCY ERICKSON  
SECRETARY

DANA K. MCCALLUM  
SUPERINTENDENT

HART SENATE OFFICE BUILDING  
SUITE 232  
WASHINGTON, DC 20510-7116  
PHONE: (202) 224-0322

# United States Senate

OFFICE OF THE SECRETARY  
OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED 7-15-13  
Date of Receipt

USPS FIRST CLASS MAIL \_\_\_\_\_  
Postmark

USPS REGISTERED/CERTIFIED \_\_\_\_\_  
Postmark

USPS PRIORITY MAIL \_\_\_\_\_  
Postmark  
DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL \_\_\_\_\_  
Postmark

### OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION \_\_\_\_\_  
Date of Receipt

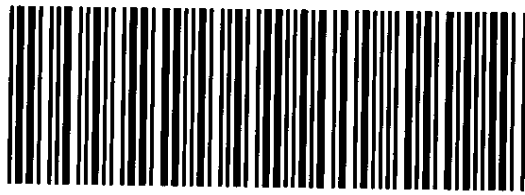
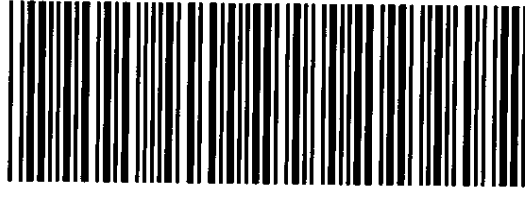
POSTMARK ILLEGIBLE  NO POSTMARK

FAX \_\_\_\_\_  
Date of Receipt

OTHER \_\_\_\_\_  
Date of Receipt or Postmark

PREPARER DH DATE PREPARED 7-15-13

13020280324



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