

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
West Virginia Republican Party, Inc.

ADDRESS (number and street) 5 Greenbrier St
 Check if different than previously reported. (ACC)
Charleston WV 25311

2. **FEC IDENTIFICATION NUMBER** C00417063
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 12 01 2009 through 12 31 2009

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 Gregory M. Smith

Signature of Treasurer Electronically Filed by Gregory M. Smith Date 01 31 2010

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							
-----------------	--	--	--	--	--	--	--

FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
West Virginia Republican Party, Inc.

Report Covering the Period: From:

M	M
1	2

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		18880.78
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	12276.57									
(c) Total Receipts (from Line 19)	10724.00	153296.04								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	23000.57	172176.82								
7. Total Disbursements (from Line 31)	15492.64	164668.89								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	7507.93	7507.93								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	39927.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

West Virginia Republican Party, Inc.

Report Covering the Period: From:

M	M
1	2

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	6745.00	88031.26
(ii) Unitemized	3979.00	55012.78
(iii) TOTAL (add Lines 11(a)(i) and (ii)	10724.00	143044.04
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	9452.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	10724.00	152496.04
12. Transfers From Affiliated/Other Party Committees	0.00	800.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	10724.00	153296.04
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	10724.00	153296.04

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	15492.64	164668.89
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	15492.64	164668.89
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	15492.64	164668.89
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15492.64	164668.89

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 28

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	10724.00	152496.04
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10724.00	152496.04
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	15492.64	164668.89
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	15492.64	164668.89

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 28
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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)
West Virginia Republican Party, Inc.

A. Full Name (Last, First, Middle Initial)
Melody L. Potter

Mailing Address 105 Newcomer Road

City State Zip Code
Charleston WV 25309-8544

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

Name of Employer: Tri-Star Coal Sales Company, Inc. Occupation: Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1135.00

Date of Receipt: 12 / 01 / 2009
Transaction ID: AE427F0E66CB8487CBF6
Amount of Each Receipt this Period: 50.00

B. Full Name (Last, First, Middle Initial)
Mrs. Barbara B. Glover

Mailing Address 5 Maple Avenue

City State Zip Code
Morgantown WV 26501-6542

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

Name of Employer: N/a Occupation: Homemaker

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 12 / 04 / 2009
Transaction ID: A8BF800BDC5E5447885D
Amount of Each Receipt this Period: 100.00

C. Full Name (Last, First, Middle Initial)
Gregory M. Smith

Mailing Address 600 55th. St.

City State Zip Code
Vienna WV 26105-3218

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

Name of Employer: Retired Occupation: Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1325.00

Date of Receipt: 12 / 07 / 2009
Transaction ID: A9FC07D119DD54FE6B5E
Amount of Each Receipt this Period: 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 250.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 28
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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)
West Virginia Republican Party, Inc.

A.	Full Name (Last, First, Middle Initial) Gregory M. Smith		Date of Receipt MM / DD / YYYY 12 / 08 / 2009		
	Mailing Address 600 55th. St.		Transaction ID: A76EB3C9FC70D45FC86A		
	City Vienna	State WV	Zip Code 26105-3218	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired	Occupation Retired			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1425.00			

B.	Full Name (Last, First, Middle Initial) Diane Shafer		Date of Receipt MM / DD / YYYY 12 / 08 / 2009		
	Mailing Address Box 749		Transaction ID: A4874CCD6C7CC4683923		
	City Shady Spring	State WV	Zip Code 25918-0749	Amount of Each Receipt this Period 4000.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Self	Occupation Orthopedic Surgeon			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 7000.00			

C.	Full Name (Last, First, Middle Initial) Mr. Robert E. Miller, Jr.		Date of Receipt MM / DD / YYYY 12 / 08 / 2009		
	Mailing Address P.O. Box 52		Transaction ID: A2D795158811A42CBB89		
	City Lost City	State WV	Zip Code 26810-0052	Amount of Each Receipt this Period 200.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer	Occupation			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00			

SUBTOTAL of Receipts This Page (optional)	▶	4300.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 28
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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)
West Virginia Republican Party, Inc.

A. Full Name (Last, First, Middle Initial)
Mrs. Judith A. Guye

Mailing Address 107 Sylvester Drive

City Elkins State WV Zip Code 26241-3461

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt M M / D D / Y Y Y Y
1 2 / 0 8 / 2 0 0 9

Transaction ID: A2ACB4C45E7104E74946

Amount of Each Receipt this Period 25.00

B. Full Name (Last, First, Middle Initial)
Gary Howell

Mailing Address P o Box 39

City Keyser State WV Zip Code 26726-0039

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation Business Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 288.78

Date of Receipt M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: AD3B8D83B66EA4D078C7

Amount of Each Receipt this Period 20.00

C. Full Name (Last, First, Middle Initial)
Barbara H Tuckwiller

Mailing Address 2245 Blue Sulphur Pike

City Lewisburg State WV Zip Code 24901-9376

FEC ID number of contributing federal political committee. C

Name of Employer Self Occupation farmer/vintner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1470.00

Date of Receipt M M / D D / Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: A7592E23B1E474DF6B02

Amount of Each Receipt this Period 250.00

In-kind: Wine for Christmas Reception

SUBTOTAL of Receipts This Page (optional) 295.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 28
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
West Virginia Republican Party, Inc.

A. Full Name (Last, First, Middle Initial)
Mr. Lewis H Rexroad

Mailing Address 87 Gihon Meadows Drive, Apt. 126

City Parkersburg State WV Zip Code 26101-7716

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

Name of Employer UPS Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1655.00

Date of Receipt: 12 / 10 / 2009
Transaction ID: A06D08DB843AC4339BCC
Amount of Each Receipt this Period: 100.00

B. Full Name (Last, First, Middle Initial)
Zane Lawhorn

Mailing Address 1043 Stafford Dr

City Princeton State WV Zip Code 24740-2409

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

Name of Employer Self Occupation Optometrist

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5790.00

Date of Receipt: 12 / 10 / 2009
Transaction ID: A1B7165A795C443C5994
Amount of Each Receipt this Period: 40.00

C. Full Name (Last, First, Middle Initial)
David C. Sypolt

Mailing Address Post Office Box 5

City Kingwood State WV Zip Code 26537-0005

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

Name of Employer State of WV Occupation Senator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 330.00

Date of Receipt: 12 / 10 / 2009
Transaction ID: A9D52BAD54DA74919B9F
Amount of Each Receipt this Period: 20.00

SUBTOTAL of Receipts This Page (optional) ► 160.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 28

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
West Virginia Republican Party, Inc.

A.

Full Name (Last, First, Middle Initial)
Craig P Blair

Mailing Address 47 Wasser Drive

City State Zip Code
Martinsburg WV 25403-0885

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

Name of Employer Occupation
Sunset Water, Inc. self

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2285.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 1 0 / 2 0 0 9

Transaction ID: A6BFF2BC295B34637B1B

Amount of Each Receipt this Period
20.00

B.

Full Name (Last, First, Middle Initial)
Romey L. Nelson

Mailing Address 6980 Lick Creek Rd

City State Zip Code
Danville WV 25053-7050

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

Name of Employer Occupation
Retired Retired

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 0 / 2 0 0 9

Transaction ID: A320459F55BB841E5A38

Amount of Each Receipt this Period
50.00

C.

Full Name (Last, First, Middle Initial)
Lawrence Lyon

Mailing Address 114 Center St

City State Zip Code
Madison WV 25130-1210

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

Name of Employer Occupation
Lyon Oil Company Owner

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 730.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 0 / 2 0 0 9

Transaction ID: ADADC7CD77F1C46EBB19

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ▶

370.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 28
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
West Virginia Republican Party, Inc.

A.

Full Name (Last, First, Middle Initial)
Gary Madrid

Mailing Address 32 Garvins Ln

City State Zip Code
Wheeling WV 26003-1212

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

Name of Employer CSE Corporation Occupation Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
12 / 28 / 2009

Transaction ID: A27AFF81D33E149478F5

Amount of Each Receipt this Period
100.00

B.

Full Name (Last, First, Middle Initial)
David B McKinley

Mailing Address 23 Stamm Lane

City State Zip Code
Wheeling WV 26003-5542

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

Name of Employer McKinley & Associates Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
12 / 29 / 2009

Transaction ID: AB069976DA6184763A4B

Amount of Each Receipt this Period
1000.00

C.

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

Mailing Address 238 Bartow Drive

City State Zip Code
Barboursville WV 25504-1126

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

Name of Employer Cabell Huntington Hospital Occupation CRNA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
MM / DD / YYYY
12 / 30 / 2009

Transaction ID: A483CC39F4FE643AE943

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional) ► **1150.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 28
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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)
West Virginia Republican Party, Inc.

A.	Full Name (Last, First, Middle Initial) Mr. Jackson L. Smith		Date of Receipt
	Mailing Address P.O. Box 457		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Lost Creek	WV	26385-0457
	FEC ID number of contributing federal political committee.	<input type="text"/> C <input type="text"/>	Transaction ID: AF369FC3AC79142F2987
Name of Employer Self		Occupation N/a	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 25.00
		<input type="text"/> 590.00	

B.	Full Name (Last, First, Middle Initial) Jonathan Ryan Miller		Date of Receipt
	Mailing Address 134 Whitman Lane		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Inwood	WV	25428-4087
	FEC ID number of contributing federal political committee.	<input type="text"/> C <input type="text"/>	Transaction ID: A712E72329FE84513908
Name of Employer Lincoln Mortgage, LLC		Occupation Mortgage Broker	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 10.00
		<input type="text"/> 240.00	

C.	Full Name (Last, First, Middle Initial) Max W Grove		Date of Receipt
	Mailing Address 522 River Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Belington	WV	26250-9403
	FEC ID number of contributing federal political committee.	<input type="text"/> C <input type="text"/>	Transaction ID: AE98525E327D5413888E
Name of Employer Retired		Occupation N/a	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 10.00
		<input type="text"/> 245.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 45.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 28
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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)
West Virginia Republican Party, Inc.

A.

Full Name (Last, First, Middle Initial)
Mr. Lewis H Rexroad

Mailing Address 87 Gihon Meadows Drive, Apt. 126

City Parkersburg State WV Zip Code 26101-7716

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

Name of Employer UPS Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1680.00

Date of Receipt 12 / 30 / 2009
Transaction ID: A21704743F07C41AA9CF

Amount of Each Receipt this Period 25.00

B.

Full Name (Last, First, Middle Initial)
Rosanne Shupe

Mailing Address PO Box 279

City Maxwelton State WV Zip Code 24957-0279

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

Name of Employer N/a Occupation Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt 12 / 30 / 2009
Transaction ID: A3507191303EC4208B16

Amount of Each Receipt this Period 25.00

C.

Full Name (Last, First, Middle Initial)
Ms. Maxine G. Olson

Mailing Address 441 High Street

City Jane Lew State WV Zip Code 26378-7948

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

Name of Employer Town of Jane Lew Occupation Dance Teacher

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt 12 / 30 / 2009
Transaction ID: AF1FC0DC8BAA64BC3BCD

Amount of Each Receipt this Period 25.00

SUBTOTAL of Receipts This Page (optional) ▶ 75.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 14 / 28	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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)
West Virginia Republican Party, Inc.

A.	Full Name (Last, First, Middle Initial) Dr. Douglas E. McKinney		Date of Receipt																					
	Mailing Address 636 Rivendell Drive		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	0		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2		3	0		2	0	0	9														
	City	State	Zip Code	Transaction ID: A2844CD288087490ABFA																				
	Bridgeport	WV	26330-1358	Amount of Each Receipt this Period																				
FEC ID number of contributing federal political committee.	C		100.00																					
Name of Employer Va Medical Center	Occupation M.D.																							
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼		7635.94																					

SUBTOTAL of Receipts This Page (optional)	▶	100.00
TOTAL This Period (last page this line number only)	▶	6745.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
West Virginia Republican Party, Inc.

<p>A. Full Name (Last, First, Middle Initial) Barbara H Tuckwiller</p> <p>Mailing Address 2245 Blue Sulphur Pike</p> <p>City Lewisburg State WV Zip Code 24901-9376</p> <p>Purpose of Disbursement In-kind: Wine for Christmas Reception</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B7592E23B1E474DF6B02</p> <p>Date of Disbursement 12 / 10 / 2009</p> <p>Amount of Each Disbursement this Period 250.00</p>
<p>B. Full Name (Last, First, Middle Initial) Aristotle International</p> <p>Mailing Address 205 Pennsylvania Ave</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement data conversion / database system</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B1EF84E04CEDA413D85D</p> <p>Date of Disbursement 12 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 4200.00</p>
<p>C. Full Name (Last, First, Middle Initial) Cheryl Rust</p> <p>Mailing Address Rt 1, Box 375</p> <p>City Buffalo State WV Zip Code 25033-9766</p> <p>Purpose of Disbursement office manager</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B1A2A0EB6B5604DDEAF8</p> <p>Date of Disbursement 12 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4950.00

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

PAGE 16 / 28

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
West Virginia Republican Party, Inc.

A. Full Name (Last, First, Middle Initial) Troy A. Berman <hr/> Mailing Address 11 Greenbrier St <hr/> City Charleston State WV Zip Code 25311-2112 <hr/> Purpose of Disbursement consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B6A704F5353064A18ABE Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 9
	Amount of Each Disbursement this Period 1666.66
	Category/Type
	State: District:
B. Full Name (Last, First, Middle Initial) Appalachian Electric Power <hr/> Mailing Address PO Box 24413 <hr/> City Canton State OH Zip Code 44701 <hr/> Purpose of Disbursement utilities - electric Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BACA0C71DB2F24AE783F Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 9
	Amount of Each Disbursement this Period 100.67
	Category/Type
	State: District:
C. Full Name (Last, First, Middle Initial) West Virginia American Water <hr/> Mailing Address PO Box 70824 <hr/> City Charlotte State NC Zip Code 28272 <hr/> Purpose of Disbursement utilities - water Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B0D051664128B49498ED Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 9
	Amount of Each Disbursement this Period 22.08
	Category/Type
	State: District:

SUBTOTAL of Disbursements This Page (optional) ▶	1789.41
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 17 / 28

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
West Virginia Republican Party, Inc.

A. Full Name (Last, First, Middle Initial) FLS Connect, LLC <hr/> Mailing Address 7300 Hudson Blvd, Suite 270 <hr/> City Saint Paul State MN Zip Code 55128 <hr/> Purpose of Disbursement phone calls Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B0625836CE73945BC87B Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 9
	Amount of Each Disbursement this Period 351.06
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) FLS Connect, LLC <hr/> Mailing Address 7300 Hudson Blvd, Suite 270 <hr/> City Saint Paul State MN Zip Code 55128 <hr/> Purpose of Disbursement fundraising Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B9567172173254C7FBB4 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 9
	Amount of Each Disbursement this Period 2921.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Officemax <hr/> Mailing Address 228 RLH Blvd <hr/> City Charleston State WV Zip Code 25309 <hr/> Purpose of Disbursement Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BCB69A6638EE94F30A6D Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 9
	Amount of Each Disbursement this Period 741.99
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ►

4014.05

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 18 / 28

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
West Virginia Republican Party, Inc.

A.	Full Name (Last, First, Middle Initial) Cheryl Rust	Transaction ID: BF1AB837314CF4D1F8A0
	Mailing Address Rt 1, Box 375	Date of Disbursement MM / DD / YYYY 12 / 15 / 2009
	City Buffalo State WV Zip Code 25033-9766	Amount of Each Disbursement this Period 16.80
	Purpose of Disbursement expenses	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Cheryl Rust	Transaction ID: B9EEDEBED33AA4784AF4
	Mailing Address Rt 1, Box 375	Date of Disbursement MM / DD / YYYY 12 / 15 / 2009
	City Buffalo State WV Zip Code 25033-9766	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement consulting	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Troy A. Berman	Transaction ID: B4857A4D50429452C822
	Mailing Address 11 Greenbrier St	Date of Disbursement MM / DD / YYYY 12 / 16 / 2009
	City Charleston State WV Zip Code 25311-2112	Amount of Each Disbursement this Period 1666.66
	Purpose of Disbursement consulting	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2183.46
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 19 / 28

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
West Virginia Republican Party, Inc.

A.	Full Name (Last, First, Middle Initial) FLS Connect, LLC	Transaction ID: BBE9E0731CAD04C81BDB
	Mailing Address 7300 Hudson Blvd, Suite 270	Date of Disbursement MM / DD / YYYY 12 / 16 / 2009
	City Saint Paul State MN Zip Code 55128	Amount of Each Disbursement this Period 807.50
	Purpose of Disbursement fundraising Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type
B.	Full Name (Last, First, Middle Initial) Fibernet	Transaction ID: B7EACDD92E69F4A6BB77
	Mailing Address PO Box 2021	Date of Disbursement MM / DD / YYYY 12 / 16 / 2009
	City Mechanicsburg State PA Zip Code 17055	Amount of Each Disbursement this Period 606.75
	Purpose of Disbursement utilities - phone/internet Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type
C.	Full Name (Last, First, Middle Initial) Mountaineer Gas	Transaction ID: B4B47081916A54F55B8C
	Mailing Address PO Box 362	Date of Disbursement MM / DD / YYYY 12 / 16 / 2009
	City Charleston State WV Zip Code 25322	Amount of Each Disbursement this Period 157.78
	Purpose of Disbursement utilities - gas Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional)	1572.03
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

PAGE 20 / 28

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
West Virginia Republican Party, Inc.

<p>A. Full Name (Last, First, Middle Initial) FLS Connect, LLC</p> <p>Mailing Address 7300 Hudson Blvd, Suite 270</p> <p>City Saint Paul State MN Zip Code 55128</p> <p>Purpose of Disbursement data services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B419033FE23684ABE9A6</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="159.59"/></p>
<p>B. Full Name (Last, First, Middle Initial) Aristotle International</p> <p>Mailing Address 205 Pennsylvania Ave</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement credit card processing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BD6CCE147DFA94710A61</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="36.50"/></p>
<p>C. Full Name (Last, First, Middle Initial) Troy A. Berman</p> <p>Mailing Address 11 Greenbrier St</p> <p>City Charleston State WV Zip Code 25311-2112</p> <p>Purpose of Disbursement expense reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B70BAF460CB084124BD2</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="587.60"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="783.69"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

PAGE 21 / 28

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)
West Virginia Republican Party, Inc.

A. Full Name (Last, First, Middle Initial) Troy A. Berman <hr/> Mailing Address 11 Greenbrier St <hr/> City Charleston State WV Zip Code 25311-2112 <hr/> Purpose of Disbursement mileage Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BF565680E3F074C7FB3F Date of Disbursement 12 / 05 / 2009
	Amount of Each Disbursement this Period 140.25 [MEMO ITEM]
B. Full Name (Last, First, Middle Initial) Vistaprint <hr/> Mailing Address 95 Hayden Ave <hr/> City Lexington State MA Zip Code 02421 <hr/> Purpose of Disbursement printing/design Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BD9AF57964FBF49D5BDE Date of Disbursement 12 / 05 / 2009
	Amount of Each Disbursement this Period 245.83 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	15292.64

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
West Virginia Republican Party, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Cellular One/ A R Systems			Nature of Debt (Purpose): Cell Phone Bill from 4/1-05
Mailing Address P.O. Box 80766			
City Valley Forge	State PA	ZIP Code 19484	

Outstanding Balance Beginning This Period		Transaction ID: DC3068D8514F8455BB69	
1057.45			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	1057.45	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Strategic Telecommunications			Nature of Debt (Purpose): Interest on Strategic Fundraising
Mailing Address 7591 9th Street North			
City Oakdale	State MN	ZIP Code 55128	

Outstanding Balance Beginning This Period		Transaction ID: D869D6D1194434CB9B41	
1639.49			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	1639.49	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Christine Mcnalley			Nature of Debt (Purpose): election contract consulting-from 4/1/05
Mailing Address 44 Regent Court			
City Swansea	State MA	ZIP Code 02777	

Outstanding Balance Beginning This Period		Transaction ID: D25462FEAC2224BFE9E5	
2400.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	2400.00	

1) SUBTOTALS This Period This Page (optional).....	▶	5096.94
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
West Virginia Republican Party, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Regional Distributing Center			Nature of Debt (Purpose): Toner and cartridge from 4/1/05
Mailing Address 872 S. Milwaukee Avenue #293			
City Libertyville	State IL	ZIP Code 60048	

Outstanding Balance Beginning This Period <input type="text" value="369.85"/>		Transaction ID: D0E587ECFD6C840AE9DC	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="369.85"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Tiffany Gibson			Nature of Debt (Purpose): Contract labor and expenses from 10/30/04
Mailing Address P.O. Box 425			
City Parkersburg	State WV	ZIP Code 26101	

Outstanding Balance Beginning This Period <input type="text" value="1030.95"/>		Transaction ID: D88348031D76B4F6E893	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1030.95"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Bjw Printing & Office Supplies			Nature of Debt (Purpose): printing from 11/19/04
Mailing Address 3100 Robert Byrd Drive			
City Beckley	State WV	ZIP Code 25802	

Outstanding Balance Beginning This Period <input type="text" value="337.62"/>		Transaction ID: D4EF771A3F5514E9D9BD	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="337.62"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="1738.42"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
West Virginia Republican Party, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Bjw Printing & Office Supplies	Nature of Debt (Purpose): Interest
Mailing Address 3100 Robert Byrd Drive	
City State ZIP Code Beckley WV 25802	

Outstanding Balance Beginning This Period 291.15	Transaction ID: D6825545A7104462E97A	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 291.15

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Time Warner Cable	Nature of Debt (Purpose): Victory Field Office cable bill from 4/05
Mailing Address P.O Box 580485	
City State ZIP Code Charlotte NC 28258	

Outstanding Balance Beginning This Period 135.00	Transaction ID: D7704A876900941CB963	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 135.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Feather Larson Synhorst-dci	Nature of Debt (Purpose): fundraising calls from 10- /31/2004
Mailing Address 7320 N Dreamy Draw Drive	
City State ZIP Code Phoenix AZ 85020	

Outstanding Balance Beginning This Period 7119.20	Transaction ID: D6F78C6722F78438A82C	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 7119.20

1) SUBTOTALS This Period This Page (optional).....	7545.35
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
West Virginia Republican Party, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Fibernet-charleston			Nature of Debt (Purpose): Victory Field Office Phone Acct.26417
Mailing Address 211 Leon Sullivan Way			
City	State	ZIP Code	
Charleston	WV	25301	

Outstanding Balance Beginning This Period		Transaction ID: D8F0AC59401D741A28E3	
872.87			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	872.87	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Fibernet-charleston			Nature of Debt (Purpose): Phones for 110 Capitol St. Office
Mailing Address 211 Leon Sullivan Way			
City	State	ZIP Code	
Charleston	WV	25301	

Outstanding Balance Beginning This Period		Transaction ID: D3B3C0EDD479D432D978	
1744.90			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	1744.90	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Komax Business Systems			Nature of Debt (Purpose): copier service and parts past due 10/04
Mailing Address 500 D Street			
City	State	ZIP Code	
South Charleston	WV	25303	

Outstanding Balance Beginning This Period		Transaction ID: D0C9639D782124A75ADA	
1960.01			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	1960.01	

1) SUBTOTALS This Period This Page (optional).....	▶	4577.78
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
West Virginia Republican Party, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Komax Business Systems			Nature of Debt (Purpose): Incorrect Debt Previously Reported 7/05
Mailing Address 500 D Street			
City	State	ZIP Code	
South Charleston	WV	25303	

Outstanding Balance Beginning This Period		Transaction ID: D316A8B6DC2754ADFBC9	
1.95			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	1.95	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Tcs Technology Service			Nature of Debt (Purpose): Computer Rental from 10/3-0/2004
Mailing Address 4430 Kanawha Turnpike Suite B			
City	State	ZIP Code	
South Charleston	WV	25309	

Outstanding Balance Beginning This Period		Transaction ID: D9D2104C1A2E94DB3940	
927.31			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	927.31	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Tcs Technology Service			Nature of Debt (Purpose): Computer Rental from 9/30-/2004
Mailing Address 4430 Kanawha Turnpike Suite B			
City	State	ZIP Code	
South Charleston	WV	25309	

Outstanding Balance Beginning This Period		Transaction ID: DB43F53E3F16E430DB25	
506.32			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	506.32	

1) SUBTOTALS This Period This Page (optional).....	▶	1435.58
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
West Virginia Republican Party, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Strategic Fundraising	Nature of Debt (Purpose): fundraising services from 11/15/04
Mailing Address 7591 9th Street North	
City State ZIP Code Oakdale MN 55128	

Outstanding Balance Beginning This Period 5411.86	Transaction ID: DD238924E343448EC960	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5411.86

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Strategic Fundraising	Nature of Debt (Purpose): Interest from 7/31/05
Mailing Address 7591 9th Street North	
City State ZIP Code Oakdale MN 55128	

Outstanding Balance Beginning This Period 135.77	Transaction ID: D8DB931917DAA4E53924	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 135.77

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Strategic Fundraising	Nature of Debt (Purpose): interest per Statement Summary today 1/08
Mailing Address 7591 9th Street North	
City State ZIP Code Oakdale MN 55128	

Outstanding Balance Beginning This Period 689.32	Transaction ID: DC7D28A2143CB4F51AB5	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 689.32

1) SUBTOTALS This Period This Page (optional).....	▶	6236.95
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
West Virginia Republican Party, Inc.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Dennie Data Comm			Nature of Debt (Purpose): past due bill from 10/30/-04
Mailing Address 1339 Smith Street			
City Charleston	State WV	ZIP Code 25301	

Outstanding Balance Beginning This Period <input type="text" value="428.32"/>		Transaction ID: D24FCCC3C7843427C8F7	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="428.32"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Alltell			Nature of Debt (Purpose): Victory Cell Bill from 4/-1/05
Mailing Address Bldg. 4 2nd Floor			
City Little Rock	State AR	ZIP Code 72202	

Outstanding Balance Beginning This Period <input type="text" value="8653.10"/>		Transaction ID: D5F118EE3E608403BB7E	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="8653.10"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ac Express, Inc.			Nature of Debt (Purpose): Travel expense for speaker for conventio
Mailing Address 1150 Airport Road			
City Fairmont	State WV	ZIP Code 26554	

Outstanding Balance Beginning This Period <input type="text" value="4214.56"/>		Transaction ID: DD7A1B8D4F58A4BE3ACB	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="4214.56"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="13295.98"/>
2) TOTALS This Period (last page this line number only).....	<input type="text" value="39927.00"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text" value="39927.00"/>