

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED  
SECRETARY OF THE SENATE  
PUBLIC RECORDS

14 JAN 30 AM 11 59  
Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

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

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

WV

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 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

MM/DD/YYYY 10/01/2013

through

MM/DD/YYYY 12/31/2013

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 Mr. Reed Spangler *Reed Spangler*

Date 01/31/2014

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 3  
(Revised 02/2003)

14020022068

**SUMMARY PAGE**

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 2 / 431

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

Report Covering the Period: From:

M M / D D / Y Y Y Y  
 10 01 2013

To:

M M / D D / Y Y Y Y  
 12 31 2013

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	818566.35	3296472.92
(b) Total Contribution Refunds (from Line 20(d)) .....	145	5045
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	818421.35	3291427.92
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) .....	361099.06	1211694.16
(b) Total Offsets to Operating Expenditures (from Line 14).....	523.05	5379.6
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	360576.01	1206314.56
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	3725355.91	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>		
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) .....</b>		

**For further information contact:**

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

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

14020022069

**DETAILED SUMMARY PAGE  
of Receipts**

FEC Form 3 (Revised 12/2003)

PAGE 3 / 431

Write or Type Committee Name

Capito For West Virginia

Report Covering the Period: From: 

M	M	/	D	D	/	Y	Y	Y	Y
10		/	01		/	2013			

To: 

M	M	/	D	D	/	Y	Y	Y	Y
12		/	31		/	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).....	562889.88	2141374.88
(ii) Unitemized.....	47976.47	144650.04
(iii) TOTAL of contributions from individuals ▶	610866.35	2286024.92
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....	207700	1010448
(d) The Candidate.....		
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	818566.35	3296472.92
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	<b>10662.26</b>	<b>1639612.13</b>
<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>	<b>523.05</b>	<b>5379.6</b>
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	<b>147.91</b>	<b>630.42</b>
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	<b>829899.57</b>	<b>4942095.07</b>

14020022070

**II. DISBURSEMENTS**

**COLUMN A  
Total This Period**

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

17. OPERATING EXPENDITURES.....	361099.06	1211694.16
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.....	145	2545
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		2500
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	145	5045
21. OTHER DISBURSEMENTS.....		
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	<b>361244.06</b>	<b>1216739.16</b>

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	3256700.4
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	829899.57
25. SUBTOTAL (add Line 23 and Line 24).....	4086599.97
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	361244.06
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	3725355.91

14020022071

**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 5 OF 431	
	<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>Renee Adair Development Co LLC</b>		Date of Receipt M M / D D / Y Y Y Y 12 31 2013
Mailing Address 730 River Run Road		<b>Transaction ID : SA11Ai-CN39247</b>
City Fairmont	State WV	
Zip Code 26554		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	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>Mr. Ernest Van Gildi</b>		Date of Receipt M M / D D / Y Y Y Y 12 31 2013
Mailing Address 223 Eagle Run		<b>Transaction ID : SA11Ai-CN39296</b>
City Morgantown	State WV	
Zip Code 26508		Amount of Each Receipt this Period \$ 1000
FEC ID number of contributing federal political committee. C		Partnership-Renee Adair Development Co
Name of Employer Renee Adair Development CO LLC	Occupation Owner	<b>[MEMO ITEM]</b> \$1000.00 MEMO Partnership Attributed
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>Shamrock Advisors LLC</b>		Date of Receipt M M / D D / Y Y Y Y 12 04 2013
Mailing Address 3106 Russell Rd		<b>Transaction ID : SA11Ai-CN38339</b>
City Alexandria	State VA	
Zip Code 22305		Amount of Each Receipt this Period \$ 500
FEC ID number of contributing federal political committee. C		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 1000	

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

14020022072

**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 6 OF 431
	<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. Julie Conway**

Mailing Address 3106 Russell Rd

City State Zip Code  
Alexandria VA 22305

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

Name of Employer Occupation  
Shamrock Advisors President

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
MM / DD / YYYY  
12 / 04 / 2013

Transaction ID : SA11Ai-CN38340

Amount of Each Receipt this Period  
500  
Partnership-Shamrock Advisors LLC

**[MEMO ITEM]**  
\$500.00 MEMO Partnership Attributed

**B.** Full Name (Last, First, Middle Initial)  
**Thunderbird Industries**

Mailing Address PO Box 68

City State Zip Code  
Charleston WV 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  
500

Date of Receipt  
MM / DD / YYYY  
10 / 28 / 2013

Transaction ID : SA11Ai-CN37864

Amount of Each Receipt this Period  
500  
Partnership-Thunderbird Industries

**[MEMO ITEM]**  
\$500.00 MEMO Partnership Attributed

**C.** Full Name (Last, First, Middle Initial)  
**Robert MacDiarmid**

Mailing Address PO Box 68

City State Zip Code  
Charleston WV 25321

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

Name of Employer Occupation  
self-employed Sales

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
MM / DD / YYYY  
10 / 28 / 2013

Transaction ID : SA11Ai-CN39310

Amount of Each Receipt this Period  
500  
Partnership-Thunderbird Industries

**[MEMO ITEM]**  
\$500.00 MEMO Partnership Attributed

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

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

500.00

14020022073

**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 7 OF 431
	<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>Wiley Rein</b>		Date of Receipt MM / DD / YYYY 12 / 31 / 2013
Mailing Address 1776 K St NW		<b>Transaction ID : SA11Ai-CN39231</b>
City Washington	State DC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600
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 2600	

Full Name (Last, First, Middle Initial) <b>Mr. Andrew McBride</b>		Date of Receipt MM / DD / YYYY 12 / 31 / 2013
Mailing Address 1776 K St NW		<b>Transaction ID : SA11Ai-CN39297</b>
City Washington	State DC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200
Name of Employer Wiley Rein LLP	Occupation Partner	Partnership contribution-Wiley Rein
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 200	<b>[MEMO ITEM]</b> \$200.00 MEMO Partnership Attributed

Full Name (Last, First, Middle Initial) <b>Mr. Bruce McDonald</b>		Date of Receipt MM / DD / YYYY 12 / 31 / 2013
Mailing Address 1776 K St NW		<b>Transaction ID : SA11Ai-CN39298</b>
City Washington	State DC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200
Name of Employer Wiley Rein LLP	Occupation Partner	Partnership contribution-Wiley Rein
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 200	<b>[MEMO ITEM]</b> \$200.00 MEMO Partnership Attributed

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2600.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022074

**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 431
	<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. Thomas Navin</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 1776 K St NW		Transaction ID : SA11AI-CN39299
City Washington	State DC	Zip Code 20006
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200
Name of Employer Wiley Rein LLP	Occupation Partner	Partnership contribution-Wiley Rein
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 200	<b>[MEMO ITEM]</b> \$200.00 MEMO Partnership Attributed

Full Name (Last, First, Middle Initial) <b>Mr. Bert Rein</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 1776 K St NW		Transaction ID : SA11AI-CN39300
City Washington	State DC	Zip Code 20006
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200
Name of Employer Wiley Rein LLP	Occupation Partner	Partnership contribution-Wiley Rein
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 200	<b>[MEMO ITEM]</b> \$200.00 MEMO Partnership Attributed

Full Name (Last, First, Middle Initial) <b>Mr. Mark Renaud</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 1776 K St NW		Transaction ID : SA11AI-CN39301
City Washington	State DC	Zip Code 20006
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200
Name of Employer Wiley Rein LLP	Occupation Partner	Partnership contribution-Wiley Rein
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 200	<b>[MEMO ITEM]</b> \$200.00 MEMO Partnership Attributed

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022075



**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 431
	(check only one)	
	<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. William Roberts**

Mailing Address **1776 K St NW**

City **Washington** State **DC** Zip Code **20006**

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

Name of Employer **Wiley Rein LLP** Occupation **Partner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
M M / D D / Y Y Y Y  
**12 31 2013**

Transaction ID : **SA11AI-CN39302**

Amount of Each Receipt this Period  
**200**  
Partnership contribution-Wiley Rein

**[MEMO ITEM]**  
**\$200.00 MEMO Partnership Attributed**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Bennett Ross**

Mailing Address **1776 K St NW**

City **Washington** State **DC** Zip Code **20006**

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

Name of Employer **Wiley Rein LLP** Occupation **Partner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
M M / D D / Y Y Y Y  
**12 31 2013**

Transaction ID : **SA11AI-CN39303**

Amount of Each Receipt this Period  
**200**  
Partnership contribution-Wiley Rein

**[MEMO ITEM]**  
**\$200.00 MEMO Partnership Attributed**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. R. Michael Senkowski**

Mailing Address **Wiley Rein & Fielding**  
**1776 K St NW**

City **Washington** State **DC** Zip Code **20006**

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

Name of Employer **Wiley Rein & Fielding LLP** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
M M / D D / Y Y Y Y  
**12 31 2013**

Transaction ID : **SA11AI-CN39304**

Amount of Each Receipt this Period  
**200**  
Partnership contribution-Wiley Rein

**[MEMO ITEM]**  
**\$200.00 MEMO Partnership Attributed**

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

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

**0.00**

14020022076

**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 431	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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. Todd Stansbury</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 1776 K St NW		Transaction ID : SA11AI-CN39305
City Washington	State DC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200
Name of Employer Wiley Rein LLP	Occupation Partner	Partnership contribution-Wiley Rein
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 200	<b>[MEMO ITEM]</b> \$200.00 MEMO Partnership Attributed

Full Name (Last, First, Middle Initial) <b>Mr. Michael Toner</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 1776 K St NW		Transaction ID : SA11AI-CN39306
City Washington	State DC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200
Name of Employer Wiley Rein LLP	Occupation Partner	Partnership contribution-Wiley Rein
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 200	<b>[MEMO ITEM]</b> \$200.00 MEMO Partnership Attributed

Full Name (Last, First, Middle Initial) <b>Nancy Victory</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address Wiley Rein & Fielding 1776 K St NW		Transaction ID : SA11AI-CN39307
City Washington	State DC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200
Name of Employer Wiley Rein & Fielding LLP	Occupation Attorney	Partnership contribution-Wiley Rein
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 200	<b>[MEMO ITEM]</b> \$200.00 MEMO Partnership Attributed

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

14020022077

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

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

FOR LINE NUMBER: PAGE 11 OF 431  
(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)  
**James Wallace**

Mailing Address **Wiley Rein & Fielding**  
**1776 K St NW**

City **Washington** State **DC** Zip Code **20006**

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

Name of Employer **Wiley Rein & Fielding LLP** Occupation **Attorney**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**200**

Date of Receipt  
M M / D D / Y Y Y Y  
**12 31 2013**

Transaction ID : **SA11AI-CN39308**

Amount of Each Receipt this Period  
**200**  
Partnership contribution-Wiley Rein

**[MEMO ITEM]**  
**\$200.00 MEMO Partnership Attributed**

**B.** Full Name (Last, First, Middle Initial)  
**Richard Wiley**

Mailing Address **Wiley Rein & Fielding**  
**1776 K St NW**

City **Washington** State **DC** Zip Code **20006**

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

Name of Employer **Wiley Rein & Fielding LLP** Occupation **Attorney**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**200**

Date of Receipt  
M M / D D / Y Y Y Y  
**12 31 2013**

Transaction ID : **SA11AI-CN39309**

Amount of Each Receipt this Period  
**200**  
Partnership contribution-Wiley Rein

**[MEMO ITEM]**  
**\$200.00 MEMO Partnership Attributed**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Cathy C Adams**

Mailing Address **1195 Valley Reserve**

City **Kennesaw** State **GA** Zip Code **30152**

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

Name of Employer **FHL Bank** Occupation **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  
**12 12 2013**

Transaction ID : **SA11AI-CN38892**

Amount of Each Receipt this Period  
**500**

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

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

**500.00**

14020022078

**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 12 OF 431
	<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 E Adams**

Mailing Address **PO Box 252**

City **Barboursville** State **WV** Zip Code **25504**

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

Name of Employer **Adams Trucking & Supply Inc.** 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  
**12 10 2013**

Transaction ID : **SA11Ai-CN38683**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Alice B Adkins**

Mailing Address **638 Stirling Ln**

City **Prospect Heights** State **IL** Zip Code **60070-2589**

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  
**10 22 2013**

Transaction ID : **SA11Ai-CN37602**

Amount of Each Receipt this Period  
**200**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Alice B Adkins**

Mailing Address **638 Stirling Ln**

City **Prospect Heights** State **IL** Zip Code **60070-2589**

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 **600**

Date of Receipt  
M M / D D / Y Y Y Y  
**12 23 2013**

Transaction ID : **SA11Ai-CN39136**

Amount of Each Receipt this Period  
**200**

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

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

**1400.00**

14020022079

**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 13 OF 431
	<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. M Kent Adkins</b>		Date of Receipt MM / DD / YYYY 12 / 04 / 2013
Mailing Address 1844 Hannah Farms Ct		Transaction ID : SA11Ai-CN38380
City Blacklick	State OH	Zip Code 43004
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer M K Adkins & Associates	Occupation President	
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. Ms. Rosa Adkins</b>		Date of Receipt MM / DD / YYYY 11 / 14 / 2013
Mailing Address 561 Club Cir		Transaction ID : SA11Ai-CN38285
City Daniels	State WV	Zip Code 25832
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
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 1000	

Full Name (Last, First, Middle Initial) <b>C. Ms. Earleen Agee</b>		Date of Receipt MM / DD / YYYY 12 / 20 / 2013
Mailing Address 61 Bradley Foster Dr N		Transaction ID : SA11Ai-CN38909
City Huntington	State WV	Zip Code 25701
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
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).....	1750.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022080

**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 431
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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. Mike A. Albert</b>		Date of Receipt M - M / D - D / Y - Y - Y - Y 12 / 06 / 2013
Mailing Address 843 Spring Rd		Transaction ID : SA11AI-CN38501
City	State Zip Code	
Charleston	WV 25314	Amount of Each Receipt this Period 200
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 450
Name of Employer	Occupation	
Public Service Comm'n Of W. VA	Chairman	
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>B. Mr. Bradley Loyd Alexander</b>		Date of Receipt M - M / D - D / Y - Y - Y - Y 12 / 12 / 2013
Mailing Address 412 Ponce de Leon Pl		Transaction ID : SA11Ai-CN38885
City	State Zip Code	
Decatur	GA 30030	Amount of Each Receipt this Period 1000
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000
Name of Employer	Occupation	
McGuire Woods	Vice President	
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>C. Mr. John Alexander</b>		Date of Receipt M - M / D - D / Y - Y - Y - Y 11 / 27 / 2013
Mailing Address 251 Encino Ave		Transaction ID : SA11AI-CN39002
City	State Zip Code	
San Antonio	TX 78209	Amount of Each Receipt this Period 500
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500
Name of Employer	Occupation	
Self Employed	Investor	
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).....	1700.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022081

**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 15 OF 431
<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**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Joyce Allen**

Mailing Address **HC 61 Box 26**

City **Coalton** State **WV** Zip Code **26257**

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 **1500**

Date of Receipt  
M M / D D / Y Y Y Y  
**12 06 2013**

Transaction ID : **SA11Ai-CN38538**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Robert V. Allen**

Mailing Address **246 Ridgeway Dr**

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 **350**

Date of Receipt  
M M / D D / Y Y Y Y  
**10 21 2013**

Transaction ID : **SA11Ai-CN37594**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Robert V. Allen**

Mailing Address **246 Ridgeway Dr**

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 **650**

Date of Receipt  
M M / D D / Y Y Y Y  
**12 31 2013**

Transaction ID : **SA11Ai-CN39214**

Amount of Each Receipt this Period  
**300**

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

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

**900.00**

14020022082

**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 431  
(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. Richard F Ammar**

Mailing Address 1000 Edgewood Rd

City State Zip Code  
Bluefield WV 24701

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

Name of Employer Occupation  
Ammar's Inc. Executive

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date  
600

Date of Receipt  
MM / DD / YYYY  
11 / 14 / 2013

Transaction ID : SA11Ai-CN38267

Amount of Each Receipt this Period  
500

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

Mailing Address 473 Lawnview Dr

City State Zip Code  
Morgantown WV 26505

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  
MM / DD / YYYY  
12 / 10 / 2013

Transaction ID : SA11Ai-CN38701

Amount of Each Receipt this Period  
70

**C.** Full Name (Last, First, Middle Initial)  
**Mr. John T Anderson**

Mailing Address 5021 Waple Ln

City State Zip Code  
Alexandria VA 22304

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

Name of Employer Occupation  
Rich Feuer Anderson Partner

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date  
250

Date of Receipt  
MM / DD / YYYY  
12 / 04 / 2013

Transaction ID : SA11Ai-CN38355

Amount of Each Receipt this Period  
250

**SUBTOTAL** of Receipts This Page (optional)..... 820.00

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

14020022083



**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 431  
(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)  
**Hon. Hushang Ansary**

Mailing Address 1000 Louisiana St.  
Ste 5900

City State Zip Code  
Houston TX 77002

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

Name of Employer Occupation  
Stewart & Stevenson Chairman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
M M / D D / Y Y Y Y  
11 13 2013

Transaction ID : SA11Ai-CN38210

Amount of Each Receipt this Period  
2600

**B.** Full Name (Last, First, Middle initial)  
**Mr. Curtis Arledge**

Mailing Address 61 Holly Ln

City State Zip Code  
Darien CT 06820

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

Name of Employer Occupation  
BNY Mellon Finance

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
M M / D D / Y Y Y Y  
12 03 2013

Transaction ID : SA11Ai-CN38313

Amount of Each Receipt this Period  
500

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Steven Artz**

Mailing Address 618 Burkewood Plaza

City State Zip Code  
Charleston WV 25314

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

Name of Employer Occupation  
WV Physicians Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200

Date of Receipt  
M M / D D / Y Y Y Y  
10 11 2013

Transaction ID : SA11Ai-CN37384

Amount of Each Receipt this Period  
200

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

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

3300.00

14020022084

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

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

FOR LINE NUMBER: PAGE 18 OF 431  
(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. Edward A Asbury**

Mailing Address 602 Summit Street  
PO Box 1030

City State Zip Code  
Bluefield WV 24605

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

Name of Employer Occupation  
Baystor Coal Company President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
MM / DD / YYYY  
11 / 14 / 2013

Transaction ID : SA11Ai-CN38269

Amount of Each Receipt this Period  
2600

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Joseph Assaley**

Mailing Address 117 Private Dr 255

City State Zip Code  
Chesapeake OH 45619

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

Name of Employer Occupation  
Cabell Huntington Hospital Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
MM / DD / YYYY  
12 / 09 / 2013

Transaction ID : SA11Ai-CN38303

Amount of Each Receipt this Period  
1600

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Eugene Atkinson**

Mailing Address 212 Island Creek Drive

City State Zip Code  
Vero Beach FL 32963

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

Name of Employer Occupation  
Atkinson Capital Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250

Date of Receipt  
MM / DD / YYYY  
12 / 20 / 2013

Transaction ID : SA11Ai-CN39029

Amount of Each Receipt this Period  
250

**SUBTOTAL** of Receipts This Page (optional)..... 4450.00

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

14020022085

**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 19 OF 431
	<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 Bailey</b>		Date of Receipt MM / DD / YYYY 12 / 10 / 2013
Mailing Address PO Box 205		Transaction ID : SA11AI-CN38725
City Whitesville	State WV	Zip Code 25209
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 500
Name of Employer B & M Oil Co.	Occupation President	
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. Wilburn Bailey Jr.</b>		Date of Receipt MM / DD / YYYY 10 / 11 / 2013
Mailing Address 6272 Huff Creek Hwy		Transaction ID : SA11AI-CN37363
City Davins	State WV	Zip Code 25617-8522
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 100
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	

Full Name (Last, First, Middle Initial) <b>Mr. Robert C. Baird</b>		Date of Receipt MM / DD / YYYY 11 / 12 / 2013
Mailing Address PO Box 711		Transaction ID : SA11AI-CN38188
City Gallipolis Ferry	State WV	Zip Code 25515
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 100
Name of Employer Baird Physical Therapy	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).....	\$ 700.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022086

**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 20 OF 431
	<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. Eugene W Ball**

Mailing Address 136 Lock Ln

City Alum Creek State WV Zip Code 25003

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 **900**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 21 2013

Transaction ID : **SA11AI-CN37559**

Amount of Each Receipt this Period  
 \$ 500

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Charles W Ballou**

Mailing Address 2112 Wakefield Ct

City Alexandria State VA Zip Code 22307

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

Name of Employer RSM McGladrey Occupation C.P.A.

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 04 2013

Transaction ID : **SA11AI-CN38351**

Amount of Each Receipt this Period  
 \$ 250

**C.** Full Name (Last, First, Middle Initial)  
**Mr. 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 **750**

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 09 2013

Transaction ID : **SA11AI-CN38302**

Amount of Each Receipt this Period  
 \$ 300

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

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

1050.00

14020022087

**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 21 OF 431
	<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) <b>Mrs. Carol J Barnett</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address 5815 Live Oak road		Transaction ID : SA11AI-CN38918
City Lakeland	State FL	Zip Code 33813
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600
Name of Employer Publix Supermarkets Inc.	Occupation Director	
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. Hoyt R Barnett</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address 5815 Live Oak road		Transaction ID : SA11AI-CN38919
City Lakeland	State FL	Zip Code 33813
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600
Name of Employer Carolaire 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	

C. Full Name (Last, First, Middle Initial) <b>Ms. Diana Barnette</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 10 / 2013
Mailing Address PO Box 284		Transaction ID : SA11AI-CN38670
City Holden	State WV	Zip Code 25625
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100
Name of Employer Mining Repair Specialists 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	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5300.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022088

**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 22 OF 431
	<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) <b>Mr. V Max Beard</b>		Date of Receipt M M / D D / Y Y Y Y 12 04 2013
Mailing Address 6130 Edgewood Ter		Transaction ID : SA11AI-CN38348
City State Zip Code Alexandria VA 22307	Amount of Each Receipt this Period \$ 250	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 250
Name of Employer Equity Brokerage Corp.	Occupation Broker	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date \$ 250	

<b>B.</b> Full Name (Last, First, Middle Initial) <b>Ms. Katharine Becker</b>		Date of Receipt M M / D D / Y Y Y Y 12 11 2013
Mailing Address 1234 Staunton Rd		Transaction ID : SA11AI-CN38707
City State Zip Code Charleston WV 25314-1437	Amount of Each Receipt this Period \$ 2600	
FEC ID number of contributing federal political committee. <b>C</b>		Reattributed from W Marty Becker <b>[MEMO ITEM]</b> Reattribution
Name of Employer None	Occupation Housewife	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date \$ 5200	

<b>C.</b> Full Name (Last, First, Middle Initial) <b>Mr. W Marty Becker</b>		Date of Receipt M M / D D / Y Y Y Y 12 10 2013
Mailing Address 1234 Staunton Rd		Transaction ID : SA11AI-CN38705
City State Zip Code Charleston WV 25314-1437	Amount of Each Receipt this Period \$ 5200	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 7800
Name of Employer Max Capitol Group	Occupation Executive	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date \$ 7800	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	\$ 5450.00
<b>TOTAL</b> This Period (last page this line number only).....	\$

14020022089

**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 23 OF 431
	<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. W Marty Becker</b>		Date of Receipt MM / DD / YYYY 12 / 11 / 2013
Mailing Address 1234 Staunton Rd		Transaction ID : SA11Ai-CN38706
City Charleston	State WV	Zip Code 25314-1437
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -2600
Name of Employer Max Capitol Group	Occupation Executive	Reattributed to Katharine Becker
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200	[MEMO ITEM] Reattributed

Full Name (Last, First, Middle Initial) <b>Mr. Robert R Belair</b>		Date of Receipt MM / DD / YYYY 12 / 12 / 2013
Mailing Address 818 Connecticut Ave NW # 1100		Transaction ID : SA11Ai-CN38886
City Washington	State DC	Zip Code 20036
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Arhali Golden Gregory	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. Gerard Bellitt</b>		Date of Receipt MM / DD / YYYY 11 / 06 / 2013
Mailing Address 341 White Pond Dr		Transaction ID : SA11Ai-CN37978
City Akron	State OH	Zip Code 44320
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer First Energy	Occupation Vice President Sales	
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).....	1250.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022090

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 OF 431
	(check only one)	
	<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. Janet L Berman**

Mailing Address 3055 Whitehaven Street NW

City State Zip Code  
Washington DC 20008

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  
2000

Date of Receipt  
M M / D D / Y Y Y Y  
11 29 2013

Transaction ID : SA11Ai-CN39006

Amount of Each Receipt this Period  
2000

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Wayne Berman**

Mailing Address 3055 Whitehaven Street NW

City State Zip Code  
Washington DC 20008

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

Name of Employer Occupation  
Blackstone Group Senior Advisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y  
11 29 2013

Transaction ID : SA11Ai-CN39005

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Julie L Bernstein**

Mailing Address 60 East 38th St.

City State Zip Code  
New York NY 10128

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
M M / D D / Y Y Y Y  
11 13 2013

Transaction ID : SA11Ai-CN38221

Amount of Each Receipt this Period  
2000

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

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

5000.00

14020022091



**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 431	
(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 Bernstein</b>		Date of Receipt MM / DD / YYYY 11 / 06 / 2013
Mailing Address 25 Stonecroft Circle		Transaction ID : SA11AI-CN38001
City Weston	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 1000
Name of Employer Highfields Capital Management LP	Occupation Business Manager	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. Ray B Billups</b>		Date of Receipt MM / DD / YYYY 12 / 04 / 2013
Mailing Address 2112 Belle Haven Rd		Transaction ID : SA11AI-CN38345
City Alexandria	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 500
Name of Employer Self	Occupation Governmental Affairs Consultant	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. Carole Bissett</b>		Date of Receipt MM / DD / YYYY 11 / 12 / 2013
Mailing Address 1526 Atlas Rd		Transaction ID : SA11AI-CN38197
City Wheeling	State WV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 100
Name of Employer State Farm Insurance	Occupation Insurance Agent	Election Cycle-to-Date \$ 300
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).....	\$ 1600.00
<b>TOTAL</b> This Period (last page this line number only).....	\$

14020022092

**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 431  
(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. Richard Blackburn**

Mailing Address 2000 Belle Haven Road

City State Zip Code  
Alexandria VA 22307

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

Name of Employer Occupation  
Blackburn and Co. President

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250

Date of Receipt  
MM / DD / YYYY  
10 / 31 / 2013

Transaction ID : SA11Ai-CN38963

Amount of Each Receipt this Period  
250

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Ernest L Blair**

Mailing Address 125 Fawn Dr

City State Zip Code  
Mount Hope WV 25880-9476

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

Name of Employer Occupation  
Beckley Drilling And Blasting Executive

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
600

Date of Receipt  
MM / DD / YYYY  
10 / 11 / 2013

Transaction ID : SA11Ai-CN37338

Amount of Each Receipt this Period  
400

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Stuart F Bloch**

Mailing Address 10 Azaela Court

City State Zip Code  
Wheeling WV 26003

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

Name of Employer Occupation  
HazlettBurt & Weston Inc. Vice President

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
MM / DD / YYYY  
12 / 06 / 2013

Transaction ID : SA11Ai-CN38554

Amount of Each Receipt this Period  
1600

**SUBTOTAL** of Receipts This Page (optional)..... 2250.00

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

14020022093

**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 431  
(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. Amy Bloomstone**

Mailing Address 273 Otis St.

City State Zip Code  
West Newton MA 02465

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

Name of Employer Occupation  
Catholic Charities Of Boston Attorney

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
11 06 2013

Transaction ID : SA11AI-CN37997

Amount of Each Receipt this Period  
\$ 1000

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Sally Blume**

Mailing Address HC 65 BOx 112B

City State Zip Code  
Forest Hill WV 24935

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
10 25 2013

Transaction ID : SA11AI-CN37724

Amount of Each Receipt this Period  
\$ 500

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Robert L Boblitt Jr**

Mailing Address 7777 Washington Ave

City State Zip Code  
Houston TX 77007

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

Name of Employer Occupation  
Silver Eagle Distribution COO

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
11 13 2013

Transaction ID : SA11AI-CN38215

Amount of Each Receipt this Period  
\$ 1000

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

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

1402002094

**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 28 OF 431
	<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. Mrs. Cynthia Boich</b> Full Name (Last, First, Middle Initial) Mailing Address 125 Ocean Drive # 303 City Miami Beach State FL Zip Code 33139		Date of Receipt M M / D D / Y Y Y Y 12 04 2013 Transaction ID : SA11Ai-CN38295
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2600 Reattributed from Wayne Boich
Name of Employer Self Employed	Occupation Consultant	<b>[MEMO ITEM]</b> Reattribution
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600	

<b>B. Mrs. Cynthia Boich</b> Full Name (Last, First, Middle Initial) Mailing Address 125 Ocean Drive # 303 City Miami Beach State FL Zip Code 33139		Date of Receipt M M / D D / Y Y Y Y 12 04 2013 Transaction ID : SA11Ai-CN38297
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2600 Reattributed from Wayne Boich
Name of Employer Self Employed	Occupation Consultant	<b>[MEMO ITEM]</b> Reattribution
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200	

<b>C. Mr. Wayne M Boich</b> Full Name (Last, First, Middle Initial) Mailing Address 450 Alton Rd City Miami Beach State FL Zip Code 33139		Date of Receipt M M / D D / Y Y Y Y 10 11 2013 Transaction ID : SA11Ai-CN37405
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2600
Name of Employer Boich Companies	Occupation Owner	2600
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 7800	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2600.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022095

**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 29 OF 431
	<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>A. Mr. Wayne M Boich</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 11 / 2013
Mailing Address 450 Alton Rd		Transaction ID : SA11Ai-CN37406
City Miami Beach	State FL	Zip Code 33139
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600
Name of Employer Boich Companies	Occupation Owner	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 10400	

Full Name (Last, First, Middle Initial) <b>B. Mr. Wayne M Boich</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 04 / 2013
Mailing Address 450 Alton Rd		Transaction ID : SA11Ai-CN38294
City Miami Beach	State FL	Zip Code 33139
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -2600
Name of Employer Boich Companies	Occupation Owner	Reattributed to Cynthia Boich
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 7800	<b>[MEMO ITEM]</b> Reattributed

Full Name (Last, First, Middle Initial) <b>C. Mr. Wayne M Boich</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 04 / 2013
Mailing Address 450 Alton Rd		Transaction ID : SA11Ai-CN38296
City Miami Beach	State FL	Zip Code 33139
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -2600
Name of Employer Boich Companies	Occupation Owner	Reattributed to Cynthia Boich
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200	<b>[MEMO ITEM]</b> Reattributed

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2600.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022096

**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 431

(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. Stephen B Bonner</b>		Date of Receipt M M / D D / Y Y Y Y 10 17 2013
Mailing Address 1919 N Dayton Street		<b>Transaction ID : SA11Ai-CN37505</b>
City Chicago	State IL	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5200
Name of Employer CTCA	Occupation Executive Chairman	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200	

Full Name (Last, First, Middle Initial) <b>Mr. Stephen B Bonner</b>		Date of Receipt M M / D D / Y Y Y Y 10 18 2013
Mailing Address 1919 N Dayton Street		<b>Transaction ID : SA11Ai-CN38523</b>
City Chicago	State IL	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period -2600
Name of Employer CTCA	Occupation Executive Chairman	, , *
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600	
		Redesignated to General 2014 <b>[MEMO ITEM]</b> Redesignated

Full Name (Last, First, Middle Initial) <b>Mr. Stephen B Bonner</b>		Date of Receipt M M / D D / Y Y Y Y 10 18 2013
Mailing Address 1919 N Dayton Street		<b>Transaction ID : SA11Ai-CN38524</b>
City Chicago	State IL	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2600
Name of Employer CTCA	Occupation Executive Chairman	, , *
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200	
		Redesignated from Primary 2014 <b>[MEMO ITEM]</b> Redesignation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5200.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022097

**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 31 OF 431
	<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. William Bonwell</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 18 / 2013	
Mailing Address PO Box 2191		Transaction ID : SA11AI-CN39027	
City Elkins	State WV	Zip Code 26241	Amount of Each Receipt this Period \$ 200
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. A C Boothby III</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 03 / 2013	
Mailing Address 2420 N Quintana St		Transaction ID : SA11AI-CN38333	
City Arlington	State VA	Zip Code 22207	Amount of Each Receipt this Period \$ 250
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 250	
Name of Employer Russ Reid Co	Occupation Vice President		
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. Michael Bopp</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 20 / 2013	
Mailing Address 1409 Bishop Lane		Transaction ID : SA11AI-CN38916	
City Alexandria	State VA	Zip Code 22302	Amount of Each Receipt this Period \$ 1250
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 1250	
Name of Employer Gibson Dunn & Crutcher	Occupation Attorney		
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).....	\$ 1700.00
TOTAL This Period (last page this line number only).....	\$

14020022098

**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 431  
(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. Matthew Botein**

Mailing Address **164 Dean Rd**

City **Brookline** State **MA** Zip Code **02445**

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

Name of Employer **Black Rock Inc.** Occupation **Investment Manager**

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt **11 / 07 / 2013**

Transaction ID : **SA11AI-CN37970**

Amount of Each Receipt this Period **1000**

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

Mailing Address **4 Poplar Ave. Apt. 1**

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 **300**

Date of Receipt **10 / 29 / 2013**

Transaction ID : **SA11AI-CN37899**

Amount of Each Receipt this Period **100**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Joseph W. Boutaugh**

Mailing Address **4 Poplar Ave. Apt. 1**

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 **400**

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

Transaction ID : **SA11AI-CN38549**

Amount of Each Receipt this Period **100**

**SUBTOTAL** of Receipts This Page (optional)..... **1200.00**

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

14020022099



**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 33 OF 431
	<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. Mr. R E Bowlby</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 950 Parkersburg Road		Transaction ID : SA11Ai-CN38192
City Spencer	State WV	
Zip Code 25276		Amount of Each Receipt this Period \$ 400
FEC ID number of contributing federal political committee. C		
Name of Employer First Neighborhood Bank	Occupation Director	Election Cycle-to-Date 400
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. Ms. Judith Bradbury</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 25 / 2013
Mailing Address 692 Cobblestone Blvd.		Transaction ID : SA11Ai-CN37733
City Scott Depot	State WV	
Zip Code 25560		Amount of Each Receipt this Period \$ 500
FEC ID number of contributing federal political committee. C		
Name of Employer housewife	Occupation Housewife	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. Mrs. Ann Bradley</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 23 / 2013
Mailing Address 635 Holly Rd		Transaction ID : SA11Ai-CN39115
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 Spilman Thomas Battle PLLC	Occupation Attorney	Election Cycle-to-Date 1000
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Receipts This Page (optional).....	1900.00
TOTAL This Period (last page this line number only).....	

1402002100

**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 34 OF 431
	<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. Mr. Patrick Brett</b>		Date of Receipt M M / D D / Y Y Y Y 12 05 2013
Mailing Address 300 Mercer St Apt 21-0		Transaction ID : SA11Ai-CN39012
City New York	State Zip Code NY 10003	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer Citi		1000
Occupation Financial Services		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		1000
Election Cycle-to-Date		

Full Name (Last, First, Middle Initial) <b>B. Mr. James L Brogan</b>		Date of Receipt M M / D D / Y Y Y Y 10 11 2013
Mailing Address PO Box 898		Transaction ID : SA11Ai-CN37446
City Athens	State Zip Code WV 24712	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer Mountaineer Investigation		500
Occupation Corporate President		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		500
Election Cycle-to-Date		

Full Name (Last, First, Middle Initial) <b>C. Ms. Maria Molina Bronosky</b>		Date of Receipt M M / D D / Y Y Y Y 12 06 2013
Mailing Address 170 Woodland Drive		Transaction ID : SA11Ai-CN38471
City Huntington	State Zip Code WV 25705	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
Name of Employer Glaxosmithline		25
Occupation Pharma Sales Rep		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		200
Election Cycle-to-Date		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1525.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022101

**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 35 OF 431
	<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>A. Mr. Bob R Brooks Jr</b>		Date of Receipt M M / D D / Y Y Y Y 12 09 2013
Mailing Address 1107 N Pitt St Unit 2C		Transaction ID : SA11Ai-CN38597
City Alexandria	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Alpine Group	Occupation Consultant	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 500	

Full Name (Last, First, Middle Initial) <b>B. Mr. Jerry R Brown</b>		Date of Receipt M M / D D / Y Y Y Y 12 06 2013
Mailing Address PO Box 196		Transaction ID : SA11Ai-CN38488
City Middlebourne	State WV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100
Name of Employer Retired	Occupation Retired	Amount of Each Receipt this Period 200
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>C. Ms. Julia S Brown</b>		Date of Receipt M M / D D / Y Y Y Y 12 12 2013
Mailing Address 128 Erie Ave		Transaction ID : SA11Ai-CN38893
City Decatur	State GA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer FHL Bank	Occupation Executive	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 500	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1100.00
<b>TOTAL</b> This Period (last page this line number only).....	*

14020022102

**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 36 OF 431
	<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. Toby J Buel Sr**

Mailing Address 5321 Glow Dr

City State Zip Code  
Cross Lanes WV 25313

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

Name of Employer Occupation  
Self Employed Attorney

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
450

Date of Receipt  
M M / D D / Y Y Y Y  
12 23 2013

Transaction ID : SA11Ai-CN39116

Amount of Each Receipt this Period  
100

**B.** Full Name (Last, First, Middle Initial)  
**Mr. James O Bunn II**

Mailing Address 4600 Kanawha Ave

City State Zip Code  
Charleston WV 25304

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

Name of Employer Occupation  
Coal River Energy LLC Mining

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
-600

Date of Receipt  
M M / D D / Y Y Y Y  
12 31 2013

Transaction ID : SA11Ai-CN39349

Amount of Each Receipt this Period  
-2600

Redesignated to General 2014

**[MEMO ITEM]**  
Redesignated

**C.** Full Name (Last, First, Middle Initial)  
**Mr. James O Bunn II**

Mailing Address 4600 Kanawha Ave

City State Zip Code  
Charleston WV 25304

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

Name of Employer Occupation  
Coal River Energy LLC Mining

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
M M / D D / Y Y Y Y  
12 31 2013

Transaction ID : SA11Ai-CN39350

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).....

100.00

14020022103

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

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

FOR LINE NUMBER: PAGE 37 OF 431  
(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. James O Bunn II**

Mailing Address **4600 Kanawha Ave**

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

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

Name of Employer **Coal River Energy LLC** Occupation **Mining**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 M M / D D / Y Y Y Y  
**12 31 2013**

**Transaction ID : SA11AI-CN39253**

Amount of Each Receipt this Period  
**3200**

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

Mailing Address **1601 Connell Rd**

City **Charleston** State **WV** Zip Code **25314-2512**

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

Name of Employer **Jones & Associates / Entrepreneur** Occupation **Attorney / Business Man**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y  
**11 29 2013**

**Transaction ID : SA11AI-CN39004**

Amount of Each Receipt this Period  
**2600**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. John T Burke**

Mailing Address **151 Newcomer Rd**

City **Charleston** State **WV** Zip Code **25322**

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

Name of Employer **Salomon Smith Barney Inc** Occupation **Investments**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**12 06 2013**

**Transaction ID : SA11AI-CN38473**

Amount of Each Receipt this Period  
**500**

**SUBTOTAL** of Receipts This Page (optional)..... **6300.00**

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

14020022104

**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 38 OF 431
<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>A. Ms. Judy G Burke</b>		Date of Receipt M M / D D / Y Y Y Y 10 29 2013
Mailing Address PO Box 833		Transaction ID : SA11AI-CN37927
City Moundsville	State WV	Zip Code 26041-0833
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100
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>B. Mr. William Burrows</b>		Date of Receipt M M / D D / Y Y Y Y 10 11 2013
Mailing Address 5111 Valley Pine Ct		Transaction ID : SA11Ai-CN37395
City Frederick	State MD	Zip Code 21703
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100
Name of Employer U.S. Army	Occupation engineer	
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>C. Dr. Steve Bush</b>		Date of Receipt M M / D D / Y Y Y Y 12 31 2013
Mailing Address 830 Pennsylvania Ave		Transaction ID : SA11AI-CN39223
City Charleston	State WV	Zip Code 25302
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
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 250	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	450.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022105

**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 431  
(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. Robert Butcher**

Mailing Address 41 Mustang Acres

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 200

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 22 2013

Transaction ID : SA11Ai-CN37668

Amount of Each Receipt this Period  
 50

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Priscilla H Byrnside**

Mailing Address 159 Truman Circle

City Danville State WV Zip Code 25053

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 200

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 29 2013

Transaction ID : SA11Ai-CN37939

Amount of Each Receipt this Period  
 200

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Kevin Cain**

Mailing Address 2125 14th St NW

City Washington State DC Zip Code 20009

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

Name of Employer American Veterinary Colleges Occupation Government Affairs

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 25 2013

Transaction ID : SA11Ai-CN38949

Amount of Each Receipt this Period  
 100

**SUBTOTAL** of Receipts This Page (optional)..... 350.00

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

14020022106

**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 431  
(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. Kevin Cain**

Mailing Address 2125 14th St NW

City State Zip Code  
Washington DC 20009

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

Name of Employer Occupation  
American Veterinary Colleges Government Affairs

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1100

Date of Receipt  
M M / D D / Y Y Y Y  
11 27 2013

Transaction ID : SA11Ai-CN38999

Amount of Each Receipt this Period  
100

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Frank Calandra Jr**

Mailing Address 258 Kappa Dr

City State Zip Code  
Pittsburgh PA 15238

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

Name of Employer Occupation  
Jennmar President

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
M M / D D / Y Y Y Y  
12 06 2013

Transaction ID : SA11Ai-CN38534

Amount of Each Receipt this Period  
350

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Carl M Callaway**

Mailing Address 400 10th Ave

City State Zip Code  
Huntington WV 25701

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  
750

Date of Receipt  
M M / D D / Y Y Y Y  
12 31 2013

Transaction ID : SA11Ai-CN39210

Amount of Each Receipt this Period  
500

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

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

950.00

14020022107



**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 41 OF 431
	<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. Michael K Callen</b>		Date of Receipt M M / D D / Y Y Y Y 12 10 2013
Mailing Address 144 Wiley St		Transaction ID : SA11Ai-CN38799
City Morgantown	State WV	Zip Code 26505
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 2600
Name of Employer Self Employed	Occupation Lawyer/Real Estate Law	
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>B. Mr. Michael K Callen</b>		Date of Receipt M M / D D / Y Y Y Y 12 10 2013
Mailing Address 144 Wiley St		Transaction ID : SA11Ai-CN38800
City Morgantown	State WV	Zip Code 26505
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 2600
Name of Employer Self Employed	Occupation Lawyer/Real Estate Law	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date \$ 5200	

Full Name (Last, First, Middle Initial) <b>C. Mr. Stephen A Callen</b>		Date of Receipt M M / D D / Y Y Y Y 12 16 2013
Mailing Address 144 Willey St		Transaction ID : SA11Ai-CN38859
City Morgantown	State WV	Zip Code 26505
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 2600
Name of Employer West Virginia Junior College	Occupation Executive	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date \$ 5200	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	\$ 7800.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022108

**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 431	
	<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. Mr. Jon Campbell</b> Full Name (Last, First, Middle Initial) Mailing Address 395 Sussex Ln City Orono State MN Zip Code 55356			Date of Receipt M M / D D / Y Y Y Y 11 15 2013 Transaction ID : SA11AI-CN38102
FEC ID number of contributing federal political committee. <b>C</b>			Amount of Each Receipt this Period \$ 1000
Name of Employer Wells Fargo Bank Occupation Banker		Election Cycle-to-Date \$ 1000	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date \$ 1000	

<b>B. Mr. Michael G Campbell</b> Full Name (Last, First, Middle Initial) Mailing Address 12029 SE Intracoastal Ter City Jupiter State FL Zip Code 33469-1718			Date of Receipt M M / D D / Y Y Y Y 12 06 2013 Transaction ID : SA11AI-CN38583
FEC ID number of contributing federal political committee. <b>C</b>			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)		Election Cycle-to-Date \$ 500	

<b>C. Mr. Harry Candland</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 212 City Paden City State WV Zip Code 26159			Date of Receipt M M / D D / Y Y Y Y 10 29 2013 Transaction ID : SA11AI-CN37887
FEC ID number of contributing federal political committee. <b>C</b>			Amount of Each Receipt this Period \$ 50
Name of Employer Carter And Mayes Inc Occupation President		Election Cycle-to-Date \$ 200	
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).....	\$ 1550.00
<b>TOTAL</b> This Period (last page this line number only).....	\$

14020022109

**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 43 OF 431
	<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>A. Ms. Katharine Capito</b>		Date of Receipt MM / DD / YYYY 12 / 23 / 2013
Mailing Address 620 Scotswood Cir		Transaction ID : SA11Ai-CN39098
City Knoxville	State TN	Zip Code 37919
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
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	

Full Name (Last, First, Middle Initial) <b>B. Mr. Moore Capito</b>		Date of Receipt MM / DD / YYYY 12 / 23 / 2013
Mailing Address 510 Linden Rd.		Transaction ID : SA11Ai-CN39097
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 Energy America	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>C. Mrs. Ellen S Cappellanti</b>		Date of Receipt MM / DD / YYYY 10 / 25 / 2013
Mailing Address 25 Quarry Ridge Rd		Transaction ID : SA11Ai-CN37730
City Charleston	State WV	Zip Code 25304
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Jackson & Kelly 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).....	1500.00
<b>TOTAL</b> This Period (last page this line number only).....	

1402002110

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

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

FOR LINE NUMBER:		PAGE 44 OF 431	
(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**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Marshall J Carper MD**

Mailing Address **PO Box 4626**

City **Charleston** State **WV** Zip Code **25364-4626**

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 **350**

Date of Receipt  
 M M / D D / Y Y Y Y  
**12 10 2013**

Transaction ID : **SA11AI-CN38807**

Amount of Each Receipt this Period  
**200**

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

Mailing Address **735 Hempstead Place**

City **Charlotte** State **NC** Zip Code **28207**

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

Name of Employer **Wells Fargo & Co** Occupation **Banker**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 17 2013**

Transaction ID : **SA11AI-CN37508**

Amount of Each Receipt this Period  
**2000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Patrick J Casey**

Mailing Address **15025 Rosecroft Rd**

City **Rockville** State **MD** Zip Code **20853**

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

Name of Employer **Patrick Casey & Associates** Occupation **CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 M M / D D / Y Y Y Y  
**12 16 2013**

Transaction ID : **SA11AI-CN38660**

Amount of Each Receipt this Period  
**200**

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

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

**2400.00**

14020022111

**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 45 OF 431
	<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)  
**Mr. Shawn E Casey**

Mailing Address 5 Hermitage Rd

City Charleston State WV Zip Code 25314

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

Name of Employer Triana 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  
12 06 2013

Transaction ID : SA11AI-CN38475

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Arthur Certosimo**

Mailing Address 87 Raymond Ave

City Rutherford State NJ Zip Code 07070

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

Name of Employer BNY Mellon Occupation Banker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500

Date of Receipt  
M M / D D / Y Y Y Y  
10 17 2013

Transaction ID : SA11AI-CN37509

Amount of Each Receipt this Period  
2500

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Dennis M Chack**

Mailing Address 1029 Homewood Drive

City Lakewood State OH Zip Code 44107

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

Name of Employer First Energy 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  
10 17 2013

Transaction ID : SA11AI-CN37512

Amount of Each Receipt this Period  
250

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

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

3750.00

14020022112

**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 46 OF 431
	<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. Stephen Chadwell</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 11 / 2013
Mailing Address <b>PO Box 550</b> <b>6870 Valley Pike</b>		Transaction ID : <b>SA11Ai-CN38113</b>
City <b>Middleburg</b>	State <b>VA</b>	
Zip Code <b>22645</b>		Amount of Each Receipt this Period \$ 1000
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>Retired</b>	Occupation <b>Retired</b>	Amount of Each Receipt this Period \$ 1500
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>B. Mr. Robert Cheves Jr</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 07 / 2013
Mailing Address <b>7433 Delray Rd</b>		Transaction ID : <b>SA11Ai-CN38069</b>
City <b>Delray</b>	State <b>WV</b>	
Zip Code <b>26714</b>		Amount of Each Receipt this Period \$ 200
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>Retired</b>	Occupation <b>Retired</b>	Amount of Each Receipt this Period \$ 100
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>100</b>	

Full Name (Last, First, Middle Initial) <b>C. Mr. Robert Cheves Jr</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 23 / 2013
Mailing Address <b>7433 Delray Rd</b>		Transaction ID : <b>SA11Ai-CN39128</b>
City <b>Delray</b>	State <b>WV</b>	
Zip Code <b>26714</b>		Amount of Each Receipt this Period \$ 100
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>Retired</b>	Occupation <b>Retired</b>	Amount of Each Receipt this Period \$ 200
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).....	\$ 1300.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022113

**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 431	
(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**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Sue Cheves**

Mailing Address **7433 Delray Rd**

City <b>Delray</b>	State <b>WV</b>	Zip Code <b>26714</b>
-----------------------	--------------------	--------------------------

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

Name of Employer <b>self-employed</b>	Occupation <b>Farmer</b>
--	-----------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**300**

Date of Receipt  
MM / DD / YYYY  
**11 / 07 / 2013**

Transaction ID : **SA11Ai-CN38095**

Amount of Each Receipt this Period  
**100**

Reattributed from **Robert Cheves**

**[MEMO ITEM]**  
Reattribution

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Sue Cheves**

Mailing Address **7433 Delray Rd**

City <b>Delray</b>	State <b>WV</b>	Zip Code <b>26714</b>
-----------------------	--------------------	--------------------------

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

Name of Employer <b>self-employed</b>	Occupation <b>Farmer</b>
--	-----------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**400**

Date of Receipt  
MM / DD / YYYY  
**12 / 23 / 2013**

Transaction ID : **SA11Ai-CN39129**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Arthur B Choate**

Mailing Address **1390 S Dixie Hwy**  
**# 2221**

City <b>Miami</b>	State <b>FL</b>	Zip Code <b>33146</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  
**2000**

Date of Receipt  
MM / DD / YYYY  
**12 / 23 / 2013**

Transaction ID : **SA11Ai-CN39109**

Amount of Each Receipt this Period  
**1000**

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

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

**1100.00**

1402002114

**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 48 OF 431	
	<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 L Christafore**

Mailing Address 1774 Shinnston Pike

City State Zip Code  
Clarksburg WV 26301

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

Name of Employer Occupation  
Sandy's Hardwar And Home Center Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250

Date of Receipt  
M M / D D / Y Y Y Y  
10 28 2013

Transaction ID : SA11AI-CN37765

Amount of Each Receipt this Period  
250

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Daniel Cicero**

Mailing Address 1126 Steeplechase Dr.

City State Zip Code  
Morgantown WV 26508

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

Name of Employer Occupation  
Retired US Dept Of Energy Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
M M / D D / Y Y Y Y  
11 07 2013

Transaction ID : SA11AI-CN38034

Amount of Each Receipt this Period  
500

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Charles M Clapton**

Mailing Address 7113 Richard Casey Ct

City State Zip Code  
Alexandria VA 22307

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

Name of Employer Occupation  
Hogan Lovells Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y  
12 09 2013

Transaction ID : SA11AI-CN38599

Amount of Each Receipt this Period  
1000

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

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

1750.00

1402002115



**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 431
	<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. A James Clark</b>		Date of Receipt M M / D D / Y Y Y Y 10 30 2013
Mailing Address 7500 Old Georgetown Rd		<b>Transaction ID : SA11Ai-CN37963</b>
City	State	Zip Code
Bethesda	MD	20814
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000
Name of Employer Clark Construction	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>Ms. Alice Clark</b>		Date of Receipt M M / D D / Y Y Y Y 10 30 2013
Mailing Address 26919 Miles River Rd		<b>Transaction ID : SA11Ai-CN37964</b>
City	State	Zip Code
Easton	MD	21601
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000
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 1000	

Full Name (Last, First, Middle Initial) <b>Mr. Bruce E Clark</b>		Date of Receipt M M / D D / Y Y Y Y 10 22 2013
Mailing Address 2 Dows Ln		<b>Transaction ID : SA11Ai-CN37694</b>
City	State	Zip Code
Irvington	NY	10533
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100
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 1100	

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

1402002116

**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 431  
 (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. Carrie Clark**

Mailing Address 13826 Pebblebrook Dr

City State Zip Code  
 Houston TX 77079

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

Name of Employer Occupation  
 EnerVest Operating LLC VP Land/Legal

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 15 2013

Transaction ID : SA11AI-CN38100

Amount of Each Receipt this Period  
 \$ 1000

**B.** Full Name (Last, First, Middle Initial)  
**Dr. David A Clayman**

Mailing Address 14 Shannon Pl

City State Zip Code  
 Charleston WV 25314

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

Name of Employer Occupation  
 Process Strategies Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 06 2013

Transaction ID : SA11AI-CN38479

Amount of Each Receipt this Period  
 \$ 200

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Clayton Cline**

Mailing Address HC 88 Box 174

City State Zip Code  
 Baisden WV 25608

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

Name of Employer Occupation  
 Boggs And Murphy Mining Company President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 28 2013

Transaction ID : SA11AI-CN37875

Amount of Each Receipt this Period  
 \$ 2000

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

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

\$ 3200.00

14020022117

**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 51 OF 431
	<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. Hugh Clonch</b>		Date of Receipt MM / DD / YYYY 12 / 05 / 2013
A. Mailing Address <b>P. O. Box 93</b>		Transaction ID : <b>SA11AI-CN38446</b>
City <b>Dixie</b>	State <b>WV</b>	Zip Code <b>25059</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>Clonch Industries 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>2000</b>	

Full Name (Last, First, Middle Initial) <b>Mr. L. Dale Clonch</b>		Date of Receipt MM / DD / YYYY 12 / 10 / 2013
B. Mailing Address <b>Post Office Box 118</b>		Transaction ID : <b>SA11AI-CN38798</b>
City <b>Belva</b>	State <b>WV</b>	Zip Code <b>26656</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>Clonch Industries 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>1000</b>	

Full Name (Last, First, Middle Initial) <b>Ms. Mary P Clubb</b>		Date of Receipt MM / DD / YYYY 12 / 17 / 2013
C. Mailing Address <b>11 Brittany Woods</b>		Transaction ID : <b>SA11AI-CN38744</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>150</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>350</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>3150.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

1402002118

**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 52 OF 431
	<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. Billy Coffindaffer**

Mailing Address 122 Heritage Pt.

City	State	Zip Code
Morgantown	WV	26505-9097

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 **450**

Date of Receipt  
MM / DD / YYYY  
12 / 23 / 2013

**Transaction ID : SA11Ai-CN39089**

Amount of Each Receipt this Period  
\$ 50

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Talma Coffman**

Mailing Address 1566 Mundy Hollow Rd

City	State	Zip Code
Charleston	WV	25312

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  
10 / 21 / 2013

**Transaction ID : SA11Ai-CN37576**

Amount of Each Receipt this Period  
\$ 100

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Charlie Cole**

Mailing Address PO Box 1376

City	State	Zip Code
Bluefield	WV	24701

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

Name of Employer	Occupation
Cole HD	Owner

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
MM / DD / YYYY  
12 / 05 / 2013

**Transaction ID : SA11Ai-CN38442**

Amount of Each Receipt this Period  
\$ 1000

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

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

1150.00

14020022119

**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 431  
(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>A. Mrs. Lisa P Coll</b>		Date of Receipt M M / D D / Y Y Y Y 11 06 2013
Mailing Address 103 Stanton Ave		<b>Transaction ID : SA11AI-CN37992</b>
City	State	Zip Code
Auburndale	MA	02466
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000
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 1000	

Full Name (Last, First, Middle Initial) <b>B. Mr. John Collingwood</b>		Date of Receipt M M / D D / Y Y Y Y 10 25 2013
Mailing Address 4641 Star Flower Drive		<b>Transaction ID : SA11AI-CN38951</b>
City	State	Zip Code
Chantilly	VA	20151
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000
Name of Employer Bank Of America	Occupation Director Of Gov't Relations	
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. John T Collins</b>		Date of Receipt M M / D D / Y Y Y Y 12 04 2013
Mailing Address 5961 Searl Ter		<b>Transaction ID : SA11AI-CN38386</b>
City	State	Zip Code
Bethesda	MD	20816
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500
Name of Employer Steptoe & Johnson	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).....	2500.00
<b>TOTAL</b> This Period (last page this line number only).....	

1402002120

**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 431
	<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. Mark Collins</b>		Date of Receipt M M / D D / Y Y Y Y 11 14 2013
Mailing Address 261 Foote Street		Transaction ID : SA11AI-CN38254
City Beckley	State WV	Zip Code 25801
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 250
Name of Employer Self Employed	Occupation CPA	
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. Joshua M Conaway</b>		Date of Receipt M M / D D / Y Y Y Y 11 14 2013
Mailing Address 134 Peters Dr		Transaction ID : SA11AI-CN38248
City Beckley	State WV	Zip Code 25801
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 500
Name of Employer First Property Stations	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 Joseph Edward Copenhaver</b>		Date of Receipt M M / D D / Y Y Y Y 12 10 2013
Mailing Address 101 General Dr		Transaction ID : SA11AI-CN38808
City Charleston	State WV	Zip Code 25306
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 100
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	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	850.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022121

**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 431
	<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. Elmer F Coppoolse</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 14 / 2013
Mailing Address 9112 Kittery Lane		Transaction ID : SA11Ai-CN38251
City Bethesda	State MD	Zip Code 20817
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000
Name of Employer EMCO Hospitality Inc.	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. Michael Corbat</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 17 / 2013
Mailing Address 399 Park Avenue		Transaction ID : SA11Ai-CN37503
City New York	State NY	Zip Code 10022
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000
Name of Employer Citigroup	Occupation CEO	
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>Mr. Michael Corbat</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 18 / 2013
Mailing Address 399 Park Avenue		Transaction ID : SA11Ai-CN38521
City New York	State NY	Zip Code 10022
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period -2400
Name of Employer Citigroup	Occupation CEO	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 2600	<b>[MEMO ITEM]</b> Redesignated

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

1402002122

**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 431
	<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 Corbat</b>		Date of Receipt MM / DD / YYYY 10 / 18 / 2013
Mailing Address 399 Park Avenue		Transaction ID : SA11AI-CN38522
City New York	State Zip Code NY 10022	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 2400
Name of Employer Citigroup	Occupation CEO	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 5000	<b>[MEMO ITEM]</b> Redesignation

Full Name (Last, First, Middle Initial) <b>Ms. Jeanette Corey</b>		Date of Receipt MM / DD / YYYY 12 / 05 / 2013
Mailing Address 2 Portview Dr		Transaction ID : SA11AI-CN38460
City Charleston	State Zip Code WV 25311	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 100
Name of Employer Corey Development Corporation	Occupation President/Owner	
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. Robert D Corey</b>		Date of Receipt MM / DD / YYYY 11 / 07 / 2013
Mailing Address PO Box 166		Transaction ID : SA11AI-CN38061
City Charleston	State Zip Code WV 25321	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 250
Name of Employer Corey Brothers 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	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	350.00
<b>TOTAL</b> This Period (last page this line number only).....	

1402002123



**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 57 OF 431
	<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. Gregory H. Corliss</b>			Date of Receipt M M / D D / Y Y Y Y 12 06 2013
Mailing Address 948 Daniel Road			<b>Transaction ID : SA11Ai-CN38546</b>
City Shenandoah Junction	State WV	Zip Code 25442	
FEC ID number of contributing federal political committee. <b>C</b>			Amount of Each Receipt this Period \$ 25
Name of Employer Retired	Occupation retired		\$ 275
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 275		

Full Name (Last, First, Middle Initial) <b>Mrs. Ann S Costello</b>			Date of Receipt M M / D D / Y Y Y Y 10 17 2013
Mailing Address 4403 Tournay Road			<b>Transaction ID : SA11Ai-CN37510</b>
City Bethesda	State MD	Zip Code 20816	
FEC ID number of contributing federal political committee. <b>C</b>			Amount of Each Receipt this Period \$ 2500
Name of Employer BNY Mellon	Occupation Attorney		\$ 2500
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. John H Costello</b>			Date of Receipt M M / D D / Y Y Y Y 10 17 2013
Mailing Address 4403 Tournay Road			<b>Transaction ID : SA11Ai-CN37511</b>
City Bethesda	State MD	Zip Code 20816	
FEC ID number of contributing federal political committee. <b>C</b>			Amount of Each Receipt this Period \$ 2500
Name of Employer BNY Mellon	Occupation Executive		\$ 2500
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	\$ 5025.00
<b>TOTAL</b> This Period (last page this line number only).....	\$

14020022124

**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 58 OF 431
	<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. Dominic Cottrell</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 29 / 2013
Mailing Address 187 Tierra Rd		Transaction ID : SA11Ai-CN37740
City Wheeling	State WV	Zip Code 26003
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer Medical Park Anesthesiologists	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>B. Mrs. Susan Cox</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 28 / 2013
Mailing Address 64 Delaware Drive		Transaction ID : SA11Ai-CN37790
City Hurricane	State WV	Zip Code 25526
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100
Name of Employer Family First Realty	Occupation Realtor	
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>C. Mr. Jay N Cranford III</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 04 / 2013
Mailing Address 4136 N Richmond Street		Transaction ID : SA11Ai-CN38368
City Arlington	State VA	Zip Code 22207
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Clark Lytle Gudldig Cranford	Occupation Partner	
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).....	850.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022125

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 59 OF 431
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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. Howard R Crews Jr</b>		Date of Receipt MM / DD / YYYY 10 / 11 / 2013
Mailing Address Open Gate Whitaker Hill		Transaction ID : SA11AI-CN37481
City Huntington	State WV	Zip Code 25701
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 1000
Name of Employer Campbell Woods	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. George Curry</b>		Date of Receipt MM / DD / YYYY 12 / 23 / 2013
Mailing Address 423 Lakeview Dr		Transaction ID : SA11AI-CN39105
City Morgantown	State WV	Zip Code 26508
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 100
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. James R Curry Jr</b>		Date of Receipt MM / DD / YYYY 12 / 12 / 2013
Mailing Address 4150 Greenside Ct		Transaction ID : SA11AI-CN38896
City Dacula	State GA	Zip Code 30019
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 250
Name of Employer Capital Financial	Occupation Executive	
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).....	\$ 1350.00
<b>TOTAL</b> This Period (last page this line number only).....	\$

14020022126

**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 431
	<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. Sherry Cushman</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 14 / 2013	
Mailing Address 167 Hawks Chase Ln		<b>Transaction ID : SA11AI-CN38250</b>	
City Daniels	State WV	Zip Code 25832-9024	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 2500	
Name of Employer None	Occupation Homemaker		
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. Ms. Anna Dailey</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 06 / 2013	
Mailing Address 140 Sunset Dr		<b>Transaction ID : SA11AI-CN38539</b>	
City Charleston	State WV	Zip Code 25301	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 500	
Name of Employer Dinsmore & Shohl LLP	Occupation Attorney		
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>C. Mrs. Jone Dalezman</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 06 / 2013	
Mailing Address 10 Oakwood Road		<b>Transaction ID : SA11AI-CN37998</b>	
City Newtonville	State MA	Zip Code 02460	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 1000	
Name of Employer Homemaker	Occupation Homemaker		
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).....	\$ 3500.00
<b>TOTAL</b> This Period (last page this line number only).....	\$ 3500.00

1402002127

**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 61 OF 431
	<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. Reuben Darby</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 10 / 2013
Mailing Address PO Box 229		<b>Transaction ID : SA11AI-CN38680</b>
City Hedgesville	State WV	Zip Code 25427-0229
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 350.00
Name of Employer self-employed	Occupation Construction	
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. John C Dargie</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 17 / 2013
Mailing Address 1626 Poppy Drive NW		<b>Transaction ID : SA11AI-CN37513</b>
City Mogadore	State OH	Zip Code 44260
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 250.00
Name of Employer First Energy	Occupation VP-Energy Efficiency	
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. Dessie P Daugherty</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 10 / 2013
Mailing Address 114 Lincoln Ave		<b>Transaction ID : SA11AI-CN38722</b>
City West Union	State WV	Zip Code 26456
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 50.00
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 220	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	400.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022128

**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 62 OF 431
<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. John Daugherty Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 11 07 2013
Mailing Address 520 Port Oak Blvd 6th Floor		Transaction ID : SA11Ai-CN37974
City Houston State TX Zip Code 77027	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 John Daugherty Realtor	Occupation Residential Real Estate	
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. Thomas Davies</b>		Date of Receipt M M / D D / Y Y Y Y 12 23 2013
Mailing Address 1104 Greenmont Cir		Transaction ID : SA11Ai-CN39143
City Vienna State WV Zip Code 26105	Amount of Each Receipt this Period \$ 200	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 200
Name of Employer Mountain Company	Occupation Vice President	
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>C. Mr. Harold Davis</b>		Date of Receipt M M / D D / Y Y Y Y 12 31 2013
Mailing Address PO Box 457		Transaction ID : SA11Ai-CN39264
City Lenore State WV Zip Code 25676	Amount of Each Receipt this Period \$ 150	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 395
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 \$ 395	

SUBTOTAL of Receipts This Page (optional).....	\$ 1350.00
TOTAL This Period (last page this line number only).....	\$

14020022129

**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 431  
(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. Ismail Dawood**

Mailing Address **77 Hudson St**  
**Apt 3406**

City **Jersey City** State **NJ** Zip Code **07302**

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

Name of Employer **BNY Mellon** Occupation **Executive**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt **11 / 15 / 2013**  
Transaction ID : **SA11Ai-CN38107**

Amount of Each Receipt this Period **500**

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Leslie P DeFelice**

Mailing Address **76 16th St**  
**Suite 200**

City **Wheeling** State **WV** Zip Code **26003**

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

Name of Employer **DeFelice Care Inc.** Occupation **CEO**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt **12 / 06 / 2013**  
Transaction ID : **SA11Ai-CN38557**

Amount of Each Receipt this Period **1200**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Mahlon Delong**

Mailing Address **1299 Amherst Court**

City **Marietta** State **GA** Zip Code **30068**

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

Name of Employer **FHL Bank Atlanta** Occupation **First Vice President**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt **12 / 12 / 2013**  
Transaction ID : **SA11Ai-CN38839**

Amount of Each Receipt this Period **250**

**SUBTOTAL** of Receipts This Page (optional)..... **1950.00**

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

1402002130

**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 64 OF 431
	<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. Joe Deneault</b>		Date of Receipt M M / D D / Y Y Y Y 12 09 2013	
Mailing Address 1502 Grandview Dr		<b>Transaction ID : SA11AI-CN38306</b>	
City Charleston	State WV	Zip Code 25302	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 Terradon Corporation	Occupation engineer		
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>B. Ms. Jennifer A Dial</b>		Date of Receipt M M / D D / Y Y Y Y 12 06 2013	
Mailing Address 1206 Fairfax Ln		<b>Transaction ID : SA11AI-CN38541</b>	
City Cross Lanes	State WV	Zip Code 25313	Amount of Each Receipt this Period \$ 250
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 250	
Name of Employer Appalachian Tire Products	Occupation President		
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. Walter B Dial Jr</b>		Date of Receipt M M / D D / Y Y Y Y 12 06 2013	
Mailing Address 1578 Kanawha Blvd E Apt 5D		<b>Transaction ID : SA11AI-CN38537</b>	
City Charleston	State WV	Zip Code 25311	Amount of Each Receipt this Period \$ 2000
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 2000	
Name of Employer Appalachian Tire Products	Occupation Executive		
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).....	\$ 3250.00
<b>TOTAL</b> This Period (last page this line number only).....	\$ 3250.00

1402002131



**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 431  
(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. Kim Dickstein**

Mailing Address 120 End Ave E  
Apt 7B

City State Zip Code  
New York NY 10028

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  
2000

Date of Receipt  
MM / DD / YYYY  
11 / 15 / 2013

Transaction ID : SA11Ai-CN38106

Amount of Each Receipt this Period  
2000

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Brian C Diffell**

Mailing Address 2560 Nicky Ln

City State Zip Code  
Alexandria VA 22311

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

Name of Employer Requested Occupation Requested  
US House Of Reps-Republican Whip Senior Policy Advisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
MM / DD / YYYY  
12 / 03 / 2013

Transaction ID : SA11Ai-CN38328

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Shirley S Dissen**

Mailing Address 2150 Presidential Dr

City State Zip Code  
Charleston WV 25314

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

Name of Employer Requested Occupation Requested  
Housewife Housewife

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
MM / DD / YYYY  
12 / 23 / 2013

Transaction ID : SA11Ai-CN39135

Amount of Each Receipt this Period  
100

**SUBTOTAL** of Receipts This Page (optional)..... 3100.00

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

14020022132

**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 431
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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. Ann C Donahue**

Mailing Address 1001 Liberty Ave  
Ste 850

City State Zip Code  
Pittsburgh PA 15222

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
M M / D D / Y Y Y Y  
12 23 2013

Transaction ID : SA11AI-CN39179

Amount of Each Receipt this Period  
2600

**B.** Full Name (Last, First, Middle Initial)  
**Mr. J. Christopher Donahue**

Mailing Address 1001 Liberty Ave  
Ste 850

City State Zip Code  
Pittsburgh PA 15222

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

Name of Employer Occupation  
Federated Investors Inc. C.E.O

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
M M / D D / Y Y Y Y  
12 23 2013

Transaction ID : SA11AI-CN39180

Amount of Each Receipt this Period  
2600

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Donald Donohue**

Mailing Address 1054 31st ST NW  
Ste 316

City State Zip Code  
Washington DC 20007

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

Name of Employer Occupation  
Adelphi Capital Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y  
12 31 2013

Transaction ID : SA11AI-CN39241

Amount of Each Receipt this Period  
1000

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

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

6200.00

14020022133

**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 67 OF 431
	<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. Ralph S. Dover</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 91 Alpine Dr		Transaction ID : SA11AI-CN38173
City Bunker Hill	State WV	Zip Code 25413-3207
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 100
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	

Full Name (Last, First, Middle Initial) <b>B. Mr. Robert F Dozier Jr</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address 4235 Regency Ct NW		Transaction ID : SA11AI-CN38317
City Atlanta	State GA	Zip Code 30327
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 500
Name of Employer FHL Bank	Occupation Vice 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>C. Mr. Marion H Drews</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 10 / 2013
Mailing Address 27 Forest Hills		Transaction ID : SA11AI-CN38700
City Wheeling	State WV	Zip Code 26003
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 250
Name of Employer Nephrology Associates Inc.	Occupation Advisor	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 800	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	\$ 850.00
<b>TOTAL</b> This Period (last page this line number only).....	\$ 850.00

14020022134

**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 68 OF 431
	<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. Woodrow Duba</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 14 / 2013
Mailing Address 140 Ingersoll Drive			<b>Transaction ID : SA11AI-CN38260</b>
City Oak Hill	State WV	Zip Code 25901	
FEC ID number of contributing federal political committee. <b>C</b>			Amount of Each Receipt this Period \$ . . . . . 1000
Name of Employer Ant Wood LLC	Occupation Owner		Amount of Each Receipt this Period \$ . . . . . 1000
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. Lysander L. Dudley Sr.</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 07 / 2013
Mailing Address 3000 Ocean Drive 39H N			<b>Transaction ID : SA11AI-CN38030</b>
City West Palm Beach	State FL	Zip Code 33404	
FEC ID number of contributing federal political committee. <b>C</b>			Amount of Each Receipt this Period \$ . . . . . 1000
Name of Employer Retired	Occupation Retired		Amount of Each Receipt this Period \$ . . . . . 1000
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. Edward Dyson</b>			Date of Receipt M M / D D / Y Y Y Y 12 / 04 / 2013
Mailing Address 815 Connecticut Ave NW # 900			<b>Transaction ID : SA11AI-CN38356</b>
City Washington	State DC	Zip Code 20006	
FEC ID number of contributing federal political committee. <b>C</b>			Amount of Each Receipt this Period \$ . . . . . 1000
Name of Employer Baker And Mackenzie	Occupation Attorney		Amount of Each Receipt this Period \$ . . . . . 1000
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).....	\$ . . . . .

14020022155

**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 69 OF 431	
	<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

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

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Keith Earles**

Mailing Address 1800 Military Rd

City State Zip Code  
Huntington WV 25701-5301

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

Name of Employer Occupation  
Locomote Express LLC management

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250

Date of Receipt  
M M / D D / Y Y Y Y  
12 31 2013

Transaction ID : SA11AI-CN39198

Amount of Each Receipt this Period  
250

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Michael Eckhart**

Mailing Address 234 Prince George Street

City State Zip Code  
Annapolis MD 21401

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

Name of Employer Occupation  
Citigroup Banking

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250

Date of Receipt  
M M / D D / Y Y Y Y  
12 12 2013

Transaction ID : SA11AI-CN39018

Amount of Each Receipt this Period  
250

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Ellen M Edmundson**

Mailing Address 501 Slaters Ln  
Apt 1201

City State Zip Code  
Alexandria VA 22314

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

Name of Employer Occupation  
Cohn & Marko LLP Lawyer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
M M / D D / Y Y Y Y  
12 05 2013

Transaction ID : SA11AI-CN38429

Amount of Each Receipt this Period  
2600  
Reattributed from James Edmundson

**[MEMO ITEM]**  
Reattribution

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

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

500.00

1402002136

**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 70 OF 431
	<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. James K Edmundson Jr</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 05 / 2013
Mailing Address 501 Slaters Ln Apt 1201		Transaction ID : SA11AI-CN38392
City Alexandria	State VA	
Zip Code 22314		Amount of Each Receipt this Period \$ 5200
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 5200		

B. Full Name (Last, First, Middle Initial) <b>Mr. James K Edmundson Jr</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 05 / 2013
Mailing Address 501 Slaters Ln Apt 1201		Transaction ID : SA11AI-CN38428
City Alexandria	State VA	
Zip Code 22314		Amount of Each Receipt this Period \$ -2600 Reattributed to Ellen Edmundson
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	[MEMO ITEM] Reattributed
Election Cycle-to-Date 2600		

C. Full Name (Last, First, Middle Initial) <b>Mr. Billy J. Edwards</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 29 / 2013
Mailing Address 144 Billy Joyce Ln		Transaction ID : SA11AI-CN37908
City Kearneysville	State WV	
Zip Code 25430		Amount of Each Receipt this Period \$ 35
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 250		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	\$ 5235.00
<b>TOTAL</b> This Period (last page this line number only).....	\$

14020022137

**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 431
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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. Billy J. Edwards</b>		Date of Receipt MM / DD / YYYY 12 / 10 / 2013
Mailing Address <b>144 Billy Joyce Ln</b>		Transaction ID : <b>SA11Ai-CN38715</b>
City <b>Kearneysville</b>	State <b>WV</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>50</b>
Name of Employer <b>retired</b>	Occupation <b>Retired</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>Mr. Daniel G Eison</b>		Date of Receipt MM / DD / YYYY 12 / 06 / 2013
Mailing Address <b>695 Shasteen Bend Rd</b>		Transaction ID : <b>SA11Ai-CN38504</b>
City <b>Winchester</b>	State <b>TN</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1600</b>
Name of Employer <b>Retired</b>	Occupation <b>Retired</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. Ned B Eller</b>		Date of Receipt MM / DD / YYYY 11 / 13 / 2013
Mailing Address <b>PO Box 146</b>		Transaction ID : <b>SA11Ai-CN38213</b>
City <b>Ghent</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>Self Employed</b>	Occupation <b>Architect</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)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1900.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

14020022138

**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 72 OF 431
	<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. Jane Ellington</b>		Date of Receipt MM / DD / YYYY 12 / 31 / 2013
Mailing Address 108 White St		Transaction ID : SA11Ai-CN39206
City Lexington	State VA	
Zip Code 24450		Amount of Each Receipt this Period \$ 250
FEC ID number of contributing federal political committee. C		
Name of Employer Rockbridge Co. Schools	Occupation Teacher	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>B. Ms. Karen Ellis</b>		Date of Receipt MM / DD / YYYY 11 / 11 / 2013
Mailing Address 501 Mountview Dr		Transaction ID : SA11Ai-CN38124
City Elkview	State WV	
Zip Code 25071		Amount of Each Receipt this Period \$ 500
FEC ID number of contributing federal political committee. C		
Name of Employer Self Employed	Occupation Tax Preparer	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. Mr. John Emling</b>		Date of Receipt MM / DD / YYYY 12 / 10 / 2013
Mailing Address 690 America Court		Transaction ID : SA11Ai-CN39015
City Davidsonville	State MD	
Zip Code 21035		Amount of Each Receipt this Period \$ 500
FEC ID number of contributing federal political committee. C		
Name of Employer Citigroup Mgmt Corp	Occupation Sr. Gov't Affairs	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).....	\$ 1250.00
<b>TOTAL</b> This Period (last page this line number only).....	\$

1402002139



**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 73 OF 431
	<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. Karen Evans</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 22 / 2013
Mailing Address 218 Firefly Ln		Transaction ID : SA11Ai-CN37689
City Martinsburg	State WV	Zip Code 25403-1068
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 100
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 200	

Full Name (Last, First, Middle Initial) <b>B. Mrs. Karen Evans</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address 218 Firefly Ln		Transaction ID : SA11Ai-CN38644
City Martinsburg	State WV	Zip Code 25403-1068
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 100
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 300	

Full Name (Last, First, Middle Initial) <b>C. Mr. Marshall Evans</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 06 / 2013
Mailing Address 3657 Peachtree Rd NE Unit 11B		Transaction ID : SA11Ai-CN38505
City Atlanta	State GA	Zip Code 30319
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 1000
Name of Employer Dickinson Co.	Occupation Executive	
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).....	\$ 1200.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022140

**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 74 OF 431
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<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>A. Mr. Paul J Evanson</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 17 / 2013
Mailing Address 11696 Lost Tree Way		Transaction ID : SA11Ai-CN38748
City North Palm Beach	State FL	
Zip Code 33408		Amount of Each Receipt this Period \$ 1000
FEC ID number of contributing federal political committee. C		
Name of Employer Allegheny Energy Service	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>B. Mr. George J Farah</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 06 / 2013
Mailing Address 1170 Bailey Farm Rd.		Transaction ID : SA11Ai-CN37979
City Greensburg	State PA	
Zip Code 15601		Amount of Each Receipt this Period \$ 250
FEC ID number of contributing federal political committee. C		
Name of Employer First Energy	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>C. Mr. Daniel S Farb</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 06 / 2013
Mailing Address 21 Puddingstone Lane		Transaction ID : SA11Ai-CN37982
City Newton	State MA	
Zip Code 02459		Amount of Each Receipt this Period \$ 1000
FEC ID number of contributing federal political committee. C		
Name of Employer Highfields Capital Management LP	Occupation Business Manager	
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).....	\$ 2250.00
<b>TOTAL</b> This Period (last page this line number only).....	\$ 2250.00

1402002141

**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 431	
(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. James D Farrar Jr</b>		Date of Receipt MM / DD / YYYY 12 / 04 / 2013
Mailing Address 17 Grey Dove Rd		Transaction ID : SA11AI-CN38373
City Lexington	State VA	Zip Code 24460
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer Washington & Lee University	Occupation Senior Assistant To The President	
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. Leonard Fichter</b>		Date of Receipt MM / DD / YYYY 10 / 22 / 2013
Mailing Address 818 Sherwood Cir		Transaction ID : SA11AI-CN37641
City Hurricane	State WV	Zip Code 25526
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	

Full Name (Last, First, Middle Initial) <b>C. Mrs. Sandra L Fichter</b>		Date of Receipt MM / DD / YYYY 12 / 10 / 2013
Mailing Address 18 Sherwood Cir		Transaction ID : SA11AI-CN38771
City Hurricane	State WV	Zip Code 25526
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Dr. Leonard A. Fichter Inc.	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).....	1250.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022142

**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 76 OF 431
	<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. Joseph E Fidler</b>		Date of Receipt M M / D D / Y Y Y Y 12 05 2013
Mailing Address 379 Fidhill Ln		<b>Transaction ID : SA11Ai-CN38453</b>
City Lost Creek	State WV	Zip Code 26385-6923
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400
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 800	

Full Name (Last, First, Middle Initial) <b>Mr. Peter Fleiss</b>		Date of Receipt M M / D D / Y Y Y Y 11 07 2013
Mailing Address 51 Commonwealth Ave Unit D		<b>Transaction ID : SA11Ai-CN37977</b>
City Boston	State MA	Zip Code 02116
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000
Name of Employer Highfields Capital	Occupation Finance	
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. Carl Russell Fletcher III</b>		Date of Receipt M M / D D / Y Y Y Y 12 04 2013
Mailing Address 35637 Snake Hill Rd		<b>Transaction ID : SA11Ai-CN38385</b>
City Middleburg	State VA	Zip Code 20117
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250
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 250	

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

14020022143

**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 431  
(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. Edwin F. Flowers**

Mailing Address 464 Aspen St

City State Zip Code  
Morgantown WV 26505

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

Date of Receipt  
M M / D D / Y Y Y Y  
12 31 2013

Transaction ID : SA11Ai-CN39267

Amount of Each Receipt this Period  
500

**B.** Full Name (Last, First, Middle Initial)  
**Mr. James Forese**

Mailing Address 64 Summersweet Lane

City State Zip Code  
New Canaan CT 06840

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

Name of Employer Occupation  
Citigroup Co-President

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5000

Date of Receipt  
M M / D D / Y Y Y Y  
12 11 2013

Transaction ID : SA11Ai-CN39017

Amount of Each Receipt this Period  
5000

**C.** Full Name (Last, First, Middle Initial)  
**Mr. James Forese**

Mailing Address 64 Summersweet Lane

City State Zip Code  
New Canaan CT 06840

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

Name of Employer Occupation  
Citigroup Co-President

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
M M / D D / Y Y Y Y  
12 12 2013

Transaction ID : SA11Ai-CN39292

Amount of Each Receipt this Period  
-2400  
Redesignated to General 2014

**[MEMO ITEM]**  
Redesignated

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

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

5500.00

14020022144

**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 78 OF 431
	<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. Mr. James Forese**  
Full Name (Last, First, Middle Initial)

Mailing Address 64 Summersweet Lane

City State Zip Code  
New Canaan CT 06840

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

Name of Employer Occupation  
Citigroup Co-President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000

Date of Receipt  
M M / D D / Y Y Y Y  
12 12 2013

Transaction ID : SA11Ai-CN39293

Amount of Each Receipt this Period  
2400

Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

**B. Mr. Scott Fox**  
Full Name (Last, First, Middle Initial)

Mailing Address 215 Pine Rd

City State Zip Code  
Sewickley PA 15143

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

Name of Employer Occupation  
The Orchard at Foxcrest CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y  
11 12 2013

Transaction ID : SA11Ai-CN38174

Amount of Each Receipt this Period  
1000

**C. Mr. W Heywood Fralin**  
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 29600

City State Zip Code  
Roanoke VA 24018

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

Name of Employer Occupation  
Medical Facilities Of America Inc Chairman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
M M / D D / Y Y Y Y  
10 08 2013

Transaction ID : SA11Ai-CN37335

Amount of Each Receipt this Period  
2600

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

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

3600.00

14020022145

**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 431  
(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. Ardath S Francke**

Mailing Address 1414 Connell Rd

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 **11 / 07 / 2013**

Transaction ID : **SA11AI-CN38047**

Amount of Each Receipt this Period **250**

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

Mailing Address 22 Wild Acre Road

City Charleston State WV Zip Code 25314

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

Name of Employer Craig Patton House Occupation Executive Director

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt **10 / 22 / 2013**

Transaction ID : **SA11AI-CN37716**

Amount of Each Receipt this Period **250**

**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 Occupation Attorney

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1700**

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

Transaction ID : **SA11AI-CN38532**

Amount of Each Receipt this Period **1000**

**SUBTOTAL** of Receipts This Page (optional)..... **1500.00**

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

14020022146

**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 80 OF 431	
	<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. Raymond Frere**

Mailing Address 180 Chancery Drive

City State Zip Code  
Morgantown WV 26505

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

Name of Employer Occupation  
State Of WV Judge

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450

Date of Receipt  
M M / D D / Y Y Y Y  
12 16 2013

Transaction ID : SA11Ai-CN38834

Amount of Each Receipt this Period  
300

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Valerie Friedman**

Mailing Address 63 Goddard Ave

City State Zip Code  
Brookline MA 02445

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

Name of Employer Occupation  
Bracebridge Capital LLC Business Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y  
11 06 2013

Transaction ID : SA11Ai-CN37999

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Nancy G Friend**

Mailing Address 195 Valley Ct

City State Zip Code  
Bruceeton Mills WV 26525

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

Name of Employer Occupation  
Alyeska Inc. Land Management

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300

Date of Receipt  
M M / D D / Y Y Y Y  
10 28 2013

Transaction ID : SA11Ai-CN37805

Amount of Each Receipt this Period  
100

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

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

1400.00

14020022147



**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 81 OF 431
	<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. Gary Garczynski**

Mailing Address **200 S Fairfax Street  
Apt. 16**

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

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

Name of Employer **National Capital Land & Development** Occupation **President**

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
M M / D D / Y Y Y Y  
**12 23 2013**

Transaction ID : **SA11Ai-CN39178**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. James C Gardill**

Mailing Address **408 Jefferson Ave**

City **Glen Dale** State **WV** Zip Code **26038**

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  
**10 22 2013**

Transaction ID : **SA11Ai-CN37617**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Billy Garner**

Mailing Address **25 Chatwood Rd**

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

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  
**11 26 2013**

Transaction ID : **SA11Ai-CN38986**

Amount of Each Receipt this Period  
**100**

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

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

**1100.00**

14020022148

**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 82 OF 431
	<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. Courtney Geduldig</b>		Date of Receipt M M / D D / Y Y Y Y 11 04 2013	
Mailing Address 1423 Spring Vale Ave		<b>Transaction ID : SA11AI-CN38965</b>	
City State Zip Code Mc Lean VA 22101-3528	Amount of Each Receipt this Period \$ 500		
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 500	
Name of Employer Occupation McGraw Hill Financial VP Global Regulation	Receipt For: 2014 Election Cycle-to-Date <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>B. Mrs. Courtney Geduldig</b>		Date of Receipt M M / D D / Y Y Y Y 12 04 2013	
Mailing Address 1423 Spring Vale Ave		<b>Transaction ID : SA11AI-CN39011</b>	
City State Zip Code Mc Lean VA 22101-3528	Amount of Each Receipt this Period \$ 500		
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 1000	
Name of Employer Occupation McGraw Hill Financial VP Global Regulation	Receipt For: 2014 Election Cycle-to-Date <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>C. Mrs. Courtney Geduldig</b>		Date of Receipt M M / D D / Y Y Y Y 12 31 2013	
Mailing Address 1423 Spring Vale Ave		<b>Transaction ID : SA11AI-CN39062</b>	
City State Zip Code Mc Lean VA 22101-3528	Amount of Each Receipt this Period \$ 500		
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 1500	
Name of Employer Occupation McGraw Hill Financial VP Global Regulation	Receipt For: 2014 Election Cycle-to-Date <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

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

14020022149

**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 83 OF 431
	<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. Sam Geduldig</b>		Date of Receipt M M / D D / Y Y Y Y 12 04 2013
Mailing Address 1423 Spring Vale Ave		<b>Transaction ID : SA11Ai-CN38369</b>
City State Zip Code Mc Lean VA 22101-3528	Amount of Each Receipt this Period \$ 250	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 250
Name of Employer Clark Lytle & Geduldig	Occupation Partner	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date \$ 2750	

Full Name (Last, First, Middle Initial) <b>B. Mr. Kirk George</b>		Date of Receipt M M / D D / Y Y Y Y 11 12 2013
Mailing Address 417 Virginia Ave		<b>Transaction ID : SA11Ai-CN38193</b>
City State Zip Code Petersburg WV 26847	Amount of Each Receipt this Period \$ 250	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 250
Name of Employer State Farm Insurance Co.	Occupation Insurance Agent	
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. Michael Gerber</b>		Date of Receipt M M / D D / Y Y Y Y 12 31 2013
Mailing Address 900 Southwood Heights		<b>Transaction ID : SA11Ai-CN39059</b>
City State Zip Code Huntington WV 25701	Amount of Each Receipt this Period \$ 25	
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 \$ 200	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	\$ 525.00
<b>TOTAL</b> This Period (last page this line number only).....	\$

14020022150

**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 431  
(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. Thomas Gibbons**

Mailing Address 341 Hartshorn Dr

City State Zip Code  
Short Hills NJ 07078

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

Name of Employer Occupation  
BNY Mellon Inc. Banker-Vice Chairman & CFO

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date  
2500

Date of Receipt  
M M / D D / Y Y Y Y  
10 03 2013

Transaction ID : SA11Ai-CN36852

Amount of Each Receipt this Period  
2500

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Christopher Giblin**

Mailing Address 1304 Chancel Place

City State Zip Code  
Alexandria VA 22314

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

Name of Employer Occupation  
Oglivy CEO

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y  
10 31 2013

Transaction ID : SA11Ai-CN38962

Amount of Each Receipt this Period  
500

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Thomas A Gilliam**

Mailing Address PO Box 1167

City State Zip Code  
Williamson WV 25661

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

Name of Employer Occupation  
Electric Lince Co Inc. Manager

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date  
300

Date of Receipt  
M M / D D / Y Y Y Y  
12 06 2013

Transaction ID : SA11Ai-CN38503

Amount of Each Receipt this Period  
150

**SUBTOTAL** of Receipts This Page (optional)..... 3150.00

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

14020022151

**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 431  
(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. J Edward C Gilmartin**

Mailing Address **27234 Ranchland Vw**

City **Boerne** State **TX** Zip Code **78006**

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

Name of Employer **Capture RX** Occupation **Executive VP**

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**12 09 2013**

Transaction ID : **SA11Ai-CN38593**

Amount of Each Receipt this Period  
**500**

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

Mailing Address **1411 Meadowcrest Dr**

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 **350**

Date of Receipt  
 M M / D D / Y Y Y Y  
**12 16 2013**

Transaction ID : **SA11Ai-CN38828**

Amount of Each Receipt this Period  
**150**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Rick Glaser**

Mailing Address **229 N Church St Unit 303**

City **Charlotte** State **NC** Zip Code **28202-2260**

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

Name of Employer **Parker Poe** 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  
**12 31 2013**

Transaction ID : **SA11Ai-CN39058**

Amount of Each Receipt this Period  
**250**

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

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

**900.00**

14020022152

**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 431  
(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. Todd A Goldman**

Mailing Address 10 Grosscup Rd

City Charleston State WV Zip Code 25314

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

Name of Employer Goldman & Associates Occupation Real Estate

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 400

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 17 2013

Transaction ID : SA11Ai-CN38737

Amount of Each Receipt this Period  
 400

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Ned Goldsmith**

Mailing Address PO Box 1165

City Cheyenne State WY Zip Code 82003

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

Name of Employer self-employed Occupation rancher

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 500

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 11 2013

Transaction ID : SA11Ai-CN38131

Amount of Each Receipt this Period  
 500

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Donna C Goodrich**

Mailing Address 135 Ashbourne Lake Ct

City Clemmons State NC Zip Code 27012

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

Name of Employer FHL Bank Occupation Chairman

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 500

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 12 2013

Transaction ID : SA11Ai-CN38889

Amount of Each Receipt this Period  
 500

**SUBTOTAL** of Receipts This Page (optional)..... 1400.00

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

1402002153

**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 431  
(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. Steven H Gordon**

Mailing Address 1801 Briar Ridge Court

City State Zip Code  
Mc Lean VA 22101

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

Name of Employer Occupation  
Steven H. Gordon & Associates Owner

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
MM / DD / YYYY  
11 / 21 / 2013

Transaction ID : SA11AI-CN38277

Amount of Each Receipt this Period  
500

**B.** Full Name (Last, First, Middle Initial)  
**Mr. F.T. Graff Jr**

Mailing Address 108 Graff Ln

City State Zip Code  
Charleston WV 25304

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

Name of Employer Occupation  
Bowles Rice Attorney

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
MM / DD / YYYY  
12 / 06 / 2013

Transaction ID : SA11AI-CN38525

Amount of Each Receipt this Period  
100

**C.** Full Name (Last, First, Middle Initial)  
**Mr. C Boyden Gray**

Mailing Address 1534 28th St NW

City State Zip Code  
Washington DC 20007

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

Name of Employer Occupation  
Self Attorney

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5200

Date of Receipt  
MM / DD / YYYY  
12 / 12 / 2013

Transaction ID : SA11AI-CN38884

Amount of Each Receipt this Period  
5200

**SUBTOTAL** of Receipts This Page (optional)..... 5800.00

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

14020022154

**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 88 OF 431
	<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 Boyden Gray</b>		Date of Receipt M M / D D / Y Y Y Y 12 13 2013
Mailing Address 1534 28th St NW		Transaction ID : SA11Ai-CN39294
City Washington	State DC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -2600
Name of Employer Self	Occupation Attorney	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 2600	[MEMO ITEM] Redesignated

Full Name (Last, First, Middle Initial) <b>Mr. C Boyden Gray</b>		Date of Receipt M M / D D / Y Y Y Y 12 13 2013
Mailing Address 1534 28th St NW		Transaction ID : SA11Ai-CN39295
City Washington	State DC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600
Name of Employer Self	Occupation Attorney	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 5200	[MEMO ITEM] Redesignation

Full Name (Last, First, Middle Initial) <b>Dr. David Gray</b>		Date of Receipt M M / D D / Y Y Y Y 10 11 2013
Mailing Address 347 Baker Lane Apt. 4104		Transaction ID : SA11Ai-CN37365
City Charleston	State WV	
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	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022155



**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 431
(check only one)	
<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>Dr. David Gray</b>		Date of Receipt MM / DD / YYYY 12 / 10 / 2013
Mailing Address 347 Baker Lane Apt. 4104		Transaction ID : SA11AI-CN38693
City Charleston	State WV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 1600
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. Robert J Green</b>		Date of Receipt MM / DD / YYYY 12 / 09 / 2013
Mailing Address 325 7th St NW		Transaction ID : SA11AI-CN38611
City Washington	State DC	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 250
Name of Employer Natl Council Of Chain Restaurants	Occupation Government Relations	
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. Lawrence Greenberg</b>		Date of Receipt MM / DD / YYYY 11 / 06 / 2013
Mailing Address 4 Nottingham Ave Unit D		Transaction ID : SA11AI-CN38000
City Weston	State MA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 1000
Name of Employer Alydar Capital	Occupation Business Manager	
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).....	2850.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022156

**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 431
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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. James Gregory</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 24 / 2013
Mailing Address 339 Roscommon Drive		Transaction ID : SA11Ai-CN39031
City Bristol	State TN	Zip Code 37620
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600
Name of Employer SJ Strategic Investments LLC	Occupation Attorney	
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. David Grenader</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 06 / 2013
Mailing Address 4708 Caroline		Transaction ID : SA11Ai-CN38003
City Houston	State TX	Zip Code 77004
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Self Employed	Occupation Real Estate Manager	
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. Roger Griffith</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 803 E Donnelly Rd.		Transaction ID : SA11Ai-CN39254
City Charleston	State WV	Zip Code 25304
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100
Name of Employer Gray Griffith & Mays A.C.	Occupation Partner	
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).....	3700.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022157

**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 91 OF 431
	<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. Edward K Grose**

Mailing Address 2305 Winchester Road

City	State	Zip Code
Charleston	WV	25303-3018

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 **400**

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 05 2013

Transaction ID : **SA11AI-CN38458**

Amount of Each Receipt this Period  
 \$ 200

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

Mailing Address 5204 Valerie St.

City	State	Zip Code
Bellaire	TX	77401

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

Name of Employer	Occupation
Kirby Corp KEX	President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 12 2013

Transaction ID : **SA11AI-CN38849**

Amount of Each Receipt this Period  
 \$ 2600

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Priscilla M Haden**

Mailing Address 15 Quarry Ridge

City	State	Zip Code
Charleston	WV	25304

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 **1050**

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 16 2013

Transaction ID : **SA11AI-CN38825**

Amount of Each Receipt this Period  
 \$ 500

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

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

\$ 3300.00

14020022158

**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 92 OF 431
	<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. Robert E Haden**

Mailing Address **PO Box 2639**

City **Morgantown** State **WV** Zip Code **26502-2639**

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 **2600**

Date of Receipt  
 M M / D D / Y Y Y Y  
**12 06 2013**

Transaction ID : **SA11AI-CN38533**

Amount of Each Receipt this Period  
**700**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Phil Hager**

Mailing Address **Post Office Box 283**

City **Hurricane** State **WV** Zip Code **25526**

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 **200**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 11 2013**

Transaction ID : **SA11AI-CN37353**

Amount of Each Receipt this Period  
**100**

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

Mailing Address **311 Pleasant Ave  
PO Drawer 750**

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 **300**

Date of Receipt  
 M M / D D / Y Y Y Y  
**12 10 2013**

Transaction ID : **SA11AI-CN38878**

Amount of Each Receipt this Period  
**200**

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

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

**1000.00**

14020022159

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 93 OF 431	
	(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. Michael J Halloran</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 06 / 2013
Mailing Address 505 Tremont Street # 1002		Transaction ID : SA11Ai-CN37987
City Boston	State MA	
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 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>B. Ms. Gladys Hamer</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 21 / 2013
Mailing Address 143 N. Oakview Drive		Transaction ID : SA11Ai-CN37552
City Kenova	State WV	
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 2000
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. Mr. Kyle Hamilton</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 23 / 2013
Mailing Address 935 Pine Hill Dr		Transaction ID : SA11Ai-CN39087
City Fairmont	State WV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200
Name of Employer Wilson Ford	Occupation Owner	Election Cycle-to-Date 400
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).....	

14020022160

**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 94 OF 431
	<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. Marie A Hamly**

Mailing Address **1514 Blackstone Cir**

City **Sun City Center** State **FL** Zip Code **33573-5218**

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  
**10 22 2013**

Transaction ID : **SA11Ai-CN37691**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Donald Hamm**

Mailing Address **1587 Nottingham Rd**

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 **200**

Date of Receipt  
M M / D D / Y Y Y Y  
**12 23 2013**

Transaction ID : **SA11Ai-CN39170**

Amount of Each Receipt this Period  
**100**

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

Mailing Address **5413 Blackistone Rd**

City **Bethesda** State **MD** Zip Code **20816**

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

Name of Employer **FHL Bank** Occupation **Vice Chair**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
M M / D D / Y Y Y Y  
**12 03 2013**

Transaction ID : **SA11Ai-CN38319**

Amount of Each Receipt this Period  
**500**

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

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

**700.00**

14020022161

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

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

FOR LINE NUMBER: PAGE 95 OF 431  
(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. Christine A Hansen**

Mailing Address 1325 Fern St NW

City State Zip Code  
Washington DC 20012

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  
300

Date of Receipt  
M M / D D / Y Y Y Y  
12 31 2013

Transaction ID : **SA11Ai-CN39208**

Amount of Each Receipt this Period  
100

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Hank A Happy**

Mailing Address 118 Earle Rd

City State Zip Code  
Charles Town WV 25414

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

Name of Employer Occupation  
Continental Airlines Airline Pilot

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date  
250

Date of Receipt  
M M / D D / Y Y Y Y  
10 29 2013

Transaction ID : **SA11Ai-CN37940**

Amount of Each Receipt this Period  
250

**C.** Full Name (Last, First, Middle Initial)  
**Mr. John Hardesty**

Mailing Address 3120 Greystone Dr N

City State Zip Code  
Morgantown WV 26508

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  
1500

Date of Receipt  
M M / D D / Y Y Y Y  
10 28 2013

Transaction ID : **SA11Ai-CN37862**

Amount of Each Receipt this Period  
500

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

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

850.00

14020022162

**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 431  
(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. Charles Hare**

Mailing Address 264 Glenwood Road

City State Zip Code  
Wheeling WV 26003-6618

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  
380

Date of Receipt  
M M / D D / Y Y Y Y  
10 28 2013

Transaction ID : SA11Ai-CN37799

Amount of Each Receipt this Period  
50

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Frank Harkins**

Mailing Address 235 Crystal Ave

City State Zip Code  
Beckley WV 25801

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  
11 14 2013

Transaction ID : SA11Ai-CN38286

Amount of Each Receipt this Period  
200

**C.** Full Name (Last, First, Middle Initial)  
**Mr. James H Harless**

Mailing Address PO Box 1210

City State Zip Code  
Gilbert WV 25621

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

Name of Employer Occupation  
International Industries Executive

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y  
12 17 2013

Transaction ID : SA11Ai-CN38736

Amount of Each Receipt this Period  
1000

**SUBTOTAL** of Receipts This Page (optional)..... 1250.00

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

1402002163



**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 97 OF 431
	<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. C. William Harris**

Mailing Address **7591 Fork Ridge Rd**

City <b>Glen Easton</b>	State <b>WV</b>	Zip Code <b>26039</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  
**200**

Date of Receipt  
M M / D D / Y Y Y Y  
**12 / 10 / 2013**

Transaction ID : **SA11AI-CN38879**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Marjorie R Harris**

Mailing Address **g West 57th St.**

City <b>New York</b>	State <b>NY</b>	Zip Code <b>10019</b>
-------------------------	--------------------	--------------------------

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

Name of Employer <b>Homemaker</b>	Occupation <b>Homemaker</b>
--------------------------------------	--------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**2000**

Date of Receipt  
M M / D D / Y Y Y Y  
**11 / 13 / 2013**

Transaction ID : **SA11AI-CN38222**

Amount of Each Receipt this Period  
**2000**

**C.** Full Name (Last, First, Middle Initial)  
**Dr. David W. Harshberger**

Mailing Address **652 N. Main St.**

City <b>New Martinsville</b>	State <b>WV</b>	Zip Code <b>26155</b>
---------------------------------	--------------------	--------------------------

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

Name of Employer <b>Self</b>	Occupation <b>Physician</b>
---------------------------------	--------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
M M / D D / Y Y Y Y  
**12 / 16 / 2013**

Transaction ID : **SA11AI-CN38823**

Amount of Each Receipt this Period  
**250**

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

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

**2350.00**

14020022164

**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 431	
(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. Gerard L Hassell</b>		Date of Receipt MM / DD / YYYY 11 / 13 / 2013
Mailing Address 49 Algonquin Dr.		Transaction ID : SA11AI-CN38228
City Chappaqua	State NY	Zip Code 10514
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2500	
Name of Employer BNY Mellon	Occupation Finance	
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. Mrs. Harriette Hatfield</b>		Date of Receipt MM / DD / YYYY 11 / 07 / 2013
Mailing Address PO Box 122		Transaction ID : SA11AI-CN38075
City Saint Marys	State WV	Zip Code 26170
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>C. Mr. James Hatfield</b>		Date of Receipt MM / DD / YYYY 12 / 31 / 2013
Mailing Address 7785 Rock Hill		Transaction ID : SA11AI-CN39078
City Cincinnati	State OH	Zip Code 45243
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000	
Name of Employer River Trading Company	Occupation Coal Business	
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).....	3750.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022165

**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 431  
(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. Linda M. Haughey**

Mailing Address 1837 Sunset View

City State Zip Code  
Milton WV 25541

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

Name of Employer Occupation  
Self Employed McDonalds Franchise

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
M M / D D / Y Y Y Y  
10 11 2013

Transaction ID : SA11Ai-CN37351

Amount of Each Receipt this Period  
500

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Susan M Haupt**

Mailing Address 405 Quarry Pointe

City State Zip Code  
Charleston WV 25304

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  
650

Date of Receipt  
M M / D D / Y Y Y Y  
10 25 2013

Transaction ID : SA11Ai-CN37732

Amount of Each Receipt this Period  
200

**C.** Full Name (Last, First, Middle Initial)  
**Mr. James W Hawkins**

Mailing Address 2604 N Nelson St

City State Zip Code  
Arlington VA 22207

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

Name of Employer Occupation  
Bergner Bockorny Inc. Attorney

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y  
12 09 2013

Transaction ID : SA11Ai-CN38591

Amount of Each Receipt this Period  
1000

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

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

1700.00

14020022166

**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 100 OF 431
	<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. Robert Hayes</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 23 / 2013
Mailing Address PO Box 954		Transaction ID : SA11Ai-CN39085
City Concord	State NC	Zip Code 28026
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>B. Mr. Thomas Hayes</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 29 / 2013
Mailing Address Five Comstock Pl		Transaction ID : SA11AI-CN39007
City Charleston	State WV	Zip Code 25314
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 1000
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 1000	

Full Name (Last, First, Middle Initial) <b>C. Dr. Marta Hayne</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 4069 Palmetto Dr		Transaction ID : SA11AI-CN38925
City Lexington	State KY	Zip Code 40513
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 600
Name of Employer Radiation Oncology Of Lexington	Occupation Physician	
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).....	\$ 2600.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022167

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

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

FOR LINE NUMBER: PAGE 101 OF 431  
(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. Julie Haynes**

Mailing Address 536 N Inwood Drive

City State Zip Code  
Huntington WV 25701

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

Name of Employer Occupation  
Not Employed Not Employed

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
10 25 2013

Transaction ID : SA11Ai-CN37735

Amount of Each Receipt this Period  
250

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Pryce H Haynes II**

Mailing Address 1111 6th Ave

City State Zip Code  
Huntington WV 25701

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

Name of Employer Occupation  
Self Employed Business Owner

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
10 25 2013

Transaction ID : SA11Ai-CN37734

Amount of Each Receipt this Period  
250

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Betty 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. Manager

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
10 21 2013

Transaction ID : SA11Ai-CN37328

Amount of Each Receipt this Period  
1000

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

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

1500.00

14020022158

**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 102 OF 431
	<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. Peggy Heeter</b>		Date of Receipt MM / DD / YYYY 12 / 31 / 2013
Mailing Address 513 Charleston Rd		Transaction ID : SA11Ai-CN39212
City Spencer	State WV	Zip Code 25276
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Heeter Construction Inc.	Occupation President-Secretary	
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. Everett Helmuth</b>		Date of Receipt MM / DD / YYYY 12 / 04 / 2013
Mailing Address 9511 Lynnhall Pl		Transaction ID : SA11AI-CN38341
City Alexandria	State VA	Zip Code 22309
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Passport BMW	Occupation Dealer	
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. Roy Henderson</b>		Date of Receipt MM / DD / YYYY 12 / 11 / 2013
Mailing Address PO Box 88		Transaction ID : SA11AI-CN38600
City Sheperdstown	State WV	Zip Code 25443
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400
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	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1900.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022169

**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 103 OF 431
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 13b	<input type="checkbox"/> 11c
	<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. Barbara Henson</b>		Date of Receipt MM / DD / YYYY 11 / 07 / 2013
Mailing Address 2015 Vernon Dr		Transaction ID : SA11Ai-CN38031
City Charlotte	State NC	Zip Code 28211
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
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 1000	

Full Name (Last, First, Middle Initial) <b>B. Mr. William Hepworth</b>		Date of Receipt MM / DD / YYYY 10 / 08 / 2013
Mailing Address 101 Oak Trl		Transaction ID : SA11Ai-CN38933
City Paw Paw	State WV	Zip Code 25434
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100
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	

Full Name (Last, First, Middle Initial) <b>C. Mrs. Eleanor Herkness</b>		Date of Receipt MM / DD / YYYY 11 / 11 / 2013
Mailing Address PO Box 511		Transaction ID : SA11Ai-CN38137
City Lewisburg	State WV	Zip Code 24901-0511
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Housewife	Occupation Housewife	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3800	

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

1402002170

**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 104 OF 431
	<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>A. Mrs. Eleanor Herkness</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 14 / 2013
Mailing Address PO Box 511		Transaction ID : SA11Ai-CN38230
City Lewisburg	State WV	Zip Code 24901-0511
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Housewife	Occupation Housewife	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4800	

Full Name (Last, First, Middle Initial) <b>B. Mr. Warren D Heston</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 8560 Tanglewood Trl		Transaction ID : SA11AI-CN39209
City Chagrin Falls	State OH	Zip Code 44023-5632
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100
Name of Employer Cleveland Clinic	Occupation Professor/Cancer Biology	
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. Ms. Jackie Hibbler</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 8929 Briar Forest Dr		Transaction ID : SA11AI-CN39205
City Houston	State TX	Zip Code 77024-7218
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50
Name of Employer Exco Resources	Occupation Lease Analyst	
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).....	1150.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022171



**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 105 OF 431
	<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)  
**Ms. Nancy Hieb**

Mailing Address 105 Ann Street

City	State	Zip Code
Summersville	WV	26651

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

Name of Employer	Occupation
WVDEP	Environmental Inspector

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 08 / 2013

Transaction ID : **SA11AI-CN38968**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. C.R. Hill**

Mailing Address 233 Hawks Chase Ln

City	State	Zip Code
Daniels	WV	25832

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

Name of Employer	Occupation
Phillips Machine Service Inc.	Executive

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 14 / 2013

Transaction ID : **SA11AI-CN38259**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. David W Hobbs**

Mailing Address 480 Mountain View Rd.

City	State	Zip Code
Clendenin	WV	25045

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

Name of Employer	Occupation
Hobbs Group LLC	President

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 04 / 2013

Transaction ID : **SA11AI-CN38358**

Amount of Each Receipt this Period  
**500**

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

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

**1250.00**

14020022172

**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 431  
(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. Lynn N Hoff**

Mailing Address 2107 Forest Hill Rd

City State Zip Code  
Alexandria VA 22307

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  
250

Date of Receipt  
M M / D D / Y Y Y Y  
12 04 2013

Transaction ID : SA11AI-CN38382

Amount of Each Receipt this Period  
250

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Eleanor Hoffman**

Mailing Address 7264 Longdale Rd

City State Zip Code  
Letart WV 25253

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  
11 12 2013

Transaction ID : SA11AI-CN38186

Amount of Each Receipt this Period  
100

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Frank Hoffmann**

Mailing Address 9121 Cardiff Road

City State Zip Code  
North Chesterfield VA 23236

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  
300

Date of Receipt  
M M / D D / Y Y Y Y  
10 11 2013

Transaction ID : SA11AI-CN37375

Amount of Each Receipt this Period  
100

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

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

450.00

1402002173

**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 431  
(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)  
**Dr. Donald H Hofreuter**

Mailing Address 2018 Oglebay Dr.

City State Zip Code  
Wheeling WV 26003

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  
12 23 2013

Transaction ID : SA11AI-CN39084

Amount of Each Receipt this Period  
100

**B.** Full Name (Last, First, Middle Initial)  
**Dr. John A Holman**

Mailing Address 14 Drift oak Circle

City State Zip Code  
The Woodlands TX 77381

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

Name of Employer Occupation  
Self Employed Dentist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
M M / D D / Y Y Y Y  
12 23 2013

Transaction ID : SA11AI-CN39091

Amount of Each Receipt this Period  
400

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Ned S Holmes**

Mailing Address 55 Waugh Dr.  
Ste 1111

City State Zip Code  
Houston TX 77007

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

Name of Employer Occupation  
Ned S. Holmes Investments Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
M M / D D / Y Y Y Y  
11 14 2013

Transaction ID : SA11AI-CN38236

Amount of Each Receipt this Period  
500

**SUBTOTAL** of Receipts This Page (optional)..... 1000.00

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

14020022174

**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 108 OF 431
	<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>A. Mr. Fred Horne</b>		Date of Receipt M M / D D / Y Y - Y Y 10 / 30 / 2013
Mailing Address 3 Williamsburg Circle		<b>Transaction ID : SA11AI-CN37951</b>
City State Zip Code Wheeling WV 26003	Amount of Each Receipt this Period 1000	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Retired 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>B. Mr. John A Hotopp</b>		Date of Receipt M M / D D / Y Y - Y Y 10 / 11 / 2013
Mailing Address 1575 Clark Rd		<b>Transaction ID : SA11AI-CN37470</b>
City State Zip Code Charleston WV 25314	Amount of Each Receipt this Period 100	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Retired Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400	

Full Name (Last, First, Middle Initial) <b>C. Mr. John A Hotopp</b>		Date of Receipt M M / D D / Y Y - Y Y 12 / 06 / 2013
Mailing Address 1575 Clark Rd		<b>Transaction ID : SA11AI-CN38480</b>
City State Zip Code Charleston WV 25314	Amount of Each Receipt this Period 100	
FEC ID number of contributing federal political committee. C	Name of Employer Occupation Retired 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) .....	1200.00
<b>TOTAL</b> This Period (last page this line number only) .....	

14020022175

**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 431
	<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>A. Mr. Mark Houser</b>		Date of Receipt M M / D D / Y Y Y Y 11 07 2013
Mailing Address 1001 Fannin St Ste 800		Transaction ID : SA11AI-CN37971
City Houston	State Zip Code TX 77002	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000
Name of Employer EnerVest Ltd.	Occupation EVP & 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>B. Mr. John Howard</b>		Date of Receipt M M / D D / Y Y Y Y 11 21 2013
Mailing Address 17220 MacDuff Avenue		Transaction ID : SA11AI-CN38981
City Olney	State Zip Code MD 20832	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500
Name of Employer US Chamber Of Commerce	Occupation Lobbyist	
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. Mrs. Julie M Howard</b>		Date of Receipt M M / D D / Y Y Y Y 12 03 2013
Mailing Address 2109 Wakefield Ct		Transaction ID : SA11AI-CN38323
City Alexandria	State Zip Code VA 22307	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500
Name of Employer Howard Associates	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).....	2000.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022176

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

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

FOR LINE NUMBER: PAGE 110 OF 431  
(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 Hoyt**

Mailing Address 55 Golden Meadow Lane

City Alamo State CA Zip Code 94507

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

Name of Employer Wells Fargo Occupation Banker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
MM / DD / YYYY  
11 / 06 / 2013

Transaction ID : SA11Ai-CN38007

Amount of Each Receipt this Period  
1000

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

Mailing Address 909 Cameron Street

City Alexandria State VA Zip Code 22314

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

Name of Employer Hudgins Law Firm P.C. Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
MM / DD / YYYY  
10 / 16 / 2013

Transaction ID : SA11Ai-CN38941

Amount of Each Receipt this Period  
500

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Larry Hudson**

Mailing Address 5035 Bennington Dr

City Charleston State WV Zip Code 25313

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

Name of Employer CAMC Occupation administrator

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
MM / DD / YYYY  
12 / 09 / 2013

Transaction ID : SA11Ai-CN38617

Amount of Each Receipt this Period  
500

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

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

14020022177

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 111 OF 431	
	(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. Clint Hurt</b>		Date of Receipt MM / DD / YYYY 12 / 20 / 2013
Mailing Address PO Box 1973		Transaction ID : SA11AI-CN38908
City Midland	State TX	Zip Code 79702
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer self-employed	Occupation Oil/gas exploration	
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>B. Mrs. Wilma L Hutton</b>		Date of Receipt MM / DD / YYYY 10 / 11 / 2013
Mailing Address 2718 Cottageville Rd		Transaction ID : SA11AI-CN37412
City Mt. Alto	State WV	Zip Code 25264
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 600	

Full Name (Last, First, Middle Initial) <b>C. Mrs. Wilma L Hutton</b>		Date of Receipt MM / DD / YYYY 12 / 09 / 2013
Mailing Address 2718 Cottageville Rd		Transaction ID : SA11AI-CN38628
City Mt. Alto	State WV	Zip Code 25264
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 800	

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

14020022178

**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 112 OF 431
	<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. Janice R. Hyre**

Mailing Address 1401 5th St

City	State	Zip Code
Moundsville	WV	26041

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  
550

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 17 / 2013

Transaction ID : **SA11AI-CN38730**

Amount of Each Receipt this Period  
200

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Rory Isaac**

Mailing Address 11823 Legend Manor Dr.

City	State	Zip Code
Houston	TX	77082

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

Name of Employer	Occupation
MRC Global	EVP

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
M M / D D / Y Y Y Y  
11 / 13 / 2013

Transaction ID : **SA11AI-CN38208**

Amount of Each Receipt this Period  
2600

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Carolyn Jackson**

Mailing Address Rr 3 Box 128

City	State	Zip Code
Elkins	WV	26241

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  
10 / 21 / 2013

Transaction ID : **SA11AI-CN37521**

Amount of Each Receipt this Period  
100

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

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

2900.00

14020022179



**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 113 OF 431
	<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. Nancy B Jackson**

Mailing Address 1526 Knob Rd

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  
 10 21 2013

Transaction ID : **SA11AI-CN37544**

Amount of Each Receipt this Period  
 ..... 100

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Nancy B Jackson**

Mailing Address 1526 Knob Rd

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  
 ..... 300

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 23 2013

Transaction ID : **SA11AI-CN39141**

Amount of Each Receipt this Period  
 ..... 100

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Jonathon S Jacobson**

Mailing Address 14 Highfields

City	State	Zip Code
Wayland	MA	01778

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

Name of Employer	Occupation
Highfields Capital Management LP	Business Manager

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
 ..... 1000

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 06 2013

Transaction ID : **SA11AI-CN37981**

Amount of Each Receipt this Period  
 ..... 1000

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

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

..... 1200.00

14020022180

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

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

FOR LINE NUMBER: PAGE 114 OF 431  
(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)  
**Dr. S.S. Jamie**

Mailing Address **PO Box 10**

City **Clay** State **WV** Zip Code **25043**

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

Name of Employer self-employed  
**Physician**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
M M / D D / Y Y Y Y  
**12 23 2013**

Transaction ID : **SA11AI-CN39173**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Thomas Jarrett**

Mailing Address **1333 Lake Dr**

City **Daniels** State **WV** Zip Code **25832**

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

Name of Employer self-employed  
**Dentist**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
M M / D D / Y Y Y Y  
**12 31 2013**

Transaction ID : **SA11AI-CN39240**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. W Henry Jernigan**

Mailing Address **900 Lee St E Ste 600**

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

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

Name of Employer  
**Dinsmore & Shohl** 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  
**11 14 2013**

Transaction ID : **SA11AI-CN38278**

Amount of Each Receipt this Period  
**2600**

**SUBTOTAL** of Receipts This Page (optional)..... **4600.00**

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

14020022181

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

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

FOR LINE NUMBER: PAGE 115 OF 431  
(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. Daniel Jick**

Mailing Address 15 Lawrence Road

City State Zip Code  
Chestnut Hill MA 02467

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

Name of Employer Occupation  
High Vista Strategies Investments

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  
11 06 2013

Transaction ID : SA11AI-CN37980

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Dick Johnson**

Mailing Address 2613 Bland Road

City State Zip Code  
Bluefield WV 24701

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

Name of Employer Occupation  
Tramline Inc. Controller

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  
11 14 2013

Transaction ID : SA11AI-CN38268

Amount of Each Receipt this Period  
500

**C.** Full Name (Last, First, Middle Initial)  
**Mr. J Thomas Johnson**

Mailing Address 122 Penn St

City State Zip Code  
Greenville SC 29605

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

Name of Employer Occupation  
FHL Bank Director

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  
12 12 2013

Transaction ID : SA11AI-CN38890

Amount of Each Receipt this Period  
500

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

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

14020022182

**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 116 OF 431
	<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. Robert A Johnston</b>		Date of Receipt MM / DD / YYYY 12 / 06 / 2013
Mailing Address 1550 Mount Alpha Rd		Transaction ID : SA11Ai-CN38506
City Charleston	State WV	Zip Code 25304
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600
Name of Employer River Trading Co.	Occupation Executive	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200	

Full Name (Last, First, Middle Initial) <b>Mr. George W Jones III</b>		Date of Receipt MM / DD / YYYY 12 / 06 / 2013
Mailing Address 1408 Connell Rd		Transaction ID : SA11Ai-CN38535
City Charleston	State WV	Zip Code 25314
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>Mrs. Heather H Jones</b>		Date of Receipt MM / DD / YYYY 12 / 31 / 2013
Mailing Address 11 Moosemont Rd		Transaction ID : SA11Ai-CN39061
City Charleston	State WV	Zip Code 25304
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Spilman Thomas Battle PLLC	Occupation Attorney	
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).....	4600.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022183

**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 117 OF 431
	<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. 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 **2500**

Date of Receipt  
MM / DD / YYYY  
**12 / 09 / 2013**

Transaction ID : **SA11AI-CN38630**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Wilmot C Jones**

Mailing Address **718 Woodlawn Ave**

City **Beckley** State **WV** Zip Code **25801**

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 **650**

Date of Receipt  
MM / DD / YYYY  
**10 / 25 / 2013**

Transaction ID : **SA11AI-CN37728**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Sharon Justice**

Mailing Address **1938 North Spring Rd**

City **Justice** State **WV** Zip Code **24851**

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

Name of Employer **J Mac Leasing** Occupation **Miner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
MM / DD / YYYY  
**10 / 28 / 2013**

Transaction ID : **SA11AI-CN37871**

Amount of Each Receipt this Period  
**250**

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

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

**1250.00**

14020022184

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 118 OF 431
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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. John Kalkreuth</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 29 / 2013
Mailing Address 49 Arlington Dr		<b>Transaction ID : SA11AI-CN37737</b>
City Wheeling	State WV	Zip Code 26003-5633
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 500
Name of Employer self-employed	Occupation businessman	
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. Dr. Antoine Katiny</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 05 / 2013
Mailing Address PO Box 358		<b>Transaction ID : SA11AI-CN38300</b>
City Flatwoods	State WV	Zip Code 26621
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 250
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 \$ 250	

Full Name (Last, First, Middle Initial) <b>C. Dr. Antoine Katiny</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address PO Box 358		<b>Transaction ID : SA11AI-CN38662</b>
City Flatwoods	State WV	Zip Code 26621
FEC ID number of contributing federal political committee. <b>C</b>		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 \$ 750	

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

14020022185

**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 119 OF 431	
	<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. Joshua Katzen</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 06 / 2013
Mailing Address 40 Nonantum Street		Transaction ID : SA11AI-CN38002
City Newton	State MA	Zip Code 02158
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 1000
Name of Employer J. W. Katzen Company	Occupation Business Manager	
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. Mrs. Holly C Kauffman</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address 4138 Cove Point Dr		Transaction ID : SA11AI-CN38632
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 First Energy Corp	Occupation President WV Operations	
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. Mrs. Judith A Kaye</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 06 / 2013
Mailing Address 6 Folsoms Pond Road		Transaction ID : SA11AI-CN37988
City Wayland	State MA	Zip Code 01778
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 1000
Name of Employer Homemaker	Occupation Homemaker	
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).....	\$ 2250.00
<b>TOTAL</b> This Period (last page this line number only).....	\$

1402002186

**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 120 OF 431
	<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. Timothy Keaney**

Mailing Address **2 River Terrace**

City New York	State NY	Zip Code 10282
------------------	-------------	-------------------

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

Name of Employer BNY Mellon	Occupation Banking
--------------------------------	-----------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
M M / D D / Y Y Y Y  
**11 13 2013**

Transaction ID : **SA11Ai-CN38227**

Amount of Each Receipt this Period  
**2000**

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

Mailing Address **2 Bloomsbury Place**

City Savannah	State GA	Zip Code 31411
------------------	-------------	-------------------

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

Name of Employer The Marman Group Inc.	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  
**10 30 2013**

Transaction ID : **SA11Ai-CN38956**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Michael E Kelly**

Mailing Address **1 Pavilion Dr**

City Daniels	State WV	Zip Code 25832
-----------------	-------------	-------------------

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

Name of Employer McDermott & Bonenberger PLLC	Occupation Attorney
--	------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **3600**

Date of Receipt  
M M / D D / Y Y Y Y  
**11 14 2013**

Transaction ID : **SA11Ai-CN38246**

Amount of Each Receipt this Period  
**2000**

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

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

**4500.00**

14020022187



**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 121 OF 431
	<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)  
**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  
2600

Date of Receipt  
M M / D D / Y Y Y Y  
11 15 2013

Transaction ID : SA11Ai-CN38519

Amount of Each Receipt this Period  
-1000  
Redesignated to General 2014

**[MEMO ITEM]**  
Redesignated

**B.** 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  
3600

Date of Receipt  
M M / D D / Y Y Y Y  
11 15 2013

Transaction ID : SA11Ai-CN38520

Amount of Each Receipt this Period  
1000  
Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Earl Kendrick**

Mailing Address 3964 E Paradise View Drive

City State Zip Code  
Paradise Valley AZ 85253

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

Name of Employer Occupation  
Arizona Diamondbacks Baseball Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
M M / D D / Y Y Y Y  
11 06 2013

Transaction ID : SA11Ai-CN38966

Amount of Each Receipt this Period  
2600

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

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

2600.00

14020022188

**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 431
	<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 J Keniry**

Mailing Address 5553 Little Falls Rd

City Arlington	State VA	Zip Code 22207
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FEC ID number of contributing federal political committee. **C**

Name of Employer United Health Group	Occupation Vice President
---	------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500

Date of Receipt  
MM / DD / YYYY  
12 / 04 / 2013

**Transaction ID : SA11Ai-CN38384**

Amount of Each Receipt this Period  
2500

**B.** Full Name (Last, First, Middle Initial)  
**Mr. John A Kerr**

Mailing Address 6102 Woodmont Rd

City Alexandria	State VA	Zip Code 22307
--------------------	-------------	-------------------

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

Name of Employer CBRE	Occupation Real Estate
--------------------------	---------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250

Date of Receipt  
MM / DD / YYYY  
12 / 04 / 2013

**Transaction ID : SA11Ai-CN38344**

Amount of Each Receipt this Period  
250

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

Mailing Address 10 Woodland Ave

City Bronxville	State NY	Zip Code 10708
--------------------	-------------	-------------------

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

Name of Employer Jennison Associates	Occupation Finance
---	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200

Date of Receipt  
MM / DD / YYYY  
10 / 29 / 2013

**Transaction ID : SA11Ai-CN37946**

Amount of Each Receipt this Period  
5200

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

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

7950.00

14020022189

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

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

FOR LINE NUMBER: PAGE 123 OF 431  
(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 A Kiefer**

Mailing Address 10 Woodland Ave

City State Zip Code  
Bronxville NY 10708

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

Name of Employer Occupation  
Jennison Associates Finance

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
\$ \$ 2600

Date of Receipt  
M M / D D / Y - Y Y - Y  
10 29 / 2013

Transaction ID : SA11AI-CN37949

Amount of Each Receipt this Period  
\$ \$ \$ -2600

Redesignated to General 2014

**[MEMO ITEM]**  
Redesignated

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

Mailing Address 10 Woodland Ave

City State Zip Code  
Bronxville NY 10708

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

Name of Employer Occupation  
Jennison Associates Finance

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
\$ \$ \$ 5200

Date of Receipt  
M M / D D / Y - Y Y - Y  
10 29 / 2013

Transaction ID : SA11AI-CN37950

Amount of Each Receipt this Period  
\$ \$ \$ 2600

Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Philip G Kiko**

Mailing Address 3500 Arlington Blvd

City State Zip Code  
Arlington VA 22204

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

Name of Employer Occupation  
Foley And Lardner LLP Attorney

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
\$ \$ \$ 250

Date of Receipt  
M M / D D / Y - Y Y - Y  
12 04 / 2013

Transaction ID : SA11AI-CN38342

Amount of Each Receipt this Period  
\$ \$ \$ 250

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

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

\$ \$ \$ 250.00

14020022190

**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 124 OF 431
	<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. Stephen P King**

Mailing Address 9 Hemlock Dr

City State Zip Code  
White Sulphur Springs WV 24986

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

Name of Employer Occupation  
WV Assn of Rehab Facilities Requested

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
200

Date of Receipt  
M M / D D / Y Y Y Y  
10 28 2013

Transaction ID : **SA11AI-CN37877**

Amount of Each Receipt this Period  
200

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

Mailing Address Rural Route One Box 169

City State Zip Code  
Flemington WV 26347

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

Name of Employer Occupation  
self-employed Farmer

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y  
12 09 2013

Transaction ID : **SA11AI-CN38649**

Amount of Each Receipt this Period  
500

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Jonathan I Kislak**

Mailing Address 9999 NE 2nd Ave # 306

City State Zip Code  
Miami Shores FL 33138

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

Name of Employer Occupation  
FHL Bank Director

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
M M / D D / Y Y Y Y  
12 12 2013

Transaction ID : **SA11AI-CN38891**

Amount of Each Receipt this Period  
500

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

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

1200.00

14020022191

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 125 OF 431
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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. Russell S Kitchner</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 10 / 2013
Mailing Address 153 Gap View Blvd		Transaction ID : SA11Ai-CN38717
City Harpers Ferry	State WV	Zip Code 25425
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 500
Name of Employer American Public University	Occupation Gov. Relations	
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. Oren Kitts</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 1509 Mount Vernon Rd		Transaction ID : SA11Ai-CN39064
City Charleston	State WV	Zip Code 25314
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 500
Name of Employer Alpha Natural Resources	Occupation Vice President	
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. Seth A Klarman</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 06 / 2013
Mailing Address 329 Heath Street		Transaction ID : SA11Ai-CN37985
City Chestnut Hill	State MA	Zip Code 02467
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 1000
Name of Employer The Baupost Group LLC	Occupation Business Manager	
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).....	2000.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022192

**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 431  
(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 R Klug**

Mailing Address **20 Aaron Way**

City **Wheeling** State **WV** Zip Code **26003**

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

Name of Employer **David R Klug & Assoc.** Occupation **Owner**

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date  
 Amount of Each Receipt this Period **250**

Date of Receipt  
 M M / D D / Y Y Y Y  
**12 05 2013**

Transaction ID : **SA11Ai-CN38451**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Louis Knapp**

Mailing Address **509 Prince George Place**

City **Winchester** State **VA** Zip Code **22601**

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  
 Amount of Each Receipt this Period **100**

Date of Receipt  
 M M / D D / Y Y Y Y  
**12 10 2013**

Transaction ID : **SA11Ai-CN38713**

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Thomas E Knutson Jr**

Mailing Address **52 Catera Ct.**

City **Martinsburg** State **WV** Zip Code **25403**

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  
 Amount of Each Receipt this Period **250**

Date of Receipt  
 M M / D D / Y Y Y Y  
**11 07 2013**

Transaction ID : **SA11Ai-CN38076**

**SUBTOTAL** of Receipts This Page (optional)..... **600.00**

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

14020022193

**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 127 OF 431
	<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) <b>Mrs. Wendy Kosek</b>		Date of Receipt M M / D D / Y Y Y Y 12 12 2013	
Mailing Address 945 Redding Dr		Transaction ID : SA11AI-CN38887	
City State Zip Code Sandy Springs GA 30328	Amount of Each Receipt this Period \$ 500		
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 500	
Name of Employer Occupation FHL Bank Vice President	Election Cycle-to-Date \$ 500		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

B. Full Name (Last, First, Middle Initial) <b>Mr. Marshall Krongold</b>		Date of Receipt M M / D D / Y Y Y Y 10 18 2013	
Mailing Address 130 Hibiscus Dr S		Transaction ID : SA11AI-CN37325	
City State Zip Code Miami Beach FL 33139	Amount of Each Receipt this Period \$ 500		
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 500	
Name of Employer Occupation Self Employed Attorney	Election Cycle-to-Date \$ 500		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

C. Full Name (Last, First, Middle Initial) <b>Mr. Marshall Krongold</b>		Date of Receipt M M / D D / Y Y Y Y 10 21 2013	
Mailing Address 130 Hibiscus Dr S		Transaction ID : SA11AI-CN37334	
City State Zip Code Miami Beach FL 33139	Amount of Each Receipt this Period \$ 500		
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 1000	
Name of Employer Occupation Self Employed Attorney	Election Cycle-to-Date \$ 1000		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional).....	\$ 1500.00
TOTAL This Period (last page this line number only).....	\$

14020022194

**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 431
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 13b	<input type="checkbox"/> 11c
	<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. Kirsten Lafollette</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address PO Box 1170		Transaction ID : SA11Ai-CN38959
City Lewisburg	State WV	Zip Code 24901
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Self Employed	Occupation Counselor	
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. Charles C. Lanham</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 05 / 2013
Mailing Address 1003 Simpson Pl		Transaction ID : SA11Ai-CN38443
City Point Pleasant	State WV	Zip Code 25550
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 1250	

Full Name (Last, First, Middle Initial) <b>C. Mr. Howard B Lansaw Jr</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 28 / 2013
Mailing Address 275 High Dr		Transaction ID : SA11Ai-CN37789
City Huntington	State WV	Zip Code 25705
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 300	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1100.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022195



**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 129 OF 431
	<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) <b>Mr. Dennis Larew</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 11 / 2013
Mailing Address 92 Maple Run Road		Transaction ID : SA11AI-CN37426
City Thornton	State WV	Zip Code 26440
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 250
Name of Employer Self Employed	Occupation Agriculture	
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. Gavin R Larrimer</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 11 / 2013
Mailing Address 2030 Aladdin Woods Ct		Transaction ID : SA11AI-CN37310
City Columbus	State OH	Zip Code 43212
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	\$ 200

C. Full Name (Last, First, Middle Initial) <b>Mr. Michael D Larson</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 07 / 2013
Mailing Address 633 Oakland Dr		Transaction ID : SA11AI-CN38057
City Dekalb	State IL	Zip Code 60115
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 100
Name of Employer Elmer Larson LLP	Occupation President	
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).....	\$ 550.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022196

**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 130 OF 431
	<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>A. Mr. Conrad A Lass</b>		Date of Receipt M M / D D / Y Y Y Y 12 03 2013
Mailing Address 1301 Chancel Pl City State Zip Code Alexandria VA 22314		Transaction ID : SA11Ai-CN38330
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000
Name of Employer EPSA	Occupation Director Legislative Affairs	
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. Dr. Herbert A Lassiter</b>		Date of Receipt M M / D D / Y Y Y Y 12 10 2013
Mailing Address 5223 Glenbrook Dr City State Zip Code Vienna WV 26105		Transaction ID : SA11Ai-CN38674
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 301	

Full Name (Last, First, Middle Initial) <b>C. Mr. Charles Lawrence</b>		Date of Receipt M M / D D / Y Y Y Y 11 13 2013
Mailing Address PO Box 1343 City State Zip Code Houston TX 77251		Transaction ID : SA11Ai-CN38209
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2600
Name of Employer L 3 Partners LLC	Occupation Executive	
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).....	3800.00
TOTAL This Period (last page this line number only).....	

14020022197

**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 431
	<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. Michael Lawrence</b>		Date of Receipt M M / D D / Y Y - Y Y 10 / 11 / 2013
Mailing Address 120 Tiskelwah Ave		Transaction ID : SA11Ai-CN37425
City Elkview	State WV	Zip Code 25071-9219
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100
Name of Employer West Virginia American Water	Occupation Manager	
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. Michael Lawrence</b>		Date of Receipt M M / D D / Y Y - Y Y 12 / 10 / 2013
Mailing Address 120 Tiskelwah Ave		Transaction ID : SA11Ai-CN38698
City Elkview	State WV	Zip Code 25071-9219
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100
Name of Employer West Virginia American Water	Occupation Manager	
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>C. Mr. Michael D Laxton II</b>		Date of Receipt M M / D D / Y Y - Y Y 11 / 14 / 2013
Mailing Address PO Box 390		Transaction ID : SA11Ai-CN38238
City Beckley	State WV	Zip Code 25802
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Chamber Of Commerce	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).....	1200.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022198

**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 431
	<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. Barry Lay</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address 943 Mineral Road		Transaction ID : SA11Ai-CN38216
City Glenville	State WV	Zip Code 26351
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer EnerVest Operating LLC	Occupation Sr. 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>Dr. Thomas H Layne III</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address 119 Court St Box 746 S		Transaction ID : SA11Ai-CN38603
City Ripley	State WV	Zip Code 25271
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1600
Name of Employer self-employed	Occupation Dentist	
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. Richard H Lehman</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 11 / 2013
Mailing Address 310 S Pointe Drive		Transaction ID : SA11Ai-CN37461
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 Wells Fargo Advisors	Occupation Financial Advisors	
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).....	2850.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022199

**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 133 OF 431
	<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 H Lehman**

Mailing Address 310 S Pointe Drive

City Charleston State WV Zip Code 25314

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

Name of Employer Wells Fargo Advisors Occupation Financial Advisors

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **750**

Date of Receipt  
M M / D D / Y Y Y Y  
**12 10 2013**

Transaction ID : **SA11Ai-CN38787**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Marcia Leifer**

Mailing Address 86 Clements Road

City Newton State MA Zip Code 02456

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  
M M / D D / Y Y Y Y  
**11 06 2013**

Transaction ID : **SA11Ai-CN37994**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Norman F Lent III**

Mailing Address 3529 Malvern Ct

City Alexandria State VA Zip Code 22304

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

Name of Employer DowLohnes Occupation Vice President

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
M M / D D / Y Y Y Y  
**12 03 2013**

Transaction ID : **SA11Ai-CN38320**

Amount of Each Receipt this Period  
**250**

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

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

**1750.00**

14020022200

**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 134 OF 431
	<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. John Leslie</b>		Date of Receipt MM / DD / YYYY 10 / 22 / 2013
Mailing Address 50 Johns Court		Transaction ID : SA11AI-CN37678
City Cown	State WV	
Zip Code 26206		Amount of Each Receipt this Period 500
FEC ID number of contributing federal political committee. C		
Name of Employer self-employed	Occupation contractor	
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 Leslie</b>		Date of Receipt MM / DD / YYYY 12 / 06 / 2013
Mailing Address 50 Johns Court		Transaction ID : SA11AI-CN38555
City Cown	State WV	
Zip Code 26206		Amount of Each Receipt this Period 1000
FEC ID number of contributing federal political committee. C		
Name of Employer self-employed	Occupation contractor	
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. Joseph M Letnaunchyn</b>		Date of Receipt MM / DD / YYYY 12 / 06 / 2013
Mailing Address 225 Ariel Heights		Transaction ID : SA11AI-CN38502
City Charleston	State WV	
Zip Code 25311		Amount of Each Receipt this Period 600
FEC ID number of contributing federal political committee. C		
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 2600	

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

1402002201

**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 431
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<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)  
**Mr. George B. Levasseur Jr**

Mailing Address PO Box 934

City State Zip Code  
Ridgeley WV 26753-0934

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

Name of Employer Occupation  
Self Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200

Date of Receipt  
M M / D D / Y Y Y Y  
12 10 2013

Transaction ID : **SA11AI-CN38718**

Amount of Each Receipt this Period  
100

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

Mailing Address 382 Laurel St

City State Zip Code  
Morgantown WV 26505

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

Name of Employer Occupation  
WVU Policeman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200

Date of Receipt  
M M / D D / Y Y Y Y  
12 31 2013

Transaction ID : **SA11AI-CN39040**

Amount of Each Receipt this Period  
100

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Simone Martel Levinson**

Mailing Address 930 Park Ave

City State Zip Code  
New York NY 10019

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

Name of Employer Occupation  
Martel Productions CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
M M / D D / Y Y Y Y  
11 13 2013

Transaction ID : **SA11AI-CN38220**

Amount of Each Receipt this Period  
2000

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

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

2200.00

14020022202

**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 431
	<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. Tom S Lilly</b>		Date of Receipt M M / D D / Y Y Y Y 10 28 2013
Mailing Address <b>Smith &amp; Lilly</b> 1421 Princeton Avenue		<b>Transaction ID : SA11Ai-CN37876</b>
City Princeton	State WV	
Zip Code 24740		Amount of Each Receipt this Period 200
FEC ID number of contributing federal political committee. C		
Name of Employer Smith Lilly & Ball PLLC	Occupation Attorney	
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. Christopher F Lindsay</b>		Date of Receipt M M / D D / Y Y Y Y 12 04 2013
Mailing Address <b>2108 Wakefield Ct</b>		<b>Transaction ID : SA11Ai-CN38350</b>
City Alexandria	State VA	
Zip Code 22307		Amount of Each Receipt this Period 250
FEC ID number of contributing federal political committee. C		
Name of Employer Lindsay Automotive Group	Occupation Owner	
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>Mrs. Avis D Linger</b>		Date of Receipt M M / D D / Y Y Y Y 10 11 2013
Mailing Address <b>274 Terrace Ave</b>		<b>Transaction ID : SA11Ai-CN37477</b>
City Weston	State WV	
Zip Code 26452		Amount of Each Receipt this Period 100
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 200	

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

14020022203



**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 431
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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. Judson Linville</b>		Date of Receipt MM / DD / YYYY 12 / 16 / 2013
Mailing Address 1075 Great Rd		Transaction ID : SA11Ai-CN38655
City Princeton	State NJ	Zip Code 08540
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Citibank	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. Nelson Litterst</b>		Date of Receipt MM / DD / YYYY 12 / 18 / 2013
Mailing Address 1655 N Greenbrier Street		Transaction ID : SA11Ai-CN39024
City Arlington	State VA	Zip Code 22205
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer FTI Consulting	Occupation Consulting	
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>Mrs. Macel I. Little</b>		Date of Receipt MM / DD / YYYY 12 / 23 / 2013
Mailing Address 303 Frederick St		Transaction ID : SA11Ai-CN39160
City Nitro	State WV	Zip Code 25143
FEC ID number of contributing federal political committee. C		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 225	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1600.00
<b>TOTAL</b> This Period (last page this line number only).....	

1402002204

**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 138 OF 431
	<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) <b>W. Timothy Locke</b>			Date of Receipt M M / D D / Y Y Y Y 10 28 2013		
Mailing Address 2111 Woodmont Road			<b>Transaction ID : SA11Ai-CN39290</b>		
City	State	Zip Code			
Alexandria	VA	22307			
FEC ID number of contributing federal political committee. <b>C</b>			Amount of Each Receipt this Period 801.88		
Name of Employer The Smith-Free Group		Occupation Government Affairs Consultant			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 801.88			
			In-Kind Received Food and Beverage		

<b>B.</b> Full Name (Last, First, Middle Initial) <b>Mrs. Marjorie Loeb</b>			Date of Receipt M M / D D / Y Y Y Y 11 13 2013		
Mailing Address 41 East 72nd Street			<b>Transaction ID : SA11Ai-CN38224</b>		
City	State	Zip Code			
New York	NY	10021			
FEC ID number of contributing federal political committee. <b>C</b>			Amount of Each Receipt this Period 2000		
Name of Employer None		Occupation None			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2000			

<b>C.</b> Full Name (Last, First, Middle Initial) <b>Mr. Joseph A Long</b>			Date of Receipt M M / D D / Y Y Y Y 11 14 2013		
Mailing Address 85 Flat Top Lake Rd			<b>Transaction ID : SA11Ai-CN38256</b>		
City	State	Zip Code			
Ghent	WV	25843			
FEC ID number of contributing federal political committee. <b>C</b>			Amount of Each Receipt this Period 100		
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 325			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2901.88
<b>TOTAL</b> This Period (last page this line number only).....	

14020022205

**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 139 OF 431
	<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. Ginger Loper</b>		Date of Receipt MM / DD / YYYY 12 / 16 / 2013
Mailing Address 3309 23rd Street N		Transaction ID : SA11AI-CN39020
City Arlington	State VA	Zip Code 22201
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Loper Consulting	Occupation Consulting	
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. Anthony E Lorber</b>		Date of Receipt MM / DD / YYYY 10 / 21 / 2013
Mailing Address 23570 570th Ave		Transaction ID : SA11AI-CN37571
City Litchfield	State MN	Zip Code 55355-5714
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer Southwest Airlines	Occupation pilot	
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. Dr. M. Barry Loudon MD</b>		Date of Receipt MM / DD / YYYY 10 / 11 / 2013
Mailing Address 5503 River Road		Transaction ID : SA11AI-CN37420
City Vienna	State WV	Zip Code 26105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer Parkersburg Neurological Associates	Occupation Neurologist	
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).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022206

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

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

FOR LINE NUMBER: PAGE 140 OF 431  
(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. Michael J Loughlin**

Mailing Address 101 Del Mar Pi

City State Zip Code  
Orinda CA 94563

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

Name of Employer Occupation  
Wells Fargo Banker

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
\$ \$ 1000

Date of Receipt  
M M / D D / Y Y - Y Y  
11 13 2013

Transaction ID : SA11AI-CN38219

Amount of Each Receipt this Period  
\$ \$ \$ 1000

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Bill Loving**

Mailing Address 5 Oakmont Est. PO Box 238

City State Zip Code  
Franklin WV 26807

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

Name of Employer Occupation  
Pendleton Community Bank President

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
\$ \$ \$ 500

Date of Receipt  
M M / D D / Y Y - Y Y  
12 20 2013

Transaction ID : SA11AI-CN38911

Amount of Each Receipt this Period  
\$ \$ \$ 500

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Robert R Luchetti**

Mailing Address Pleasant Cove Farm  
145 Point Run Road

City State Zip Code  
Triadelphia WV 26059

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

Name of Employer Occupation  
self-employed Farmer

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
\$ \$ \$ 900

Date of Receipt  
M M / D D / Y Y - Y Y  
10 11 2013

Transaction ID : SA11AI-CN37391

Amount of Each Receipt this Period  
\$ \$ \$ 400

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

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

\$ \$ \$ 1900.00

14020022207

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

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

FOR LINE NUMBER: PAGE 141 OF 431  
(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)  
**Dr. Peter Lukowski**

Mailing Address 2161 Bellwood Drive

City	State	Zip Code
Saint Albans	WV	25177

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

Name of Employer	Occupation
Self	Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt: 10 / 11 / 2013  
Transaction ID : SA11AI-CN37347  
Amount of Each Receipt this Period: 500

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Larry D Luttrell**

Mailing Address 5 Riley Ave

City	State	Zip Code
Morgantown	WV	26505

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

Name of Employer	Occupation
WVU	Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt: 10 / 29 / 2013  
Transaction ID : SA11AI-CN37911  
Amount of Each Receipt this Period: 500

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Lawrence B Lyons**

Mailing Address 114 Center St

City	State	Zip Code
Madison	WV	25130

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

Name of Employer	Occupation
Lyon Oil Co	Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1100**

Date of Receipt: 12 / 31 / 2013  
Transaction ID : SA11AI-CN39222  
Amount of Each Receipt this Period: 200

**SUBTOTAL** of Receipts This Page (optional) ..... **1200.00**

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

1402002208

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

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

FOR LINE NUMBER: PAGE 142 OF 431  
(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 R Lytle**

Mailing Address 4870-D N Old Dominion Dr

City State Zip Code  
Arlington VA 22207

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

Name of Employer Occupation  
Clark Lytle Geduldig Cranford Executive

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
M M / D D / Y Y Y Y  
12 04 2013

Transaction ID : SA11Ai-CN38366

Amount of Each Receipt this Period  
500

**B.** Full Name (Last, First, Middle Initial)  
**Mr. John I Maas**

Mailing Address 270 True Philia Way

City State Zip Code  
Berkeley Springs WV 25411

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  
300

Date of Receipt  
M M / D D / Y Y Y Y  
12 10 2013

Transaction ID : SA11Ai-CN38679

Amount of Each Receipt this Period  
200

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Steven Mach**

Mailing Address PO Box 130630

City State Zip Code  
Houston TX 77219

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

Name of Employer Occupation  
Mach Industrial Group LP VP-Finance

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
M M / D D / Y Y Y Y  
11 21 2013

Transaction ID : SA11Ai-CN38982

Amount of Each Receipt this Period  
2600

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

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

14020022209

**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 143 OF 431
	<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. G. William Macleod</b>		Date of Receipt MM / DD / YYYY 10 / 30 / 2013
Mailing Address 913 Emerald Drive		Transaction ID : SA11AI-CN38961
City Alexandria	State VA	
Zip Code 22308		Amount of Each Receipt this Period 250
FEC ID number of contributing federal political committee. C		
Name of Employer Hyundia-Kia America Tech Center	Occupation Gov't Affairs	Amount of Each Receipt this Period 250
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. John P Magill</b>		Date of Receipt MM / DD / YYYY 12 / 04 / 2013
Mailing Address 1212 Gatewood Dr		Transaction ID : SA11Ai-CN38354
City Alexandria	State VA	
Zip Code 22307		Amount of Each Receipt this Period 1000
FEC ID number of contributing federal political committee. C		
Name of Employer Credit Union Nat'l Assn.	Occupation Vice President	Amount of Each Receipt this Period 1000
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 Maitland</b>		Date of Receipt MM / DD / YYYY 12 / 16 / 2013
Mailing Address 4 Walden Ln		Transaction ID : SA11AI-CN38656
City Rye	State NY	
Zip Code 10580		Amount of Each Receipt this Period 500
FEC ID number of contributing federal political committee. C		
Name of Employer BNY Mellon	Occupation Finance	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 500	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<b>TOTAL</b> This Period (last page this line number only).....	

1402002210

**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 431  
(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. Duncan C Malcolm**

Mailing Address 106 Basswood Rd

City Charleston State WV Zip Code 25314

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

Name of Employer self-employed Occupation Geologist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt  
M M / D D / Y Y Y Y  
10 11 2013

Transaction ID : SA11Ai-CN37370

Amount of Each Receipt this Period  
2000

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Mark A Mangano**

Mailing Address 260 Heartwood Dr

City Chester State WV Zip Code 26034

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

Name of Employer Northern Hancock Bank & Trust Co. 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  
10 28 2013

Transaction ID : SA11Ai-CN37802

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Jimmie Lee Mangus**

Mailing Address 3800 Virginia Avenue SE

City Charleston State WV Zip Code 25304-1508

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 750

Date of Receipt  
M M / D D / Y Y Y Y  
12 09 2013

Transaction ID : SA11Ai-CN38625

Amount of Each Receipt this Period  
250

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

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

3250.00

1402002211



**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 431  
(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. Mireille Manocherian**

Mailing Address **135 Central Park W**  
**3NC**

City **New York** State **NY** Zip Code **10023**

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 **2000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**12 04 2013**

Transaction ID : **SA11AI-CN38293**

Amount of Each Receipt this Period  
**2000**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Ken Mariani**

Mailing Address **1001 Fannin**  
**Ste 800**

City **Houston** State **TX** Zip Code **77002**

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

Name of Employer **EnerVest Operating LLC** 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  
**11 13 2013**

Transaction ID : **SA11AI-CN38217**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Charles R Marks**

Mailing Address **51 Boggess St.**

City **Buckhannon** State **WV** Zip Code **26201**

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

Name of Employer **Windamar Inc.** Occupation **Principal**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 M M / D D / Y Y Y Y  
**12 23 2013**

Transaction ID : **SA11AI-CN39145**

Amount of Each Receipt this Period  
**200**

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

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

**3200.00**

1402002212

**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 431
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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. Howard Marsh**

Mailing Address 15 Orchard Hill

City State Zip Code  
Greenwich CT 06831

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

Name of Employer Occupation  
Citi Banker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
M M / D D / Y Y Y Y  
12 18 2013

Transaction ID : SA11Ai-CN39023

Amount of Each Receipt this Period  
2600

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Edward S Martin**

Mailing Address 1046 Woodberry Rd

City State Zip Code  
New Kensington PA 15068

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  
300

Date of Receipt  
M M / D D / Y Y Y Y  
10 29 2013

Transaction ID : SA11Ai-CN37928

Amount of Each Receipt this Period  
200

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Michael Martin**

Mailing Address 816 Honeysuckle Dr

City State Zip Code  
Martinsburg WV 25401

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

Name of Employer Occupation  
Martin And Seibert Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600

Date of Receipt  
M M / D D / Y Y Y Y  
12 09 2013

Transaction ID : SA11Ai-CN38639

Amount of Each Receipt this Period  
400

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

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

3200.00

1402002213

**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 147 OF 431
	<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. Daniel J Massey Sr**

Mailing Address 1157 Emerald Rd

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

Date of Receipt  
 M M / D D / Y Y - Y Y  
 10 / 25 / 2013

Transaction ID : SA11AI-CN37729

Amount of Each Receipt this Period  
 1000

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Marion C Massinople**

Mailing Address 180 Crystal Ave

City	State	Zip Code
Beckley	WV	25801

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

Name of Employer	Occupation
Mabscott Supply Co.	Executive

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y - Y Y  
 11 / 14 / 2013

Transaction ID : SA11AI-CN38244

Amount of Each Receipt this Period  
 1000

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. J. J. Matthews**

Mailing Address PO Box 176

City	State	Zip Code
Abilene	TX	79604

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

Name of Employer	Occupation
Self Employed	Businessman

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y - Y Y  
 12 / 20 / 2013

Transaction ID : SA11AI-CN38910

Amount of Each Receipt this Period  
 2500

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

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

4500.00

1402002214

**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 148 OF 431
	<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. Barbara Mattox</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 3742 N Tazewell St.		Transaction ID : SA11Ai-CN38856
City Arlington	State VA	Zip Code 22207
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600
Name of Employer GE	Occupation Director Of Tax Policy	
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>B. Mr. John Mauk</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 29 / 2013
Mailing Address 6129 Edgewood Terrace		Transaction ID : SA11Ai-CN38953
City Alexandria	State VA	Zip Code 22307
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer Tidewater Mortgage	Occupation Mortgage Banker	
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. Mrs. Mary Ellen Mauldin</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 06 / 2013
Mailing Address PO Box 225		Transaction ID : SA11Ai-CN38487
City Hendricks	State WV	Zip Code 26271
FEC ID number of contributing federal political committee. C		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	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2950.00
<b>TOTAL</b> This Period (last page this line number only).....	

1402002215

**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 431
	<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)  
**Mrs. Danielle Maurer**

Mailing Address 2507 N Vernon Street

City State Zip Code  
Arlington VA 22207

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

Name of Employer Occupation  
Fierce Isakowitz Blalock SVP

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
M M / D D / Y Y Y Y  
12 23 2013

Transaction ID : SA11AI-CN39030

Amount of Each Receipt this Period  
500

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Lauren W Mazzella**

Mailing Address 9 Drumlin Road

City State Zip Code  
Weston MA 02493

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

Name of Employer Occupation  
Self Employed Attorney

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y  
11 06 2013

Transaction ID : SA11AI-CN37986

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**Mr. John McAllister**

Mailing Address 1030 15th St NW  
# 590 West

City State Zip Code  
Washington DC 20005

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

Name of Employer Occupation  
McAllister & Quinn Partner

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date  
243

Date of Receipt  
M M / D D / Y Y Y Y  
11 14 2013

Transaction ID : SA11AI-CN39291

Amount of Each Receipt this Period  
243

In-Kind Received Invitation Print & Mail

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

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

1743.00

1402002216

**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 431
	<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. Matthew C McCardle</b>		Date of Receipt M M / D D / Y Y Y Y 12 03 2013
Mailing Address 838 S Glebe Rd		Transaction ID : SA11AI-CN38334
City	State      Zip Code Arlington      VA      22204	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$      \$      *
Name of Employer The Boeing Company	Occupation Dir. Commerical Space	250
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>B. Ms. Christine McCartney</b>		Date of Receipt M M / D D / Y Y Y Y 10 21 2013
Mailing Address 5647 Candlewood Dr		Transaction ID : SA11AI-CN37333
City	State      Zip Code Houston      TX      77056	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$      \$      *
Name of Employer Flat Rock Resources	Occupation Energy	5200
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>C. Ms. Christine McCartney</b>		Date of Receipt M M / D D / Y Y Y Y 10 22 2013
Mailing Address 5647 Candlewood Dr		Transaction ID : SA11AI-CN38517
City	State      Zip Code Houston      TX      77056	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$      \$      *
Name of Employer Flat Rock Resources	Occupation Energy	-2600
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	
		Redesignated to General 2014
		<b>[MEMO ITEM]</b> Redesignated

<b>SUBTOTAL</b> of Receipts This Page (optional).....	\$      \$      *	5450.00
<b>TOTAL</b> This Period (last page this line number only).....	\$      \$      *	

1402002217

**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 431	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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)  
**Ms. Christine McCartney**

Mailing Address **5647 Candlewood Dr**

City <b>Houston</b>	State <b>TX</b>	Zip Code <b>77056</b>
------------------------	--------------------	--------------------------

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

Name of Employer <b>Flat Rock Resources</b>	Occupation <b>Energy</b>
--	-----------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5200**

Date of Receipt  
M M / D D / Y Y Y Y  
**10 22 2013**

Transaction ID : **SA11Ai-CN38518**

Amount of Each Receipt this Period  
**2600**

Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

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

Mailing Address **4202 Marquette St**

City <b>Houston</b>	State <b>TX</b>	Zip Code <b>77005</b>
------------------------	--------------------	--------------------------

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

Name of Employer <b>Vitol Inc.</b>	Occupation <b>Energy Trading</b>
---------------------------------------	-------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5200**

Date of Receipt  
M M / D D / Y Y Y Y  
**10 18 2013**

Transaction ID : **SA11Ai-CN37326**

Amount of Each Receipt this Period  
**5200**

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

Mailing Address **4202 Marquette St**

City <b>Houston</b>	State <b>TX</b>	Zip Code <b>77005</b>
------------------------	--------------------	--------------------------

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

Name of Employer <b>Vitol Inc.</b>	Occupation <b>Energy Trading</b>
---------------------------------------	-------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2600**

Date of Receipt  
M M / D D / Y Y Y Y  
**10 21 2013**

Transaction ID : **SA11Ai-CN38515**

Amount of Each Receipt this Period  
**-2600**

Redesignated to General 2014

**[MEMO ITEM]**  
Redesignated

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

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

**5200.00**

1402002218

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

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

FOR LINE NUMBER: PAGE 152 OF 431  
(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. William McCartney**

Mailing Address 4202 Marquette St

City Houston State TX Zip Code 77005

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

Name of Employer Vitol Inc. Occupation Energy Trading

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt **10 / 21 / 2013**

Transaction ID : **SA11Ai-CN38516**

Amount of Each Receipt this Period **2600**

Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

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

Mailing Address 1100 Plaza Five

City Jersey City State NJ Zip Code 07311

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

Name of Employer ICAP North America Occupation Attorney

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt **10 / 25 / 2013**

Transaction ID : **SA11Ai-CN38952**

Amount of Each Receipt this Period **500**

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

Mailing Address 297 Overlook Dr

City Beckley State WV Zip Code 25801

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

Name of Employer Highland Machinery Occupation Manager

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt **12 / 10 / 2013**

Transaction ID : **SA11Ai-CN38773**

Amount of Each Receipt this Period **250**

**SUBTOTAL** of Receipts This Page (optional)..... **750.00**

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

1402002219



**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 431
	<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. Jessie McClure**

Mailing Address **10 Hawthorne Ct**

City	State	Zip Code
Wheeling	WV	26003

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  
M M / D D / Y Y - Y Y  
**12 / 23 / 2013**

Transaction ID : **SA11AI-CN39104**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Tom McCoy**

Mailing Address **359 Baker Lane**

City	State	Zip Code
Charleston	WV	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  
**3000**

Date of Receipt  
M M / D D / Y Y - Y Y  
**10 / 11 / 2013**

Transaction ID : **SA11AI-CN37368**

Amount of Each Receipt this Period  
**2000**

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Tom McCoy**

Mailing Address **359 Baker Lane**

City	State	Zip Code
Charleston	WV	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  
**2600**

Date of Receipt  
M M / D D / Y Y - Y Y  
**10 / 14 / 2013**

Transaction ID : **SA11AI-CN38513**

Amount of Each Receipt this Period  
**-400**

Redesignated to General 2014

**[MEMO ITEM]**  
Redesignated

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

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

**2100.00**

1402002220

**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 154 OF 431
	<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)  
**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  
 , , 3000

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 14 2013

Transaction ID : SA11AI-CN38514

Amount of Each Receipt this Period  
 , , , 400

Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

**B.** Full Name (Last, First, Middle Initial)  
**Mr. George McDonnell**

Mailing Address 19315 Loudoun Orchard Rd

City Leesburg State VA Zip Code 20175

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  
 , , 750

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 31 2013

Transaction ID : SA11AI-CN39262

Amount of Each Receipt this Period  
 , , , 500

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Donald B McFall**

Mailing Address 109 Broad Oaks Trail

City Houston State TX Zip Code 77056

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

Name of Employer McFall Breitbeil & Smith PC 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  
 11 06 2013

Transaction ID : SA11AI-CN38006

Amount of Each Receipt this Period  
 , , , 250

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

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

750.00

14020022221

**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 155 OF 431
	<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. Greg McGraw</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 14 / 2013
Mailing Address 156 Dogwood Court			Transaction ID : SA11AI-CN38241
City Daniels	State WV	Zip Code 25832	Amount of Each Receipt this Period 500
FEC ID number of contributing federal political committee. C			
Name of Employer Greenfield Coal Co.	Occupation VP North American Operations		
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 McIntyre</b>			Date of Receipt M M / D D / Y Y Y Y 10 / 11 / 2013
Mailing Address 210 Kanawha Ave S			Transaction ID : SA11AI-CN37379
City Nitro	State WV	Zip Code 25143-2430	Amount of Each Receipt this Period 250
FEC ID number of contributing federal political committee. C			
Name of Employer West Virginia American Water	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. Jeffrey McIntyre</b>			Date of Receipt M M / D D / Y Y Y Y 12 / 10 / 2013
Mailing Address 210 Kanawha Ave S			Transaction ID : SA11AI-CN38691
City Nitro	State WV	Zip Code 25143-2430	Amount of Each Receipt this Period 500
FEC ID number of contributing federal political committee. C			
Name of Employer West Virginia American Water	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).....	1250.00
<b>TOTAL</b> This Period (last page this line number only).....	

1402002222

**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 156 OF 431
	<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. Thomas G. McMillan**

Mailing Address 1710 Verrazzano Pl

City	State	Zip Code
Wilmington	NC	28405

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

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 28 / 2013

Transaction ID : SA11AI-CN37798

Amount of Each Receipt this Period  
500

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

Mailing Address 405 S Way Ct

City	State	Zip Code
Salem	SC	29676

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

Name of Employer	Occupation
FHL Bank	President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 12 / 2013

Transaction ID : SA11AI-CN38888

Amount of Each Receipt this Period  
500

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Deborah McWhinney**

Mailing Address 25 E 86th St.  
Apt 14A

City	State	Zip Code
New York	NY	10028

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

Name of Employer	Occupation
Citigroup	Banker-VP

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 12 / 2013

Transaction ID : SA11AI-CN38843

Amount of Each Receipt this Period  
500

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

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

1500.00

1402002223

**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 431	
	<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>Dr. Richard McWhorter</b>			Date of Receipt MM / DD / YYYY 11 / 07 / 2013	
Mailing Address 22 Chestnut Drive			<b>Transaction ID : SA11Ai-CN38052</b>	
City Huntington	State WV	Zip Code 25705	Amount of Each Receipt this Period \$ 100	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period \$ 100	
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period \$ 100	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 300	Amount of Each Receipt this Period \$ 100	

Full Name (Last, First, Middle Initial) <b>Dr. Richard McWhorter</b>			Date of Receipt MM / DD / YYYY 12 / 05 / 2013	
Mailing Address 22 Chestnut Drive			<b>Transaction ID : SA11Ai-CN38394</b>	
City Huntington	State WV	Zip Code 25705	Amount of Each Receipt this Period \$ 100	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period \$ 100	
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period \$ 100	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 400	Amount of Each Receipt this Period \$ 100	

Full Name (Last, First, Middle Initial) <b>Dr. Richard McWhorter</b>			Date of Receipt MM / DD / YYYY 12 / 31 / 2013	
Mailing Address 22 Chestnut Drive			<b>Transaction ID : SA11Ai-CN39195</b>	
City Huntington	State WV	Zip Code 25705	Amount of Each Receipt this Period \$ 100	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period \$ 100	
Name of Employer Retired		Occupation Retired	Amount of Each Receipt this Period \$ 100	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500	Amount of Each Receipt this Period \$ 100	

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

1402002224

**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 158 OF 431
	<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>A. Ms Jacqueline Y Meese</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 21 / 2013
Mailing Address PO Box 368		Transaction ID : SA11AI-CN37522
City Weston	State WV	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 70
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 210	

Full Name (Last, First, Middle Initial) <b>B. Ms Jacqueline Y Meese</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 17 / 2013
Mailing Address PO Box 368		Transaction ID : SA11AI-CN38745
City Weston	State WV	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 70
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 280	

Full Name (Last, First, Middle Initial) <b>C. Mr. Bruce P Mehlman</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 06 / 2013
Mailing Address 1341 G St NW # 1100		Transaction ID : SA11AI-CN38465
City Washington	State DC	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 1000
Name of Employer Mehlman Vogel Castagnetti	Occupation Partner	
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).....	1140.00
<b>TOTAL</b> This Period (last page this line number only).....	

1402002225

**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 431
	<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. Peter Mekkelson**

Mailing Address 134 Sedona Ct

City Martinsburg	State WV	Zip Code 25403
---------------------	-------------	-------------------

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

Name of Employer US Army	Occupation Col. USA Retired
-----------------------------	--------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
200

Date of Receipt  
12 / 11 / 2013

Transaction ID : SA11AI-CN38594

Amount of Each Receipt this Period  
100

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Brent Merchant**

Mailing Address 3049 S Columbus Ave

City Arlington	State VA	Zip Code 22206
-------------------	-------------	-------------------

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

Name of Employer Keller McIntyre & Assoc	Occupation Government Relations
---	------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250

Date of Receipt  
12 / 06 / 2013

Transaction ID : SA11AI-CN38584

Amount of Each Receipt this Period  
250

**C.** Full Name (Last, First, Middle Initial)  
**VoteSane Pac**

Mailing Address PO BOX 2713

City Alexandria	State VA	Zip Code 22301
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C C00484535**

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250

Date of Receipt  
12 / 06 / 2013

Transaction ID : SA11C-CN38586

Amount of Each Receipt this Period  
250

Earmarked contribution-Brent Merchant

**[MEMO ITEM]**  
Total earmarked through conduit. PAC limit not affected.

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

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

350.00

1402002226

**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 160 OF 431
	<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>Ms. Kelley Merelene</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 26 / 2013	
Mailing Address 1185 Greenbrier Rd			<b>Transaction ID : SA11Ai-CN38988</b>	
City Salem	State WV	Zip Code 26426	Amount of Each Receipt this Period 50	
FEC ID number of contributing federal political committee. C				
Name of Employer United Hospital Center		Occupation RN		
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. Richard H Merrill</b>			Date of Receipt M M / D D / Y Y Y Y 12 / 10 / 2013	
Mailing Address 1240 Staunton Rd			<b>Transaction ID : SA11Ai-CN38699</b>	
City Charleston	State WV	Zip Code 25314	Amount of Each Receipt this Period 300	
FEC ID number of contributing federal political committee. C				
Name of Employer Tyler Mountain Water Company		Occupation 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. Catie Meyer</b>			Date of Receipt M M / D D / Y Y Y Y 10 / 25 / 2013	
Mailing Address 6319 Olmi Landrith Drive			<b>Transaction ID : SA11Ai-CN38950</b>	
City Alexandria	State VA	Zip Code 22307	Amount of Each Receipt this Period 250	
FEC ID number of contributing federal political committee. C				
Name of Employer Not Employed		Occupation Not Employed		
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).....	600.00
<b>TOTAL</b> This Period (last page this line number only).....	

1402002227



**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 431
	<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. Daniel P Meyer</b>		Date of Receipt M M / D D / Y Y Y Y 12 04 2013	
Mailing Address 2506 Duxbury Pl		Transaction ID : SA11Ai-CN38367	
City Alexandria	State VA	Zip Code 22308	Amount of Each Receipt this Period 1000
FEC ID number of contributing federal political committee. C			
Name of Employer The Duberstein Group	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>Ms. Rita M Meyer</b>		Date of Receipt M M / D D / Y Y Y Y 12 03 2013	
Mailing Address 6307 Olmi Landrith Dr		Transaction ID : SA11Ai-CN38324	
City Alexandria	State VA	Zip Code 22307	Amount of Each Receipt this Period 1000
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 1000		

Full Name (Last, First, Middle Initial) <b>Mr. Eugene Meyung</b>		Date of Receipt M M / D D / Y Y Y Y 12 10 2013	
Mailing Address 1055 Wood Lane		Transaction ID : SA11Ai-CN38678	
City Charlottesville	State VA	Zip Code 22901	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 450		

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

14020022228

**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 431
	<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. Donald L Michael**

Mailing Address **860 Bar Run Rd**

City **Ravenswood** State **WV** Zip Code **26164-3606**

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

Name of Employer **WV Farm Bureau** Occupation **Director Of Gov't Affairs**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 M M / D D / Y Y Y Y  
**10 11 2013**

Transaction ID : **SA11Ai-CN37387**

Amount of Each Receipt this Period  
 \$ **100**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Donald L Michael**

Mailing Address **860 Bar Run Rd**

City **Ravenswood** State **WV** Zip Code **26164-3606**

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

Name of Employer **WV Farm Bureau** Occupation **Director Of Gov't Affairs**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt  
 M M / D D / Y Y Y Y  
**12 10 2013**

Transaction ID : **SA11Ai-CN38708**

Amount of Each Receipt this Period  
 \$ **200**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. John T. Miesner**

Mailing Address **1533 Bedford Rd.**

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

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

Name of Employer **Self Employed** Occupation **Attorney At Law**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**12 10 2013**

Transaction ID : **SA11Ai-CN38688**

Amount of Each Receipt this Period  
 \$ **1000**

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

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

\$ **1300.00**

1402002229

**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 431
	<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>A. Mrs. Kathleen Miesner</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 06 / 2013
Mailing Address 300 Yorkshire Dr		Transaction ID : SA11Ai-CN38576
City	State	Zip Code
Charleston	WV	25314
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 150
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 275	

Full Name (Last, First, Middle Initial) <b>B. Mr. Glenn S Miller</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 04 / 2013
Mailing Address 1011 Saville Ln		Transaction ID : SA11Ai-CN38343
City	State	Zip Code
Mclean	VA	22101
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 1000
Name of Employer SwidleBeriSherellFrishmen	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>C. Mrs. Amy H Mills</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 14 / 2013
Mailing Address 113 Evergreen Pl		Transaction ID : SA11Ai-CN38240
City	State	Zip Code
Beckley	WV	25801
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 250
Name of Employer Trinity Coal Corp.	Occupation Engineering	
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).....	1400.00
<b>TOTAL</b> This Period (last page this line number only).....	

1402002230

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

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

FOR LINE NUMBER: PAGE 164 OF 431  
(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. William J Mills**

Mailing Address **15 West 53rd St**

City State Zip Code  
**New York NY 10019**

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

Name of Employer Occupation  
Citigroup Finance

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**5000**

Date of Receipt  
M M / D D / Y Y Y Y  
**10 17 2013**

Transaction ID : **SA11AI-CN37504**

Amount of Each Receipt this Period  
**5000**

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

Mailing Address **15 West 53rd St**

City State Zip Code  
**New York NY 10019**

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

Name of Employer Occupation  
Citigroup Finance

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**2600**

Date of Receipt  
M M / D D / Y Y Y Y  
**10 18 2013**

Transaction ID : **SA11AI-CN38511**

Amount of Each Receipt this Period  
**-2400**

Redesignated to General 2014

**[MEMO ITEM]**  
Redesignated

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

Mailing Address **15 West 53rd St**

City State Zip Code  
**New York NY 10019**

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

Name of Employer Occupation  
Citigroup Finance

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**5000**

Date of Receipt  
M M / D D / Y Y Y Y  
**10 18 2013**

Transaction ID : **SA11AI-CN38512**

Amount of Each Receipt this Period  
**2400**

Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

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

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

**5000.00**

1402002231

**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 431
	<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. William J Mills</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 10 / 2013
Mailing Address 15 West 53rd St		Transaction ID : SA11AI-CN38794
City New York	State NY	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 200
Name of Employer Citigroup	Occupation Finance	Election Cycle-to-Date \$ 5200
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>B. Mr. William Minsker</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 1181 Aaron Smith Dr		Transaction ID : SA11AI-CN39257
City Bridgeport	State WV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 2000
Name of Employer Buckhannon Auto Mall	Occupation Owner	Election Cycle-to-Date \$ 2000
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. Mr. Harry J Mitchell</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 06 / 2013
Mailing Address 4604 Normar Rd		Transaction ID : SA11AI-CN38498
City South Charleston	State WV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 250
Name of Employer Verizon	Occupation Director	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).....	\$ 2450.00
<b>TOTAL</b> This Period (last page this line number only).....	\$

1402002232

**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 166 OF 431
	<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. Raymond Mize**

Mailing Address 228 Riverview Way

City Elkview	State WV	Zip Code 25071-9617
-----------------	-------------	------------------------

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

Name of Employer Massey Coal Services Inc	Occupation engineer
--	------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1250

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 28 / 2013

Transaction ID : SA11AI-CN37783

Amount of Each Receipt this Period  
750

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Eric M Mondres**

Mailing Address 15082 Stillfield Pl

City Centreville	State VA	Zip Code 20120
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FEC ID number of contributing federal political committee. **C**

Name of Employer FHL Bank	Occupation 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  
12 / 12 / 2013

Transaction ID : SA11AI-CN38895

Amount of Each Receipt this Period  
500

**C.** Full Name (Last, First, Middle Initial)  
**Gen. H.F. Mooney Jr**

Mailing Address 1800 Roundhill Rd  
Apt 606

City Charleston	State WV	Zip Code 25314
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self Employed	Occupation Management Consultant
-----------------------------------	-------------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
550

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 22 / 2013

Transaction ID : SA11AI-CN37659

Amount of Each Receipt this Period  
250

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

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

1500.00

1402002233

**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 167 OF 431
	<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. Brenda L Moore</b>		Date of Receipt M M / D D / Y Y - Y Y 12 / 06 / 2013
Mailing Address 2019 Foley Ave		Transaction ID : SA11AI-CN38544
City Parkersburg	State WV	Zip Code 26101
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 200
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>B. Mr. Harry S. Moore</b>		Date of Receipt M M / D D / Y Y - Y Y 12 / 06 / 2013
Mailing Address 5601 Dunrobin Dr Unit 5308		Transaction ID : SA11AI-CN38564
City Sarasota	State FL	Zip Code 34238-8504
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 500
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>C. Dr. J. Gregory Moore</b>		Date of Receipt M M / D D / Y Y - Y Y 11 / 07 / 2013
Mailing Address 1160 Johnson Ave		Transaction ID : SA11AI-CN38025
City Bridgeport	State WV	Zip Code 26330
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 250
Name of Employer Self	Occupation Dentist	
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) .....	\$ 950.00
<b>TOTAL</b> This Period (last page this line number only) .....	\$

1402002234

**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 431  
(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>A. Ms. Mary Ellen Moore</b>			Date of Receipt M M / D D / Y Y Y Y 12 06 2013		
Mailing Address 5601 Dunrobin Dr Unit 5308			Transaction ID : SA11Ai-CN38565		
City Sarasota	State FL	Zip Code 34238-8504	Amount of Each Receipt this Period \$ , , * 500		
FEC ID number of contributing federal political committee. <b>C</b>			Amount of Each Receipt this Period \$ , , * 500		
Name of Employer Housewife		Occupation Housewife		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 \$ , , * 1000		Amount of Each Receipt this Period \$ , , * 500	

Full Name (Last, First, Middle Initial) <b>B. Ms. Claudia Morgan</b>			Date of Receipt M M / D D / Y Y Y Y 12 06 2013		
Mailing Address 36 Bates Rd			Transaction ID : SA11Ai-CN38558		
City Morgantown	State WV	Zip Code 26505	Amount of Each Receipt this Period \$ , , * 250		
FEC ID number of contributing federal political committee. <b>C</b>			Amount of Each Receipt this Period \$ , , * 250		
Name of Employer Retired		Occupation Retired		Amount of Each Receipt this Period \$ , , * 250	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date \$ , , * 450		Amount of Each Receipt this Period \$ , , * 250	

Full Name (Last, First, Middle Initial) <b>C. Dr. Craig Morgan</b>			Date of Receipt M M / D D / Y Y Y Y 10 29 2013		
Mailing Address 161113th Ave			Transaction ID : SA11Ai-CN37749		
City Huntington	State WV	Zip Code 25701	Amount of Each Receipt this Period \$ , , * 250		
FEC ID number of contributing federal political committee. <b>C</b>			Amount of Each Receipt this Period \$ , , * 250		
Name of Employer Eye Consultant of Huntington		Occupation Physician		Amount of Each Receipt this Period \$ , , * 250	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date \$ , , * 250		Amount of Each Receipt this Period \$ , , * 250	

SUBTOTAL of Receipts This Page (optional).....			\$ , , * 1000.00		
TOTAL This Period (last page this line number only).....			\$ , , *		

1402002235



**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 431  
(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**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Ms Janice L. Morgan</b>		Date of Receipt M M / D D / Y Y Y Y 12 31 2013
Mailing Address 311 W Avis Ave		<b>Transaction ID : SA11AI-CN39201</b>
City State Zip Code Man WV 25635-1132	Amount of Each Receipt this Period \$ 40	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 40
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 225	

<b>B.</b> Full Name (Last, First, Middle Initial) <b>Mr. Paul V Morgan Sr.</b>		Date of Receipt M M / D D / Y Y Y Y 10 28 2013
Mailing Address 376 Nursery Road		<b>Transaction ID : SA11AI-CN37779</b>
City State Zip Code Elizabeth WV 26143	Amount of Each Receipt this Period \$ 50	
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 400	

<b>C.</b> Full Name (Last, First, Middle Initial) <b>Ms. Denise Morrisey</b>		Date of Receipt M M / D D / Y Y Y Y 12 16 2013
Mailing Address 7400 Park Ter Dr		<b>Transaction ID : SA11AI-CN38855</b>
City State Zip Code Alexandria VA 22307	Amount of Each Receipt this Period \$ 2500	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 2500
Name of Employer Capitol Counsel LLC	Occupation Partner	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	\$ 2590.00
<b>TOTAL</b> This Period (last page this line number only).....	\$ 2590.00

1402002236

**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 170 OF 431
	<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. Donald J Morrison</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address 108 Scenery Dr		Transaction ID : SA11Ai-CN38641
City Morgantown	State WV	Zip Code 26505
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period \$ 100	
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	

Full Name (Last, First, Middle Initial) <b>B. Mr. Tommy H. Mullins</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 06 / 2013
Mailing Address 1521 Spars Creek Rd.		Transaction ID : SA11Ai-CN38490
City Danville	State WV	Zip Code 25053-8020
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period \$ 200	
Name of Employer Boone Mem. Hospital	Occupation CEO	
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>C. Mr. Richard B Murphy</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address 6041 Woodman Field		Transaction ID : SA11Ai-CN38321
City Alexandria	State VA	Zip Code 22307
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period \$ 500	
Name of Employer R B Murphy & Associates	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).....	800.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022237

**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 171 OF 431
	<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>A. Mr. Ron R Myers</b>		Date of Receipt M M / D D / Y Y Y Y 12 05 2013
Mailing Address PO Box 2885		Transaction ID : SA11Ai-CN38455
City Huntington	State WV	Zip Code 25728-2885
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 200
Name of Employer Tri-State Amusement	Occupation Owner	
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>B. Ms. Jennifer A Nassour</b>		Date of Receipt M M / D D / Y Y Y Y 12 03 2013
Mailing Address 340 Marlborough St		Transaction ID : SA11Ai-CN38312
City Boston	State MA	Zip Code 02115
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2600
Name of Employer CW4BF	Occupation President	
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>C. Mrs. Barbara Nau</b>		Date of Receipt M M / D D / Y Y Y Y 11 13 2013
Mailing Address PO Box 130130		Transaction ID : SA11Ai-CN38207
City Houston	State TX	Zip Code 77219
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2600
Name of Employer Silver Eagle Distributors	Occupation Executive Secretary	
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).....	5400.00
<b>TOTAL</b> This Period (last page this line number only).....	

1402002238

**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 172 OF 431
	<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. John Nau III</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address 3690 Inwood Dr		Transaction ID : SA11AI-CN38206
City Houston	State TX	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 2600
Name of Employer Silver Eagle Distributors	Occupation Chairman and CEO	Election Cycle-to-Date 2600
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. John C Neal</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address 5517 River Rd		Transaction ID : SA11AI-CN38318
City Fredericksburg	State VA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 500
Name of Employer FHL Bank	Occupation Director	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. Mr. Don E. Nehlen</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 10 / 2013
Mailing Address 2008 Magnolia Dr		Transaction ID : SA11AI-CN38671
City Morgantown	State WV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 100
Name of Employer Retired	Occupation Retired	Election Cycle-to-Date 300
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).....	\$ 3200.00
<b>TOTAL</b> This Period (last page this line number only).....	\$ 3200.00

1402002239

**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 431
	<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)  
**Mr. Lawrence Neubauer**

Mailing Address 115 Central Park W  
Apt 166

City State Zip Code  
New York NY 10023

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

Name of Employer Occupation  
Quilvest USA Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
10 03 2013

Transaction ID : SA11AI-CN36851

Amount of Each Receipt this Period  
\$ 2600

\$ 2600

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Kyle Nevins**

Mailing Address 1325 D Street NE

City State Zip Code  
Washington DC 20002

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

Name of Employer Occupation  
Capitol Counsel LLC Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
11 27 2013

Transaction ID : SA11AI-CN38998

Amount of Each Receipt this Period  
\$ 1000

\$ 1000

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Bobby Nichols**

Mailing Address 378 Line Creek Rd.

City State Zip Code  
Summersville WV 26651

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

Date of Receipt  
M M / D D / Y Y Y Y  
11 11 2013

Transaction ID : SA11AI-CN38135

Amount of Each Receipt this Period  
\$ 500

\$ 500

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

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

\$ 4100.00

\$

1402002240

**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 431  
(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 Nicola**

Mailing Address 214 Grenridge Road

City State Zip Code  
Franklin Lakes NJ 07417

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

Name of Employer Occupation  
Welch Carson Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
M M / D D / Y Y - Y Y  
12 31 2013

Transaction ID : SA11AI-CN39279

Amount of Each Receipt this Period  
2600

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Christie Nicola**

Mailing Address 214 Grenridge Road

City State Zip Code  
Franklin Lakes NJ 07417

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

Name of Employer Occupation  
Not Employed Not Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
M M / D D / Y Y - Y Y  
12 31 2013

Transaction ID : SA11AI-CN39278

Amount of Each Receipt this Period  
2600

**C.** Full Name (Last, First, Middle Initial)  
**Mr. John Nicolozakes**

Mailing Address 62920 Georgetown Rd

City State Zip Code  
Cambridge OH 43725

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

Name of Employer Occupation  
Rayle Coal Mining

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
M M / D D / Y Y - Y Y  
12 05 2013

Transaction ID : SA11AI-CN38438

Amount of Each Receipt this Period  
500

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

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

5700.00

14020022241

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

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

FOR LINE NUMBER:	PAGE 175 OF 431
(check only one)	
<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**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Mr. Michael Novogradac</b>		Date of Receipt MM / DD / YYYY 12 / 31 / 2013
Mailing Address <b>PO Box 7833</b>		<b>Transaction ID : SA11AI-CN39054</b>
City <b>San Francisco</b>	State <b>CA</b>	Zip Code <b>94105</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>Novogradac &amp; Company LLP</b>	Occupation <b>Managing Partner</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>B.</b> Full Name (Last, First, Middle Initial) <b>Mrs. Nikki Nudelman</b>		Date of Receipt MM / DD / YYYY 11 / 06 / 2013
Mailing Address <b>171 Commonwealth Ave</b> <b>Unit 1</b>		<b>Transaction ID : SA11AI-CN37989</b>
City <b>Boston</b>	State <b>MA</b>	Zip Code <b>02116</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>	
<b>C.</b> Full Name (Last, First, Middle Initial) <b>Mr. John F O'Dell</b>		Date of Receipt MM / DD / YYYY 12 / 06 / 2013
Mailing Address <b>3442 Amma Rd</b>		<b>Transaction ID : SA11AI-CN38536</b>
City <b>Amma</b>	State <b>WV</b>	Zip Code <b>25005</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>600</b>
Name of Employer <b>self-employed</b>	Occupation <b>Construction</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>2600.00</b>
<b>TOTAL</b> This Period (last page this line number only).....		

1402002242

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

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

FOR LINE NUMBER: PAGE 176 OF 431  
(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)  
**Dr. Nancy S Odekirk**

Mailing Address 10 Druid Place

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 12 / 31 / 2013

Transaction ID : SA11AI-CN39239

Amount of Each Receipt this Period 1000

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Lawrence A Olson**

Mailing Address 45 Mackenzie Court

City Milton State WV Zip Code 25541

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 10 / 22 / 2013

Transaction ID : SA11AI-CN37656

Amount of Each Receipt this Period 500

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Lawrence A Olson**

Mailing Address 45 Mackenzie Court

City Milton State WV Zip Code 25541

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 12 / 10 / 2013

Transaction ID : SA11AI-CN38810

Amount of Each Receipt this Period 500

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

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

1402002243



**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 431
	<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. Dorothy Osborn</b>		Date of Receipt MM/DD/YYYY 12/23/2013
Mailing Address 310 Essex Meadows		Transaction ID : SA11Ai-CN39111
City Essex	State CT	Zip Code 06426
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100
Name of Employer U.S. Trust	Occupation manager	
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. Mr. Bill Oshel</b>		Date of Receipt MM/DD/YYYY 12/10/2013
Mailing Address 728 Bunker Hill Cir		Transaction ID : SA11Ai-CN38872
City Newport News	State VA	Zip Code 23602
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 365	

Full Name (Last, First, Middle Initial) <b>C. Mrs. Tammy J Owen</b>		Date of Receipt MM/DD/YYYY 12/16/2013
Mailing Address 2072 Crestwood Rd		Transaction ID : SA11Ai-CN38852
City Charleston	State WV	Zip Code 25302
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Goodwin & Goodwin LLP	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).....	800.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022244

**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 431  
(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. Margaret N. Palmer**

Mailing Address 1550 Mt Alpha Rd

City State Zip Code  
Charleston WV 25304

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

Name of Employer Occupation  
CAMC Nurse

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5200

Date of Receipt  
M M / D D / Y Y Y Y  
12 06 2013

Transaction ID : SA11AI-CN38507

Amount of Each Receipt this Period  
2600

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Henry G Pannell**

Mailing Address 4271 N Elizabeth Ln

City State Zip Code  
Atlanta GA 30339

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

Name of Employer Occupation  
Federal Home Loan Bank Banker

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
M M / D D / Y Y Y Y  
12 03 2013

Transaction ID : SA11AI-CN38316

Amount of Each Receipt this Period  
500

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Robert A Paolini**

Mailing Address 1900 Pine Manor Rd

City State Zip Code  
Charleston WV 25311

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

Name of Employer Occupation  
Chesapeake Energy Corp. manager

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
350

Date of Receipt  
M M / D D / Y Y Y Y  
12 10 2013

Transaction ID : SA11AI-CN38786

Amount of Each Receipt this Period  
200

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

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

3300.00

1402002245

**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 431  
(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. Raymond Parks**

Mailing Address **344 Wood Lomond Way**

City **Huntington** State **WV** Zip Code **25705**

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  
**10 07 2013**

Transaction ID : **SA11AI-CN38930**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Donald S Parris Jr**

Mailing Address **194 Abiding Way**

City **Rio** State **WV** Zip Code **26755**

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

Name of Employer **W.A. Chester LLC** Occupation **Manager**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
M M / D D / Y - Y - Y - Y  
**12 05 2013**

Transaction ID : **SA11AI-CN38440**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Suzanne K. Parsons**

Mailing Address **1271 Poca River Rd S**

City **Poca** State **WV** Zip Code **25159**

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 **200**

Date of Receipt  
M M / D D / Y - Y - Y - Y  
**12 05 2013**

Transaction ID : **SA11AI-CN38403**

Amount of Each Receipt this Period  
**100**

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

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

**600.00**

14020022246

**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 431  
(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. Mr. Don Pauley**

Full Name (Last, First, Middle Initial)  
Mailing Address 3805 Duckcove Way

City State Zip Code  
Cumming GA 30041-9291

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  
400

Date of Receipt  
M M / D D / Y Y Y Y  
12 10 2013

Transaction ID : SA11Ai-CN38873

Amount of Each Receipt this Period  
100

**B. Mrs. Karen B Peetz**

Full Name (Last, First, Middle Initial)  
Mailing Address 105 Brighton Ave

City State Zip Code  
Spring Lake NJ 07762

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

Name of Employer Occupation  
BNY Mellon Banker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500

Date of Receipt  
M M / D D / Y Y Y Y  
12 03 2013

Transaction ID : SA11Ai-CN38314

Amount of Each Receipt this Period  
2500

**C. Ms. Gail Perl**

Full Name (Last, First, Middle Initial)  
Mailing Address 60 East End

City State Zip Code  
New York NY 10028

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
M M / D D / Y Y Y Y  
11 15 2013

Transaction ID : SA11Ai-CN38103

Amount of Each Receipt this Period  
2000

**SUBTOTAL** of Receipts This Page (optional)..... 4600.00

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

14020022247

**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 431
	<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**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Mr. Craig D Peskin</b>		Date of Receipt M M / D D / Y Y Y Y 11 06 2013
Mailing Address 58 Monmouth Street		Transaction ID : SA11Ai-CN37984
City Brookline State MA Zip Code 02446	Amount of Each Receipt this Period 1000	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000
Name of Employer Highfields Capital Management Occupation Business Manager	Election Cycle-to-Date 1000	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>B.</b> Full Name (Last, First, Middle Initial) <b>Mr. Don H Peterson</b>		Date of Receipt M M / D D / Y Y Y Y 10 11 2013
Mailing Address 6581 Us Highway 33 E		Transaction ID : SA11Ai-CN37350
City Horner State WV Zip Code 26372-9734	Amount of Each Receipt this Period 100	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250
Name of Employer Self Employed Occupation Farm Owner	Election Cycle-to-Date 250	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>C.</b> Full Name (Last, First, Middle Initial) <b>Mr. Charles W Peyton</b>		Date of Receipt M M / D D / Y Y Y Y 12 10 2013
Mailing Address 859 Chestnut St		Transaction ID : SA11Ai-CN38875
City Charleston State WV Zip Code 25309-2035	Amount of Each Receipt this Period 25	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 215
Name of Employer Retired Occupation Retired	Election Cycle-to-Date 215	
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).....	1125.00
<b>TOTAL</b> This Period (last page this line number only).....	1125.00

14020022248

**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 431
	<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) <b>Mr. Donald E Phillips</b>		Date of Receipt MM / DD / YYYY 11 / 14 / 2013
Mailing Address 1606A Ridge Rd.		Transaction ID : SA11Ai-CN38288
City Oak Hill	State WV	Zip Code 25901
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250	
Name of Employer G-E Drilling Inc.	Occupation President	
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>Mrs. Susan B. Plant</b>		Date of Receipt MM / DD / YYYY 10 / 28 / 2013
Mailing Address 420 Stonecrest Dr		Transaction ID : SA11Ai-CN37824
City Napa	State CA	Zip Code 94558
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100	
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	

C. Full Name (Last, First, Middle Initial) <b>Mr. Robert W. D. Pownall</b>		Date of Receipt MM / DD / YYYY 12 / 10 / 2013
Mailing Address Rr 1 Box 8aa		Transaction ID : SA11Ai-CN38866
City Augusta	State WV	Zip Code 26704
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 140	
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 280	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	490.00
<b>TOTAL</b> This Period (last page this line number only).....	

1402002249

**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 431
	<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. Betty M. Prest</b>		Date of Receipt M M / D D / Y Y - Y Y 12 / 10 / 2013
Mailing Address PO Box 603		Transaction ID : SA11Ai-CN38790
City Ansted	State WV	Zip Code 25812
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300
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 525	

Full Name (Last, First, Middle Initial) <b>B. David Pryzbylski</b>		Date of Receipt M M / D D / Y Y - Y Y 12 / 31 / 2013
Mailing Address 200 Biovayne Blvd S		Transaction ID : SA11Ai-CN39270
City Miami	State FL	Zip Code 33131
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer Georgian American Alloy	Occupation CEO	
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. William Pugh</b>		Date of Receipt M M / D D / Y Y - Y Y 12 / 31 / 2013
Mailing Address 309 Pointe Dr S		Transaction ID : SA11Ai-CN39235
City Charleston	State WV	Zip Code 25314
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300
Name of Employer Vimasco Corp	Occupation Businessman	
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).....	

14020022250

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 184 OF 431		
	(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. Joe Pyne</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address 3345 Del Monte Dr.			Transaction ID : SA11AI-CN38205
City Houston	State TX	Zip Code 77019	Amount of Each Receipt this Period 2600
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600	
Name of Employer Kirby Corp	Occupation Executive	Amount of Each Receipt this Period 2600	
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>B. Mr. John S Quackenboss</b>			Date of Receipt M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address 6404 Cavalier Corridor			Transaction ID : SA11AI-CN38329
City Falls Church	State VA	Zip Code 22044	Amount of Each Receipt this Period 250
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250	
Name of Employer L & Q International Inc.	Occupation Consultant	Amount of Each Receipt this Period 250	
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. Phillip H. Raines</b>			Date of Receipt M M / D D / Y Y Y Y 10 / 11 / 2013
Mailing Address 5252 Kanawha Blvd E			Transaction ID : SA11AI-CN37469
City Charleston	State WV	Zip Code 25311	Amount of Each Receipt this Period 100
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300	
Name of Employer Raines Property Management	Occupation Owner	Amount of Each Receipt this Period 300	
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).....	2950.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022251



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

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

FOR LINE NUMBER: PAGE 185 OF 431  
(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. Phillip H. Raines**

Mailing Address **5252 Kanawha Blvd E**

City **Charleston** State **WV** Zip Code **25311**

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

Name of Employer **Raines Property Management** Occupation **Owner**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt  
 M M / D D / Y Y Y Y  
**12 23 2013**

Transaction ID : **SA11AI-CN39118**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Mercedes Ramas**

Mailing Address **33 Sandlewood Dr**

City **Beckley** State **WV** Zip Code **25801**

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

Name of Employer **Raleigh Radiology** Occupation **Radiologist**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M / D D / Y Y Y Y  
**11 15 2013**

Transaction ID : **SA11AI-CN38111**

Amount of Each Receipt this Period  
**300**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Scott W Reed**

Mailing Address **6425 Bandera Avenue**  
**3A**

City **Dallas** State **TX** Zip Code **75225**

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

Name of Employer **Chesapeake Enterprises** Occupation **Chairman**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**12 16 2013**

Transaction ID : **SA11AI-CN38857**

Amount of Each Receipt this Period  
**1000**

**SUBTOTAL** of Receipts This Page (optional)..... **1400.00**

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

1402002252

**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 186 OF 431
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 13b	<input type="checkbox"/> 11c
	<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. Shawn D Reesman</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 14 / 2013
Mailing Address 505 Old Farm Rd		Transaction ID : SA11AI-CN38243
City Daniels	State WV	Zip Code 25832
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer Raleigh Radiology	Occupation Physician	
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. Dr. John Reifsteck</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 17 / 2013
Mailing Address 2145 Presidential Dr		Transaction ID : SA11AI-CN38733
City Charleston	State WV	Zip Code 25314
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100
Name of Employer associated radiologists	Occupation physician	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450	

Full Name (Last, First, Middle Initial) <b>C. Ms. Anne Chettle Reinke</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 04 / 2013
Mailing Address 2803 Ridge Road Dr		Transaction ID : SA11AI-CN38391
City Alexandria	State VA	Zip Code 22302
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer CSC Corp.	Occupation Executive	
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).....	850.00
<b>TOTAL</b> This Period (last page this line number only).....	

1402002253

**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 431
	<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) <b>Ms. Colleen Resley</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 14 / 2013
Mailing Address 108 Sourwood Ln		Transaction ID : SA11AI-CN38252
City State Zip Code Daniels WV 25832	Amount of Each Receipt this Period \$ 250	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 250
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 \$ 350	

<b>B.</b> Full Name (Last, First, Middle Initial) <b>Mr. Robert Reynolds</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 27 / 2013
Mailing Address 153 Garfield Road		Transaction ID : SA11AI-CN39034
City State Zip Code Concord MA 01742	Amount of Each Receipt this Period \$ 5200	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 5200
Name of Employer Putnam Financial	Occupation Executive	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date \$ 5200	

<b>C.</b> Full Name (Last, First, Middle Initial) <b>Mr. Robert Reynolds</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 30 / 2013
Mailing Address 153 Garfield Road		Transaction ID : SA11AI-CN39311
City State Zip Code Concord MA 01742	Amount of Each Receipt this Period \$ -2600	
FEC ID number of contributing federal political committee. <b>C</b>		Redesignated to General 2014  <b>[MEMO ITEM]</b> Redesignated
Name of Employer Putnam Financial	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>SUBTOTAL</b> of Receipts This Page (optional).....	\$ 5450.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022254

**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 188 OF 431
	<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. Robert Reynolds**

Mailing Address 153 Garfield Road

City Concord State MA Zip Code 01742

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

Name of Employer Putnam Financial 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  
12 / 30 / 2013

Transaction ID : SA11Ai-CN39312

Amount of Each Receipt this Period  
\$ 2600  
Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Joseph V Rice II**

Mailing Address 1732 Louden Heights Rd

City Charleston State WV Zip Code 25314

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 200

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 11 / 2013

Transaction ID : SA11Ai-CN37380

Amount of Each Receipt this Period  
\$ 100

**C.** Full Name (Last, First, Middle Initial)  
**Mr. J Brian Riley**

Mailing Address 2902 Middle Bridge Ct

City Crofton State MD Zip Code 21114

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

Name of Employer GoodYear Occupation Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 500

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 03 / 2013

Transaction ID : SA11Ai-CN38327

Amount of Each Receipt this Period  
\$ 500

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

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

600.00

14020022255

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

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

FOR LINE NUMBER: PAGE 189 OF 431  
(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. Scott D. Ritchie**

Mailing Address 101 2nd Ave

City State Zip Code  
Murraysville WV 26164

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

Name of Employer Occupation  
SDR PlasticsInc. Executive

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1050

Date of Receipt  
M M / D D / Y Y Y Y  
12 31 2013

Transaction ID : SA11AI-CN39265

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Jill Roberts**

Mailing Address 245 Woodward St.

City State Zip Code  
Waban MA 02468

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y  
11 06 2013

Transaction ID : SA11AI-CN37995

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Corbin J Robertson Jr**

Mailing Address 601 Jefferson St. Suite 3600

City State Zip Code  
Houston TX 77002

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

Name of Employer Occupation  
Quintana Minerals Chairman/CEO

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2400

Date of Receipt  
M M / D D / Y Y Y Y  
11 06 2013

Transaction ID : SA11AI-CN38005

Amount of Each Receipt this Period  
2400

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

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

4400.00

1402002256

**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 431
	<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. Rachel P Robinson**

Mailing Address **6209 Foxcroft Rd**

City **Alexandria** State **VA** Zip Code **22307**

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

Name of Employer **American International Auto Dealers** Occupation **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  
**12 04 2013**

Transaction ID : **SA11AI-CN38338**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Tully Roisman**

Mailing Address **118 Township Rd 1434**

City **South Point** State **OH** Zip Code **45680**

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  
**10 11 2013**

Transaction ID : **SA11AI-CN37307**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Tully Roisman**

Mailing Address **118 Township Rd 1434**

City **South Point** State **OH** Zip Code **45680**

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  
**10 21 2013**

Transaction ID : **SA11AI-CN37332**

Amount of Each Receipt this Period  
**100**

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

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

**700.00**

14020022257

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

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

FOR LINE NUMBER: PAGE 191 OF 431  
(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. Forrest H. Roles**

Mailing Address **904 Bird Rd**

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

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

Date of Receipt  
M M / D D / Y Y - Y Y  
**10 21 2013**

Transaction ID : **SA11AI-CN37533**

Amount of Each Receipt this Period  
**250**

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

Mailing Address **14 Fox Chase Rd**

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

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  
**10 11 2013**

Transaction ID : **SA11AI-CN37377**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Joseph M Romagnoli**

Mailing Address **14 Fox Chase Rd**

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

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  
**12 06 2013**

Transaction ID : **SA11AI-CN38551**

Amount of Each Receipt this Period  
**550**

**SUBTOTAL** of Receipts This Page (optional)..... **1300.00**

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

14020022258

**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 431
	<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 Romagnoli</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 11 / 2013	
Mailing Address 14 Foxchase Rd		<b>Transaction ID : SA11Ai-CN37378</b>	
City Charleston    State WV    Zip Code 25304	Amount of Each Receipt this Period \$ 500		
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 500	
Name of Employer housewife    Occupation Housewife	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>B. Mrs. Shirley Romagnoli</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 06 / 2013	
Mailing Address 14 Foxchase Rd		<b>Transaction ID : SA11Ai-CN38552</b>	
City Charleston    State WV    Zip Code 25304	Amount of Each Receipt this Period \$ 550		
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 1050	
Name of Employer housewife    Occupation Housewife	Election Cycle-to-Date \$ 1050		
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. Mr. John Rose</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 26 / 2013	
Mailing Address 509 Pine Road		<b>Transaction ID : SA11Ai-CN39033</b>	
City Fort Washington    State MD    Zip Code 20744	Amount of Each Receipt this Period \$ 500		
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 500	
Name of Employer Self Employed    Occupation Consultant	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).....	\$ 1550.00
<b>TOTAL</b> This Period (last page this line number only).....	\$

14020022259



**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 431
	<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>A. Ms. Caren Roseman</b>		Date of Receipt M M / D D / Y Y Y Y 12 10 2013
Mailing Address 14 East 75th Street		Transaction ID : SA11Ai-CN39014
City New York	State NY	Zip Code 10021
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer Citigroup	Occupation Banking	
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. Dean A Rosen</b>		Date of Receipt M M / D D / Y Y Y Y 12 06 2013
Mailing Address 139 11th St NE		Transaction ID : SA11Ai-CN38463
City Washington	State DC	Zip Code 20002
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Mehlman Vogel Castagnetti	Occupation Partner	
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. Saul Rosen</b>		Date of Receipt M M / D D / Y Y Y Y 12 12 2013
Mailing Address 466 Washington St.		Transaction ID : SA11Ai-CN38842
City New York	State NY	Zip Code 10013
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Citigroup	Occupation Executive	
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).....	1750.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022260

**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 194 OF 431
	<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. Joan Rosenthal</b>		Date of Receipt MM / DD / YYYY 11 / 06 / 2013
Mailing Address <b>40 Barlett Road</b>		Transaction ID : <b>SA11AI-CN37991</b>
City <b>Marblehead</b>	State <b>MA</b>	Zip Code <b>01945</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>Marblehead MA Public Schools</b>	Occupation <b>Reading Specialist</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. Full Name (Last, First, Middle Initial) <b>Ms. Alice S Rowzee</b>		Date of Receipt MM / DD / YYYY 10 / 22 / 2013
Mailing Address <b>170 Potomac Ave.</b>		Transaction ID : <b>SA11AI-CN37684</b>
City <b>Romney</b>	State <b>WV</b>	Zip Code <b>26757</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>	

C. Full Name (Last, First, Middle Initial) <b>Mr. Mark Rubin</b>		Date of Receipt MM / DD / YYYY 11 / 07 / 2013
Mailing Address <b>84 Bigelow Rd</b>		Transaction ID : <b>SA11AI-CN37969</b>
City <b>West Newton</b>	State <b>MA</b>	Zip Code <b>02465</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>Mark Inc.</b>	Occupation <b>Business Manager</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).....	

14020022261

**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 431
	<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>Mr. David O Rubrecht Jr.</b>		Date of Receipt M M / D D / Y Y Y Y 12 23 2013
Mailing Address 15 Hamilton Pl		Transaction ID : SA11AI-CN39175
City Charleston	State WV	Zip Code 25314
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer McJunkin Redman Corp.	Occupation Sales Manager	
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>Ms. Martha Rucker</b>		Date of Receipt M M / D D / Y Y Y Y 11 14 2013
Mailing Address 244 Lee Ave		Transaction ID : SA11AI-CN38284
City Beckley	State WV	Zip Code 25801
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Mountain Eagle Inc	Occupation Adminstrator	
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. William J Rucker</b>		Date of Receipt M M / D D / Y Y Y Y 11 14 2013
Mailing Address 244 Lee Ave		Transaction ID : SA11AI-CN38283
City Beckley	State WV	Zip Code 25801-2004
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000
Name of Employer Mountain Eagle Inc.	Occupation Beer Distribution	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2200	

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

14020022262

**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 196 OF 431
	<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. Michael Rudge**

Mailing Address 2003 Overly Dr

City State Zip Code  
St. Albans WV 25177

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

Name of Employer Occupation  
Loop Pharmacy Businessman

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
200

Date of Receipt  
M M / D D / Y Y Y Y  
12 31 2013

Transaction ID : SA11AI-CN39036

Amount of Each Receipt this Period  
100

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Andrew Sabin**

Mailing Address 300 Pantigo Place

City State Zip Code  
East Hampton NY 11937

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

Name of Employer Occupation  
Sabin Metal Corp Owner

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5200

Date of Receipt  
M M / D D / Y Y Y Y  
10 29 2013

Transaction ID : SA11AI-CN37945

Amount of Each Receipt this Period  
5200

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

Mailing Address 300 Pantigo Place

City State Zip Code  
East Hampton NY 11937

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

Name of Employer Occupation  
Sabin Metal Corp Owner

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
M M / D D / Y Y Y Y  
10 29 2013

Transaction ID : SA11AI-CN37947

Amount of Each Receipt this Period  
-2600

Redesignated to General 2014

**[MEMO ITEM]**  
Redesignated

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

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

5300.00

1402002263

**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 431
	<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>A. Mr. Andrew Sabin</b>		Date of Receipt M M / D D / Y Y Y Y 10 29 2013
Mailing Address 300 Pantigo Place City State Zip Code East Hampton NY 11937		Transaction ID : SA11AI-CN37948
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2600
Name of Employer Sabin Metal Corp	Occupation Owner	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 5200	[MEMO ITEM] Redesignation

Full Name (Last, First, Middle Initial) <b>B. Dr. Arturo Sabio</b>		Date of Receipt M M / D D / Y Y Y Y 12 06 2013
Mailing Address 527 Airport Rd City State Zip Code Sutton WV 26601		Transaction ID : SA11AI-CN38482
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 200
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 200	

Full Name (Last, First, Middle Initial) <b>C. Mrs. Mary T Sargent</b>		Date of Receipt M M / D D / Y Y Y Y 12 06 2013
Mailing Address 20 Loeffler Rd Apt T413 City State Zip Code Bloomfield CT 06002-4302		Transaction ID : SA11AI-CN38580
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400
Name of Employer Not Employed	Occupation Housewife	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	600.00
<b>TOTAL</b> This Period (last page this line number only).....	600.00

14020022264

**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 198 OF 431
	<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. Steve Sarver</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 14 / 2013
Mailing Address 1336 Lebanon Street		Transaction ID : SA11AI-CN38266
City Bluefield	State WV	Zip Code 24701
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer Justice Corporation	Occupation Sr VP Coal Sales	
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. Steve Sarver</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 14 / 2013
Mailing Address 1336 Lebanon Street		Transaction ID : SA11AI-CN38274
City Bluefield	State WV	Zip Code 24701
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -125
Name of Employer Justice Corporation	Occupation Sr VP Coal Sales	Reattributed to Alice Ann Sarver
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 125	[MEMO ITEM] Reattributed

Full Name (Last, First, Middle Initial) <b>Mr. Robert J Sause</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address PO Box 32		Transaction ID : SA11AI-CN39211
City Lost City	State WV	Zip Code 26810
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100
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 280	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	350.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022265

**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 199 OF 431
	<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. Douglas B. Sayre</b>			Date of Receipt M M / D D / Y Y Y Y 12 10 2013
A. Mailing Address 138 Jordan Ln			Transaction ID : SA11Ai-CN38870
City Daniels	State WV	Zip Code 25832	Amount of Each Receipt this Period 500
FEC ID number of contributing federal political committee. C			
Name of Employer Rock And Coal Construction 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>B. Ms. Carole Scaring</b>			Date of Receipt M M / D D / Y Y Y Y 11 14 2013
Mailing Address 411 Club Circle			Transaction ID : SA11Ai-CN38281
City Daniels	State WV	Zip Code 25832	Amount of Each Receipt this Period 200
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 200		

Full Name (Last, First, Middle Initial) <b>C. Mr. Paul Scham</b>			Date of Receipt M M / D D / Y Y Y Y 11 15 2013
Mailing Address 103 Hawthorn Ln			Transaction ID : SA11Ai-CN38109
City Daniels	State WV	Zip Code 25832	Amount of Each Receipt this Period 250
FEC ID number of contributing federal political committee. C			
Name of Employer UPS	Occupation Manager		
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).....	950.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022266

**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 200 OF 431
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 13b	<input type="checkbox"/> 11c
	<input type="checkbox"/> 14	<input type="checkbox"/> 11d
	<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 Schellhas**

Mailing Address **2639 Roosevelt St N**

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

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

Name of Employer **CitiGroup** 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  
**10 30 2013**

Transaction ID : **SA11Ai-CN37955**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Anna M Schneider**

Mailing Address **4709 8th St. S**

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

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

Name of Employer **Alliance Of Auto Manufacturers** 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  
**10 30 2013**

Transaction ID : **SA11Ai-CN37954**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Joann Scholl**

Mailing Address **30 Woodland Drive**

City **Madison** State **WV** Zip Code **25130**

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

Name of Employer **NAP's** Occupation **CRNA**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
M M / D D / Y Y Y Y  
**12 23 2013**

Transaction ID : **SA11Ai-CN39167**

Amount of Each Receipt this Period  
**200**

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

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

**950.00**

14020022267



**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 431
	<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)  
**Ms. Polly Schott**

Mailing Address **514 Park Ln S**

City **Houston** State **TX** Zip Code **77007**

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

Name of Employer **EnerVest Ltd.** Occupation **Finance**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \$ 1000

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 07 / 2013

Transaction ID : **SA11Ai-CN37972**

Amount of Each Receipt this Period  
 \$ 1000

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

Mailing Address **213 Ashby Ave**

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

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  
 \$ 250

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 06 / 2013

Transaction ID : **SA11Ai-CN38563**

Amount of Each Receipt this Period  
 \$ 250

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Peggy L Schultz**

Mailing Address **213 Ashby Ave**

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

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

Name of Employer **Peggy Schultz & Assoc** Occupation **Association Mgmt**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
 \$ 750

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 06 / 2013

Transaction ID : **SA11Ai-CN38562**

Amount of Each Receipt this Period  
 \$ 250

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

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

\$ 1500.00

1402002268

**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 431
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 13b	<input type="checkbox"/> 11c
	<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. Stephen A Schwarzman</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 345 Park Avenue 44th Floor		Transaction ID : SA11AI-CN39249
City New York	State NY	
Zip Code 10154		Amount of Each Receipt this Period \$ 2600
FEC ID number of contributing federal political committee. C		
Name of Employer The Blackstone Group LP	Occupation Chairman & CEO	
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 L Scott</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 29 / 2013
Mailing Address PO Box 1354		Transaction ID : SA11AI-CN37936
City Middleburg	State VA	
Zip Code 20118		Amount of Each Receipt this Period \$ 250
FEC ID number of contributing federal political committee. C		
Name of Employer Summit Point Raceway Assoc.	Occupation President	
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. Jeffrey T Scott</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 23 Kristin Pl		Transaction ID : SA11AI-CN38829
City Old Tappan	State NJ	
Zip Code 07675		Amount of Each Receipt this Period \$ 1600
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 2600	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	\$ 4450.00
<b>TOTAL</b> This Period (last page this line number only).....	\$

14020022269

**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 431
	<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. Max G. Scott**

Mailing Address 104 Blueberry Pl

City State Zip Code  
Daniels WV 25832

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 **550**

Date of Receipt  
MM / DD / YYYY  
11 / 14 / 2013

Transaction ID : **SA11Ai-CN38265**

Amount of Each Receipt this Period  
\$ 250

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Stephen L Sebert**

Mailing Address 8 Meadow Creek

City State Zip Code  
Barboursville WV 25504

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

Name of Employer Occupation  
Self Physician

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
MM / DD / YYYY  
12 / 10 / 2013

Transaction ID : **SA11Ai-CN38803**

Amount of Each Receipt this Period  
\$ 200

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Nick Seremetis**

Mailing Address 208 Prospect St

City State Zip Code  
Morgantown WV 26505

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

Name of Employer Occupation  
Spruce Street Apartments Manager/organizer

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
MM / DD / YYYY  
12 / 10 / 2013

Transaction ID : **SA11Ai-CN38702**

Amount of Each Receipt this Period  
\$ 100

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

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

\$ 550.00

14020022270

**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 204 OF 431
	<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>A. Dr. Henry Setliff</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 14 / 2013
Mailing Address 1340 Lake Dr		Transaction ID : SA11Ai-CN38262
City State Zip Code Daniels WV 25832	Amount of Each Receipt this Period 250	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250
Name of Employer Raleigh Radiology	Occupation Physician	
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. Dr. Henry Setliff</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 14 / 2013
Mailing Address 1340 Lake Dr		Transaction ID : SA11Ai-CN38270
City State Zip Code Daniels WV 25832	Amount of Each Receipt this Period -125	
FEC ID number of contributing federal political committee. <b>C</b>		Reattributed to Ellen Setliff <b>[MEMO ITEM]</b> Reattributed
Name of Employer Raleigh Radiology	Occupation Physician	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 125	

Full Name (Last, First, Middle Initial) <b>C. Mr H G Shaffer</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 23 / 2013
Mailing Address 131 Greystone Dr		Transaction ID : SA11Ai-CN39164
City State Zip Code Beaver WV 25813-9145	Amount of Each Receipt this Period 100	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 200
Name of Employer Shaffer and Shaffer	Occupation Attorney	
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).....	350.00
<b>TOTAL</b> This Period (last page this line number only).....	350.00

1402002271

**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 431
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 13b	<input type="checkbox"/> 11c
	<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. Richard B Shaffer</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 23 / 2013
Mailing Address 3731 Renoir Pl		Transaction ID : SA11AI-CN39090
City Cincinnati	State OH	Zip Code 45241
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100
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	

Full Name (Last, First, Middle Initial) <b>B. Mrs. Sharon Shapiro</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 06 / 2013
Mailing Address 69 Clinton Road		Transaction ID : SA11AI-CN37996
City Brookline	State MA	Zip Code 02445
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Ruderman Family Foundation	Occupation Non-Profit Manager	
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. Rhod Shaw</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 524 Fort Williams Pkwy		Transaction ID : SA11AI-CN39048
City Alexandria	State VA	Zip Code 22304
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Alpine Group	Occupation consultant	
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).....	2100.00
<b>TOTAL</b> This Period (last page this line number only).....	

1402002272

**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 206 OF 431
	<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. Beverly A Shea**

Mailing Address **3538 S Wakefield St**

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

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

Name of Employer **NFIB** Occupation **Vice President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
M M / D D / Y Y Y Y  
**12 04 2013**

Transaction ID : **SA11AI-CN38374**

Amount of Each Receipt this Period  
**250**

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

Mailing Address **615 Fort Williams Pkwy**

City **Alexandria** State **VA** Zip Code **22304**

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

Name of Employer **Walker & Dunlop** Occupation **Loan Officer**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
M M / D D / Y Y Y Y  
**12 04 2013**

Transaction ID : **SA11AI-CN38378**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Suratkal Shenoy**

Mailing Address **PO Box 929**

City **Keyser** State **WV** Zip Code **26726**

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 **500**

Date of Receipt  
M M / D D / Y Y Y Y  
**10 29 2013**

Transaction ID : **SA11AI-CN37748**

Amount of Each Receipt this Period  
**500**

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

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

**1000.00**

14020022273

**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 431
	<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. Marc Short</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address 3715 North 25th St.		Transaction ID : SA11AI-CN37952
City Arlington	State VA	Zip Code 22207
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer FreedomPartners	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. John Shott</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 10 / 2013
Mailing Address 115 Fawn Cir		Transaction ID : SA11AI-CN38868
City Bluefield	State VA	Zip Code 24605
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
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. Stephen Shy</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address 3174 Route 75		Transaction ID : SA11AI-CN38955
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 1000	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1600.00
<b>TOTAL</b> This Period (last page this line number only).....	

1402002274

**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 208 OF 431
	<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. Stephen Shy</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 29 / 2013
Mailing Address 3174 Route 75		Transaction ID : SA11Ai-CN39003
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 1100	

Full Name (Last, First, Middle Initial) <b>Dr. Stephen Shy</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 10 / 2013
Mailing Address 3174 Route 75		Transaction ID : SA11Ai-CN38801
City Huntington	State WV	Zip Code 25704
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
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 1600	

Full Name (Last, First, Middle Initial) <b>Dr. Stephen Shy</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 3174 Route 75		Transaction ID : SA11Ai-CN39035
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 1700	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	700.00
<b>TOTAL</b> This Period (last page this line number only).....	

1402002275



**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 431
	<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. Dr. Richard Sibley</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 29 / 2013	
Mailing Address 1 Barnes Plaza		<b>Transaction ID : SA11Ai-CN37743</b>	
City Charleston	State WV	Zip Code 25314	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100	
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>B. Mr. Matthew Sidman</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 06 / 2013	
Mailing Address 297 Commonwealth Ave Unit 6		<b>Transaction ID : SA11Ai-CN37983</b>	
City Boston	State MA	Zip Code 02115	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000	
Name of Employer Three Bays Capital LLC	Occupation Investment Manager		
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. Harry Siegel</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013	
Mailing Address 1643 Vineyard Rd		<b>Transaction ID : SA11Ai-CN39066</b>	
City Falling Waters	State WV	Zip Code 25419	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250	
Name of Employer self-employed	Occupation businessman		
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).....	1350.00
<b>TOTAL</b> This Period (last page this line number only).....	

1402002276

**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 431
	<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)  
**Dr. Mark W Simpson**

Mailing Address **400 Allen Dr**

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

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 **400**

Date of Receipt  
M M / D D / Y Y Y Y  
**10 / 11 / 2013**

Transaction ID : **SA11Ai-CN37467**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Herchiel Sims Jr**

Mailing Address **536 Bufflehead Dr**

City **Kiawah Island** State **SC** Zip Code **29455**

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  
**12 / 11 / 2013**

Transaction ID : **SA11Ai-CN38604**

Amount of Each Receipt this Period  
**1600**

**C.** Full Name (Last, First, Middle Initial)  
**Mr Marvin R. Sine**

Mailing Address **HC 71 Box 91.**

City **Capon Bridge** State **WV** Zip Code **26711**

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 **375**

Date of Receipt  
M M / D D / Y Y Y Y  
**10 / 22 / 2013**

Transaction ID : **SA11Ai-CN37604**

Amount of Each Receipt this Period  
**75**

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

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

**1925.00**

14020022277

**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 431  
(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 Marvin R. Sine**

Mailing Address HC 71 Box 91.

City State Zip Code  
Capon Bridge WV 26711

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  
425

Date of Receipt  
M M / D D / Y Y Y Y  
12 06 2013

Transaction ID : SA11Ai-CN38567

Amount of Each Receipt this Period  
50

**B.** Full Name (Last, First, Middle Initial)  
**Mr Marvin R. Sine**

Mailing Address HC 71 Box 91.

City State Zip Code  
Capon Bridge WV 26711

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  
475

Date of Receipt  
M M / D D / Y Y Y Y  
12 31 2013

Transaction ID : SA11Ai-CN39194

Amount of Each Receipt this Period  
50

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Kraig M Siracuse**

Mailing Address 2201 Woodmont Rd

City State Zip Code  
Alexandria VA 22307

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

Name of Employer Occupation  
Park Strategies Director

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y  
12 04 2013

Transaction ID : SA11Ai-CN38389

Amount of Each Receipt this Period  
1000

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

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

1100.00

14020022278

**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 431
	<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>A. Ms. Jennifer Sirk</b>		Date of Receipt M M / D D / Y - Y Y - Y Y 12 31 2013
Mailing Address 5650 Ivydale Road		Transaction ID : SA11Ai-CN39038
City Clay	State WV	
Zip Code 25043		Amount of Each Receipt this Period \$ 100
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	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>B. Mr. George D Six</b>		Date of Receipt M M / D D / Y - Y Y - Y Y 11 12 2013
Mailing Address 3729 Cambridge Drive		Transaction ID : SA11Ai-CN38163
City Hurricane	State WV	
Zip Code 25526		Amount of Each Receipt this Period \$ 100
FEC ID number of contributing federal political committee. C		
Name of Employer Retired	Occupation Retired	Election Cycle-to-Date \$ 400
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. Mr. James D Sizemore</b>		Date of Receipt M M / D D / Y - Y Y - Y Y 12 23 2013
Mailing Address 4 Cherokee Trl.		Transaction ID : SA11Ai-CN39172
City Elkview	State WV	
Zip Code 25071		Amount of Each Receipt this Period \$ 200
FEC ID number of contributing federal political committee. C		
Name of Employer retired	Occupation retired	Election Cycle-to-Date \$ 350
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).....	\$ 400.00
<b>TOTAL</b> This Period (last page this line number only).....	\$

14020022279

**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 431
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 13b	<input type="checkbox"/> 11c
	<input type="checkbox"/> 14	<input type="checkbox"/> 11d
	<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. Kimberly L Skaff</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 23 / 2013
Mailing Address 1879 Louden Heights Rd		Transaction ID : SA11Ai-CN39146
City Charleston	State WV	Zip Code 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	

Full Name (Last, First, Middle Initial) <b>Dr. Paul Alex Skaff</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 23 / 2013
Mailing Address 28 Norwood Rd		Transaction ID : SA11Ai-CN39147
City Charleston	State WV	Zip Code 25314
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer General Anesthesia Services	Occupation Physician	
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>Ms. Amy Smith</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 14 / 2013
Mailing Address 612 Rivendell Dr		Transaction ID : SA11Ai-CN38237
City Bridgeport	State WV	Zip Code 26330
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
Name of Employer Step toe & Johnson	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).....	1500.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022280

**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 214 OF 431
	<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>A. Mrs. Barbara A Smith</b>			Date of Receipt M M / D D / Y Y Y Y 12 09 2013
Mailing Address 4 Rae Pl			Transaction ID : SA11Ai-CN38629
City Charleston	State WV	Zip Code 25314	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period
Name of Employer retired		Occupation Retired	\$ 100
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 3 3 300	

Full Name (Last, First, Middle Initial) <b>B. Mr. Carl O. Smith</b>			Date of Receipt M M / D D / Y Y Y Y 11 04 2013
Mailing Address 12 Red Oak Lane			Transaction ID : SA11Ai-CN37968
City Moorefield	State WV	Zip Code 26836	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period
Name of Employer Retired		Occupation Retired	\$ 100
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 3 3 200	

Full Name (Last, First, Middle Initial) <b>C. Mr. Christopher Sax Smith</b>			Date of Receipt M M / D D / Y Y Y Y 12 05 2013
Mailing Address 22 Capitol St			Transaction ID : SA11Ai-CN38393
City Charleston	State WV	Zip Code 25301	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period
Name of Employer HoyerHoyerSmith & Miesner		Occupation Attorney	\$ 1000
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 3 3 1000	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	\$ 1200.00
<b>TOTAL</b> This Period (last page this line number only).....	\$ 1200.00

14020022281

**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 215 OF 431
	<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. F Randall Smith</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address 325 E 53rd St		<b>Transaction ID : SA11Ai-CN38883</b>
City New York	State NY	Zip Code 10022
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5600
Name of Employer Capital Council	Occupation Partner	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5600	

Full Name (Last, First, Middle Initial) <b>Mr. F Randall Smith</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address 325 E 53rd St		<b>Transaction ID : SA11Ai-CN39319</b>
City New York	State NY	Zip Code 10022
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period -2600
Name of Employer Capital Council	Occupation Partner	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 3000	<b>[MEMO ITEM]</b> Redesignated

Full Name (Last, First, Middle Initial) <b>Mr. F Randall Smith</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address 325 E 53rd St		<b>Transaction ID : SA11Ai-CN39320</b>
City New York	State NY	Zip Code 10022
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2600
Name of Employer Capital Council	Occupation Partner	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 5600	<b>[MEMO ITEM]</b> Redesignation

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

14020022282

**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 216 OF 431
	<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. F Randall Smith</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address 325 E 53rd St		Transaction ID : SA11Ai-CN39323
City New York	State NY	Zip Code 10022
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -400
Name of Employer Capital Council	Occupation Partner	Reattributed to Judith Smith
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200	[MEMO ITEM] Reattributed

Full Name (Last, First, Middle Initial) <b>Mr. Howard Smith</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 18 / 2013
Mailing Address 2915 44th St. NW		Transaction ID : SA11Ai-CN38944
City Washington	State DC	Zip Code 20016
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500
Name of Employer Walker & Dunlop	Occupation Executive	
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. James E Smith</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 04 / 2013
Mailing Address 5214 Farrington Rd		Transaction ID : SA11Ai-CN38379
City Bethesda	State MD	Zip Code 20816
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1250
Name of Employer Smith- Free Group	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 1250	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2750.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022283



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

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

FOR LINE NUMBER: PAGE 217 OF 431  
(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. Judith Smith**

Mailing Address 325 E 53rd St

City State Zip Code  
New York NY 10022

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

Name of Employer Occupation  
Homemaker Homemaker

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
400

Date of Receipt  
M M / D D / Y Y Y Y  
12 13 2013

Transaction ID : SA11AI-CN39324

Amount of Each Receipt this Period  
400

Reattributed from F Randall Smith

**[MEMO ITEM]**  
Reattribution

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Larry D Smith**

Mailing Address 6148 Parkersburg Rd

City State Zip Code  
Sandyville WV 25275-6761

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

Name of Employer Occupation  
Carl E. Smith Petroleum Resources Inc. Director

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
300

Date of Receipt  
M M / D D / Y Y Y Y  
12 06 2013

Transaction ID : SA11AI-CN38582

Amount of Each Receipt this Period  
200

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Michael D Smith**

Mailing Address PO Box 538

City State Zip Code  
Fayetteville WV 25840

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

Name of Employer Occupation  
Wells Fargo Insurance Services Senior Vice President

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250

Date of Receipt  
M M / D D / Y Y Y Y  
11 14 2013

Transaction ID : SA11AI-CN38264

Amount of Each Receipt this Period  
250

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

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

450.00

14020022284

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

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

FOR LINE NUMBER: PAGE 218 OF 431  
(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. Michael D Smith**

Mailing Address **PO Box 538**

City **Fayetteville** State **WV** Zip Code **25840**

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

Name of Employer **Wells Fargo Insurance Services** Occupation **Senior Vice President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **125**

Date of Receipt  
M M / D D / Y Y Y Y  
**11 14 2013**

Transaction ID : **SA11AI-CN38272**

Amount of Each Receipt this Period  
**-125**

Reattributed to **Donna Smith**

**[MEMO ITEM]**  
Reattributed

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Nora D Smith**

Mailing Address **1 Woodberry Ln**

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

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 **2600**

Date of Receipt  
M M / D D / Y Y Y Y  
**12 31 2013**

Transaction ID : **SA11AI-CN39238**

Amount of Each Receipt this Period  
**2600**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Richard F Smith**

Mailing Address **1401 Newcastle Rd**

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 **1600**

Date of Receipt  
M M / D D / Y Y Y Y  
**12 31 2013**

Transaction ID : **SA11AI-CN39315**

Amount of Each Receipt this Period  
**-400**

Redesignated to **General 2014**

**[MEMO ITEM]**  
Redesignated

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

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

**2600.00**

14020022285

**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 431  
(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. Richard F Smith**

Mailing Address 1401 Newcastle Rd

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 2000

Date of Receipt  
M M / D D / Y Y Y Y  
12 31 2013

Transaction ID : SA11AI-CN39316

Amount of Each Receipt this Period  
400

Redesignated from Primary 2014

[MEMO ITEM]  
Redesignation

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Richard F Smith**

Mailing Address 1401 Newcastle Rd

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 3000

Date of Receipt  
M M / D D / Y Y Y Y  
12 31 2013

Transaction ID : SA11AI-CN39192

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Stuart Lewis Smith**

Mailing Address 153 Abney 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  
M M / D D / Y Y Y Y  
12 23 2013

Transaction ID : SA11AI-CN39114

Amount of Each Receipt this Period  
250

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

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

1250.00

1402002286

**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 431
	<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. Thomas Smith</b>		Date of Receipt MM / DD / YYYY 11 / 07 / 2013
Mailing Address 5619 Bordley Dr		Transaction ID : SA11AI-CN37976
City Houston	State TX	Zip Code 77056
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer KSA Industries	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>Mrs. Diane Snowden</b>		Date of Receipt MM / DD / YYYY 12 / 31 / 2013
Mailing Address 10150 St. Augustine Ave		Transaction ID : SA11AI-CN39284
City Vero Beach	State FL	Zip Code 32963
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600
Name of Employer Self Employed	Occupation Self Employed	Reattributed from Guy Snowden
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600	[MEMO ITEM] Reattribution

Full Name (Last, First, Middle Initial) <b>Mr. Guy Snowden</b>		Date of Receipt MM / DD / YYYY 12 / 31 / 2013
Mailing Address 10150 St. Augustine Ave		Transaction ID : SA11AI-CN39277
City Vero Beach	State FL	Zip Code 32963
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5200
Name of Employer Self Employed	Occupation Self Employed	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6200.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022287

**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 431	
	(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. Guy Snowden</b>		Date of Receipt MM / DD / YYYY 12 / 31 / 2013
Mailing Address 10150 St. Augustine Ave		Transaction ID : SA11AI-CN39283
City Vero Beach	State FL	Zip Code 32963
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -2600
Name of Employer Self Employed	Occupation Self Employed	Reattributed to Diane Snowden
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600	[MEMO ITEM] Reattributed

Full Name (Last, First, Middle Initial) <b>B. Mr. Lee Snyder</b>		Date of Receipt MM / DD / YYYY 12 / 06 / 2013
Mailing Address 270 Industrial Blvd		Transaction ID : SA11AI-CN38550
City Kearneysville	State WV	Zip Code 25430-2774
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Snyder Environmental Services	Occupation Contractor	
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. Peter A Snyder</b>		Date of Receipt MM / DD / YYYY 12 / 04 / 2013
Mailing Address 2105 Wakefield Ct		Transaction ID : SA11AI-CN38347
City Alexandria	State VA	Zip Code 22307
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Disruptor Capital	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).....	2000.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022288

**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 431
	<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. James Songer II**

Mailing Address Drawer 1818

City State Zip Code  
Beckley WV 25802

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

Name of Employer Occupation  
Self Insurance Agent

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
M M / D D / Y Y - Y Y  
11 14 2013

**Transaction ID : SA11AI-CN38280**

Amount of Each Receipt this Period  
500

**B.** Full Name (Last, First, Middle Initial)  
**Mr. W. Bradley Sorrells**

Mailing Address PO Box 1791

City State Zip Code  
Charleston WV 25326

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

Name of Employer Occupation  
Robinson & McElwee Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
350

Date of Receipt  
M M / D D / Y Y - Y Y  
12 31 2013

**Transaction ID : SA11AI-CN39199**

Amount of Each Receipt this Period  
100

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Howard W. Speaks**

Mailing Address 2008 Golf Course Rd

City State Zip Code  
Martinsburg WV 25405

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

Name of Employer Occupation  
self-employed Real Estate

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300

Date of Receipt  
M M / D D / Y Y - Y Y  
12 10 2013

**Transaction ID : SA11AI-CN38769**

Amount of Each Receipt this Period  
100

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

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

700.00

14020022289

**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 223 OF 431
	<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. Ronald Spencer</b>		Date of Receipt M M / D D / Y Y Y Y 10 11 2013	
Mailing Address <b>PO Box 143</b>		Transaction ID : <b>SA11AI-CN37306</b>	
City <b>Smithburg</b>	State <b>VA</b>	Zip Code <b>26436</b>	Amount of Each Receipt this Period 1000
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000	
Name of Employer <b>Spencer Enterprises LLC</b>	Occupation <b>Oil &amp; Gas Producer</b>		
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. W. Guy Spriggs</b>		Date of Receipt M M / D D / Y Y Y Y 12 16 2013	
Mailing Address <b>Post Office Box 1139</b>		Transaction ID : <b>SA11AI-CN38853</b>	
City <b>Ashland</b>	State <b>KY</b>	Zip Code <b>41105</b>	Amount of Each Receipt this Period 5000
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000	
Name of Employer <b>Eagle Distributing Co.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 5000		

Full Name (Last, First, Middle Initial) <b>Mr. W. Guy Spriggs</b>		Date of Receipt M M / D D / Y Y Y Y 12 16 2013	
Mailing Address <b>Post Office Box 1139</b>		Transaction ID : <b>SA11AI-CN38860</b>	
City <b>Ashland</b>	State <b>KY</b>	Zip Code <b>41105</b>	Amount of Each Receipt this Period -2400 Redesignated to General 2014
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period -2400 Redesignated to General 2014	
Name of Employer <b>Eagle Distributing Co.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 2600		

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

1402002290

**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 224 OF 431
	<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)  
**Mr. W. Guy Spriggs**

Mailing Address Post Office Box 1139

City Ashland State KY Zip Code 41105

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

Name of Employer Occupation  
Eagle Distributing Co.Inc. Executive

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

Date of Receipt  
M M / D D / Y Y Y Y  
12 16 2013

Transaction ID : SA11AI-CN38861

Amount of Each Receipt this Period  
2400

Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Elisabeth E Squire**

Mailing Address 4004 Carson Place

City Alexandria State VA Zip Code 22304

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

Name of Employer Occupation  
Alexandria Convention Visitors Assoc. Administration

Receipt For: 2014 Election Cycle-to-Date  
 Primary  General  
 Other (specify) 500

Date of Receipt  
M M / D D / Y Y Y Y  
10 30 2013

Transaction ID : SA11AI-CN37961

Amount of Each Receipt this Period  
500

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Gwen Steeley**

Mailing Address P.O Box 734

City Charles Town State WV Zip Code 25414

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

Name of Employer Occupation  
housewife Housewife

Receipt For: 2014 Election Cycle-to-Date  
 Primary  General  
 Other (specify) 2000

Date of Receipt  
M M / D D / Y Y Y Y  
10 11 2013

Transaction ID : SA11AI-CN37369

Amount of Each Receipt this Period  
2000

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

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

2500.00

1402002291



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

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

FOR LINE NUMBER: PAGE 225 OF 431  
(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. Bradley A Stein**

Mailing Address **7204 Avenue B**

City **Bellaire** State **TX** Zip Code **77401**

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

Name of Employer **Triple S Steel** 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  
**12 / 12 / 2013**

Transaction ID : **SA11Ai-CN38848**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Gary W Stein**

Mailing Address **PO Box 21119**

City **Houston** State **TX** Zip Code **77226**

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  
**11 / 13 / 2013**

Transaction ID : **SA11AI-CN38211**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Rex Stewart**

Mailing Address **PO Box 58**

City **Pineville** State **WV** Zip Code **24874**

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  
**10 / 22 / 2013**

Transaction ID : **SA11AI-CN37697**

Amount of Each Receipt this Period  
**250**

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

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

**2250.00**

1402002292

**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 226 OF 431
	<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. William R Still Jr</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address 6810 Little Fox Trl		Transaction ID : SA11Ai-CN38894
City Cumming	State GA	Zip Code 30040
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250
Name of Employer Self	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>Mr. Eugene P Straley</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 23 / 2013
Mailing Address Rt 1 Box 299		Transaction ID : SA11Ai-CN39122
City Ripley	State WV	Zip Code 25271
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100
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. Mary N Stultz</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 21 / 2013
Mailing Address 262 Deerfield Cir		Transaction ID : SA11Ai-CN37530
City Kingwood	State WV	Zip Code 26537
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400
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 1200	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	750.00
<b>TOTAL</b> This Period (last page this line number only) .....	

14020022293

**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 227 OF 431
	<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. 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 **300**

Date of Receipt  
M M / D D / Y Y Y Y  
11 14 2013

Transaction ID : **SA11AI-CN38229**

Amount of Each Receipt this Period  
100

**B.** 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 **400**

Date of Receipt  
M M / D D / Y Y Y Y  
12 10 2013

Transaction ID : **SA11AI-CN38721**

Amount of Each Receipt this Period  
100

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Rebecca Sugar**

Mailing Address 785 Fifth Ave

City New York State NY Zip Code 10022

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

Name of Employer The Alumni Community Occupation Executive Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
M M / D D / Y Y Y Y  
12 12 2013

Transaction ID : **SA11AI-CN38844**

Amount of Each Receipt this Period  
2000

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

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

2200.00

14020022294

**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 228 OF 431
	<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. Geraldine Sunshine**

Mailing Address 113 Marlborough Street

City Boston State MA Zip Code 02116

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

Name of Employer Bracebridge Capital LLC 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  
11 06 2013

Transaction ID : SA11Ai-CN37990

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Raquel Swan**

Mailing Address 4172 Cambridge Rd

City La Canada State CA Zip Code 91011

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 5200

Date of Receipt  
M M / D D / Y Y Y Y  
11 01 2013

Transaction ID : SA11Ai-CN39326

Amount of Each Receipt this Period  
5200

Reattributed from Rodney Swan

**[MEMO ITEM]**  
Reattribution

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Raquel Swan**

Mailing Address 4172 Cambridge Rd

City La Canada State CA Zip Code 91011

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 2600

Date of Receipt  
M M / D D / Y Y Y Y  
11 04 2013

Transaction ID : SA11Ai-CN39329

Amount of Each Receipt this Period  
-2600

Redesignated to General 2014

**[MEMO ITEM]**  
Redesignated

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

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

1000.00

1402002295

**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 229 OF 431
	<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**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Mrs. Raquel Swan</b>		Date of Receipt M M / D D / Y Y Y Y 11 04 2013
Mailing Address 4172 Cambridge Rd		Transaction ID : SA11AI-CN39330
City State Zip Code La Canada CA 91011	Amount of Each Receipt this Period 2600	
FEC ID number of contributing federal political committee. <b>C</b>		Redesignated from Primary 2014
Name of Employer Occupation Homemaker Homemaker	<b>[MEMO ITEM]</b> Redesignation	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200	

<b>B.</b> Full Name (Last, First, Middle Initial) <b>Mr. Rodney Swan</b>		Date of Receipt M M / D D / Y Y Y Y 10 29 2013
Mailing Address 4172 Cambridge Rd		Transaction ID : SA11AI-CN37751
City State Zip Code La Canda CA 91011	Amount of Each Receipt this Period 10200	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Occupation Self Employed Farming		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 10200	

<b>C.</b> Full Name (Last, First, Middle Initial) <b>Mr. Rodney Swan</b>		Date of Receipt M M / D D / Y Y Y Y 10 30 2013
Mailing Address 4172 Cambridge Rd		Transaction ID : SA11AI-CN37752
City State Zip Code La Canda CA 91011	Amount of Each Receipt this Period 200	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Occupation Self Employed Farming		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 10400	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10400.00
<b>TOTAL</b> This Period (last page this line number only).....	

1402002296

**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 230 OF 431
	<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. Rodney Swan**

Mailing Address 4172 Cambridge Rd

City La Canda	State CA	Zip Code 91011
------------------	-------------	-------------------

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

Name of Employer Self Employed	Occupation Farming
-----------------------------------	-----------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5200

Date of Receipt  
MM / DD / YYYY  
11 / 01 / 2013

Transaction ID : SA11AI-CN39325

Amount of Each Receipt this Period  
-5200  
Reattributed to Raquel Swan

**[MEMO ITEM]**  
Reattributed

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Rodney Swan**

Mailing Address 4172 Cambridge Rd

City La Canda	State CA	Zip Code 91011
------------------	-------------	-------------------

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

Name of Employer Self Employed	Occupation Farming
-----------------------------------	-----------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2800

Date of Receipt  
MM / DD / YYYY  
11 / 01 / 2013

Transaction ID : SA11AI-CN39327

Amount of Each Receipt this Period  
-2400  
Redesignated to General 2014

**[MEMO ITEM]**  
Redesignated

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Rodney Swan**

Mailing Address 4172 Cambridge Rd

City La Canda	State CA	Zip Code 91011
------------------	-------------	-------------------

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

Name of Employer Self Employed	Occupation Farming
-----------------------------------	-----------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5200

Date of Receipt  
MM / DD / YYYY  
11 / 01 / 2013

Transaction ID : SA11AI-CN39328

Amount of Each Receipt this Period  
2400  
Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

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

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

0.00

14020022297

**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 231 OF 431
	<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. David L Swanson**

Mailing Address 137 Hanworth Lane

City State Zip Code  
Daniels WV 25832

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  
250

Date of Receipt  
M M / D D / Y Y Y Y  
11 14 2013

Transaction ID : SA11AI-CN38290

Amount of Each Receipt this Period  
250

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Linda Tarplin**

Mailing Address 2103 Powhatan Street

City State Zip Code  
Falls Church VA 22043

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

Name of Employer Occupation  
Tarplin Downs & Young LLC lobbyist

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y  
12 12 2013

Transaction ID : SA11AI-CN39019

Amount of Each Receipt this Period  
500

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Harold Drew Tate**

Mailing Address 121 Olive St E

City State Zip Code  
Bridgeport WV 26330

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  
12 10 2013

Transaction ID : SA11AI-CN38669

Amount of Each Receipt this Period  
100

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

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

850.00

1402002298

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

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

FOR LINE NUMBER: PAGE 232 OF 431  
(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. K Jon Taylor**

Mailing Address **5596 Abbyshire Dr**

City **Hudson** State **OH** Zip Code **44236**

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

Name of Employer **First Energy** Occupation **VP Controller**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
M M / D D / Y Y Y Y  
**10 / 03 / 2013**

Transaction ID : **SA11Ai-CN36850**

Amount of Each Receipt this Period  
**250**

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

Mailing Address **PO Box 52**

City **Kenra** State **WV** Zip Code **25248**

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

Name of Employer **EnerVest Operating** 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  
**11 / 15 / 2013**

Transaction ID : **SA11Ai-CN38101**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. J. Christopher Thomas**

Mailing Address **One Woodchute Ln**

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  
M M / D D / Y Y Y Y  
**12 / 06 / 2013**

Transaction ID : **SA11Ai-CN38470**

Amount of Each Receipt this Period  
**1000**

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

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

**2250.00**

14020022299



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

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

FOR LINE NUMBER: PAGE 233 OF 431  
(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. Paul Thomas**

Mailing Address **4584 Hileman Rd**

City **Bruceon Mills** State **WV** Zip Code **26525**

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

Name of Employer **Stacy Lynn LLC** Occupation **consultant**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **235**

Date of Receipt  
M M / D D / Y Y Y Y  
**12 05 2013**

Transaction ID : **SA11Ai-CN38435**

Amount of Each Receipt this Period  
**35**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Roger D Thomas Sr**

Mailing Address **1709 Carol Dr**

City **Marion** State **IL** Zip Code **62959**

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

Name of Employer **American Coal** Occupation **Supervisor**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **225**

Date of Receipt  
M M / D D / Y Y Y Y  
**11 07 2013**

Transaction ID : **SA11Ai-CN38018**

Amount of Each Receipt this Period  
**100**

**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 **350**

Date of Receipt  
M M / D D / Y Y Y Y  
**11 08 2013**

Transaction ID : **SA11Ai-CN38088**

Amount of Each Receipt this Period  
**50**

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

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

**185.00**

14020022300

**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 234 OF 431
	<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. Noel Thompson III</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 08 / 2013
Mailing Address 147 South Lake Drive		Transaction ID : SA11Ai-CN38969
City Ridgeley	State WV	
Zip Code 1 26753		Amount of Each Receipt this Period \$ 100
FEC ID number of contributing federal political committee. C		
Name of Employer Potomac Highlands Pathology Associates	Occupation Pathologist	
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. Robert H. Thompson</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 14 / 2013
Mailing Address 5 Bel Manor Dr		Transaction ID : SA11Ai-CN38235
City Fairmont	State WV	
Zip Code 26554		Amount of Each Receipt this Period \$ 100
FEC ID number of contributing federal political committee. C		
Name of Employer W. S. Thompson Transfer Inc	Occupation Owner	
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. Margaret E Tighe</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address 5800 1st St N		Transaction ID : SA11Ai-CN38592
City Arlington	State VA	
Zip Code 22203		Amount of Each Receipt this Period \$ 500
FEC ID number of contributing federal political committee. C		
Name of Employer Strategic Health Care	Occupation Partner	
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).....	700.00
<b>TOTAL</b> This Period (last page this line number only).....	

1402002301

**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 235 OF 431
	<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. Edward S. Tincher</b>		Date of Receipt M M / D D / Y - Y - Y Y 10 11 2013
Mailing Address 195 Edgefield Dr		Transaction ID : SA11Ai-CN37337
City Milton	State WV	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 50
Name of Employer Self Employed	Occupation Engineer	
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. Edward S. Tincher</b>		Date of Receipt M M / D D / Y - Y - Y Y 12 10 2013
Mailing Address 195 Edgefield Dr		Transaction ID : SA11Ai-CN38686
City Milton	State WV	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 50
Name of Employer Self Employed	Occupation Engineer	
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. Thomas Toler</b>		Date of Receipt M M / D D / Y - Y - Y Y 12 05 2013
Mailing Address 505 Robert St.		Transaction ID : SA11Ai-CN38459
City Summersville	State WV	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 500
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).....	\$ 600.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022302

**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 236 OF 431
	<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. Veronica A Tonkin</b>		Date of Receipt M - M / D - D / Y - Y - Y - Y 12 / 23 / 2013
Mailing Address 10 Meadow Rd		Transaction ID : SA11AI-CN39134
City Charleston	State WV	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100
Name of Employer Requested	Occupation Requested	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. Michael Toporek</b>		Date of Receipt M - M / D - D / Y - Y - Y - Y 12 / 31 / 2013
Mailing Address 1172 Park Ave Apt 3A		Transaction ID : SA11AI-CN39351
City New York	State NY	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period -2600
Name of Employer Requested	Occupation Requested	Election Cycle-to-Date -2600
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
		Redesignated to General 2014 <b>[MEMO ITEM]</b> Redesignated

Full Name (Last, First, Middle Initial) <b>Mr. Michael Toporek</b>		Date of Receipt M - M / D - D / Y - Y - Y - Y 12 / 31 / 2013
Mailing Address 1172 Park Ave Apt 3A		Transaction ID : SA11AI-CN39352
City New York	State NY	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2600
Name of Employer Requested	Occupation Requested	Election Cycle-to-Date
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		
		Redesignated from Primary 2014 <b>[MEMO ITEM]</b> Redesignation

<b>SUBTOTAL</b> of Receipts This Page (optional).....	100.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022303

**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 237 OF 431
	<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. Michael Toporek</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 1172 Park Ave Apt 3A		Transaction ID : SA11AI-CN39280
City New York	State NY	
Zip Code 10128		Amount of Each Receipt this Period \$ 5200
FEC ID number of contributing federal political committee. C		
Name of Employer MJT Park Investors Inc.	Occupation Money Management	Election Cycle-to-Date \$ 5200
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>B. Mr. Roger F Topping</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 28 / 2013
Mailing Address PO Box 5311		Transaction ID : SA11AI-CN37872
City Princeton	State WV	
Zip Code 24740		Amount of Each Receipt this Period \$ 300
FEC ID number of contributing federal political committee. C		
Name of Employer Princeton Health Care Center	Occupation Administrator	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>C. Mr. Charles Trump</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 171 S Washington Street		Transaction ID : SA11AI-CN39056
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 Trump & Trump L.C.	Occupation Attorney	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).....	\$ 6500.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022304

**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 238 OF 431
	<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. Mary Lou Trump</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 29 / 2013	
Mailing Address 298 Grove Heights Rd		Transaction ID : SA11Ai-CN37934	
City Berkeley Springs	State WV	Zip Code 25411-5108	Amount of Each Receipt this Period \$ 35
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period	
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 \$ 285		

Full Name (Last, First, Middle Initial) <b>B. Ms. Mary Lou Trump</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 29 / 2013	
Mailing Address 298 Grove Heights Rd		Transaction ID : SA11Ai-CN37935	
City Berkeley Springs	State WV	Zip Code 25411-5108	Amount of Each Receipt this Period \$ 100
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period	
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 \$ 385		

Full Name (Last, First, Middle Initial) <b>C. Mr. Frank Tuckwiller</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 18 / 2013	
Mailing Address 2245 Blue Sulphur Pike		Transaction ID : SA11Ai-CN39026	
City Lewisburg	State WV	Zip Code 24901	Amount of Each Receipt this Period \$ 100
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period	
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		

SUBTOTAL of Receipts This Page (optional).....	\$ 235.00
TOTAL This Period (last page this line number only).....	\$

14020022305

**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 239 OF 431
	<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. Elisabeth Turner</b>		Date of Receipt M M / D D / Y - Y - Y - Y 11 / 13 / 2013
Mailing Address 133 E 80th St. 10-11A		Transaction ID : SA11Ai-CN38225
City New York	State NY	Zip Code 10075
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 2000
Name of Employer Not Employed	Occupation Not Employed	
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>B. Mr Ned Turner</b>		Date of Receipt M M / D D / Y - Y - Y - Y 10 / 22 / 2013
Mailing Address 117 Mobile Ct		Transaction ID : SA11Ai-CN37650
City Falling Waters	State WV	Zip Code 25419-4628
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 200
Name of Employer Enervest LTD	Occupation CFO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 540	

Full Name (Last, First, Middle Initial) <b>C. Mr Ned Turner</b>		Date of Receipt M M / D D / Y - Y - Y - Y 12 / 10 / 2013
Mailing Address 117 Mobile Ct		Transaction ID : SA11Ai-CN38687
City Falling Waters	State WV	Zip Code 25419-4628
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period \$ 300
Name of Employer Enervest LTD	Occupation CFO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 840	

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

14020022306

**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 240 OF 431
	<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. David M. Underwood**

Mailing Address 909 Fannin Suite 850

City	State	Zip Code
Houston	TX	77010

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

Name of Employer	Occupation
Wells Fargo	financial advisor

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 13 / 2013

Transaction ID : **SA11Ai-CN38212**

Amount of Each Receipt this Period  
 1000

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Herbert Underwood**

Mailing Address 600 Kemberly Dr

City	State	Zip Code
Bridgeport	WV	26330

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

Name of Employer	Occupation
Not Employed	Not Employed

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 11 / 15 / 2013

Transaction ID : **SA11Ai-CN38098**

Amount of Each Receipt this Period  
 500

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Michael Van Ness**

Mailing Address 2400 Brentwood Rd NW

City	State	Zip Code
Canton	OH	44708

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

Name of Employer	Occupation
GI Specialists Inc.	Physician

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 28 / 2013

Transaction ID : **SA11Ai-CN37822**

Amount of Each Receipt this Period  
 250

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

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

1750.00

14020022307



**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 241 OF 431
	<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. Dr. Michael Van Ness</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 06 / 2013
Mailing Address 2400 Brentwood Rd NW		Transaction ID : SA11Ai-CN38556
City Canton	State OH	Zip Code 44708
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer GI Specialists Inc.	Occupation Physician	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1750	

Full Name (Last, First, Middle Initial) <b>B. Mr. George Vance</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 11 / 2013
Mailing Address 112 Pinridge Drive		Transaction ID : SA11Ai-CN37367
City Beckley	State WV	Zip Code 25801
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer Saber Supply Co Inc.	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>C. Mr. Jim Vanderhider</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 29 / 2013
Mailing Address 1001 Fannin St Ste 800		Transaction ID : SA11Ai-CN37750
City Houston	State TX	Zip Code 77002
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
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 1000	

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

14020022308

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

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

FOR LINE NUMBER: PAGE 242 OF 431  
(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. 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 **550**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 21 2013

Transaction ID : **SA11Ai-CN37586**

Amount of Each Receipt this Period  
 100

**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 **950**

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 10 2013

Transaction ID : **SA11Ai-CN38673**

Amount of Each Receipt this Period  
 400

**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 **400**

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 06 2013

Transaction ID : **SA11Ai-CN38570**

Amount of Each Receipt this Period  
 200

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

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

700.00

14020022309

**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 243 OF 431
	<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. Amy Verschleiser</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address 944 5th Ave		Transaction ID : SA11Ai-CN38105
City New York	State NY	
Zip Code 10021		Amount of Each Receipt this Period \$ 2000
FEC ID number of contributing federal political committee. C		
Name of Employer Bear Stearns	Occupation Analyst	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>B. Mr. Joe F. Viar</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address 7827 Southdown Road		Transaction ID : SA11AI-CN37957
City Alexandria	State VA	
Zip Code 22308		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 250		

Full Name (Last, First, Middle Initial) <b>C. Ms. Mary Alice Vigneault</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 11 / 2013
Mailing Address 6 South Gate Rd		Transaction ID : SA11Ai-CN37356
City Charleston	State WV	
Zip Code 25314-2333		Amount of Each Receipt this Period \$ 100
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 200		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2350.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022310

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

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

FOR LINE NUMBER: PAGE 244 OF 431  
(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. Alexander N Vogel**

Mailing Address **1000 Mt Airy Rd**

City **Upperville** State **VA** Zip Code **20184**

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

Name of Employer **Mehlman Vogel Castagnetti** 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  
**12 / 06 / 2013**

Transaction ID : **SA11AI-CN38464**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Teri Volpert**

Mailing Address **48 East 92nd Street**

City **New York** State **NY** Zip Code **10128**

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  
**2000**

Date of Receipt  
M M / D D / Y Y Y Y  
**11 / 13 / 2013**

Transaction ID : **SA11AI-CN38223**

Amount of Each Receipt this Period  
**2000**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Martha N Wable**

Mailing Address **109 S. Chelsea St.**

City **Sistersville** State **WV** Zip Code **26175**

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

Name of Employer **Wable Ford Mercury Inc.** Occupation **Secretary**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**200**

Date of Receipt  
M M / D D / Y Y Y Y  
**10 / 11 / 2013**

Transaction ID : **SA11AI-CN37479**

Amount of Each Receipt this Period  
**100**

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

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

**3100.00**

1402002311

**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 245 OF 431
	<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>A. Mrs. Martha N Wable</b>			Date of Receipt M M / D D / Y - Y Y - Y 12 10 2013	
Mailing Address 109 S. Chelsea St.			Transaction ID : SA11AI-CN38768	
City Sistersville	State WV	Zip Code 26175	Amount of Each Receipt this Period 100	
FEC ID number of contributing federal political committee. <b>C</b>			Amount of Each Receipt this Period 300	
Name of Employer Wable Ford Mercury Inc.		Occupation Secretary	Election Cycle-to-Date 300	
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>B. Ms. Sarah Wade</b>			Date of Receipt M M / D D / Y - Y Y - Y 10 11 2013	
Mailing Address 340 Snowcrest Ln			Transaction ID : SA11AI-CN37366	
City Point Pleasant	State WV	Zip Code 25550	Amount of Each Receipt this Period 1000	
FEC ID number of contributing federal political committee. <b>C</b>			Amount of Each Receipt this Period 1500	
Name of Employer housewife		Occupation Housewife	Election Cycle-to-Date 1500	
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>C. Mr. Don A Wagenheim</b>			Date of Receipt M M / D D / Y - Y Y - Y 12 31 2013	
Mailing Address 35 Floral Drive			Transaction ID : SA11AI-CN39055	
City Wheeling	State WV	Zip Code 26003	Amount of Each Receipt this Period 500	
FEC ID number of contributing federal political committee. <b>C</b>			Amount of Each Receipt this Period 2000	
Name of Employer H.E. Neumann Company		Occupation President	Election Cycle-to-Date 2000	
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).....	1600.00
<b>TOTAL</b> This Period (last page this line number only).....	1600.00

14020022312

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

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

FOR LINE NUMBER: PAGE 246 OF 431  
(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. Cecil Walker**

Mailing Address 1617 Kirklee Rd

City Charleston State WV Zip Code 25314

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

Name of Employer Walker Machinery Occupation Vice President

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt: MM/DD/YYYY 12/23/2013  
**Transaction ID : SA11Ai-CN39151**

Amount of Each Receipt this Period **1600**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. John B Walker**

Mailing Address 7 Pine Grove Cir

City Houston State TX Zip Code 77024

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

Name of Employer EnerVest Occupation President

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt: MM/DD/YYYY 12/03/2013  
**Transaction ID : SA11Ai-CN38308**

Amount of Each Receipt this Period **1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Richard Walker**

Mailing Address P. O. Box 1026

City Hurricane State WV Zip Code 25526-3026

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

Name of Employer Cecil I. Walker Machinery Co. Occupation Chairman and CEO

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt: MM/DD/YYYY 12/23/2013  
**Transaction ID : SA11Ai-CN39138**

Amount of Each Receipt this Period **2000**

**SUBTOTAL** of Receipts This Page (optional)..... **4600.00**

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

1402002313

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

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

FOR LINE NUMBER: PAGE 247 OF 431  
(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. Steve Walker**

Mailing Address 1410 Connell Rd

City Charleston State WV Zip Code 25314-1924

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 12 / 10 / 2013  
Transaction ID : SA11AI-CN38692

Amount of Each Receipt this Period 600

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Philip D Wallace**

Mailing Address 1511 7th St

City Moundsville State WV Zip Code 26041

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 10 / 25 / 2013  
Transaction ID : SA11AI-CN37720

Amount of Each Receipt this Period 250

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Lisa Wallack**

Mailing Address 3 Idlewile Lane

City Weston State MA Zip Code 02493

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 11 / 06 / 2013  
Transaction ID : SA11AI-CN37993

Amount of Each Receipt this Period 1000

**SUBTOTAL** of Receipts This Page (optional)..... 1850.00

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

14020022314

**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 248 OF 431
	<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. Jeffrey M Walter</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 19 / 2013
Mailing Address 2001 Summit Terrace		Transaction ID : SA11Ai-CN38979
City State Zip Code Alexandria VA 22307	Amount of Each Receipt this Period 1000	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000
Name of Employer The Walter Group	Occupation Executive	
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>B. Mr. Alan S Ward</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address 17024 Cadbury Cir Unit 229		Transaction ID : SA11Ai-CN39009
City State Zip Code Lewes DE 19958-7051	Amount of Each Receipt this Period 100	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100
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>C. Mr. Jay D. Wardwell</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 14 / 2013
Mailing Address 121 Beechwood Dr.		Transaction ID : SA11Ai-CN38253
City State Zip Code Beaver WV 25813	Amount of Each Receipt this Period 2000	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000
Name of Employer Wardwell Construction	Occupation CEO	
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).....	3100.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022315



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 249 OF 431	
	(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. Jean M. Warren</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 21 / 2013
Mailing Address 2410 NW Grand Cir		Transaction ID : SA11AI-CN37551
City	State Zip Code	
Oklahoma City	OK 73116	Amount of Each Receipt this Period 800
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2500
Name of Employer	Occupation	
Retired	Retired	
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>B. Ms. Bridget Weaver</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 16 / 2013
Mailing Address 909 Vicar Lane		Transaction ID : SA11AI-CN38939
City	State Zip Code	
Alexandria	VA 22302	Amount of Each Receipt this Period 500
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500
Name of Employer	Occupation	
Retired	Retired	
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>C. Mr. Richard W. Weekley</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 06 / 2013
Mailing Address 1111 N Post Oak Road		Transaction ID : SA11AI-CN38004
City	State Zip Code	
Houston	TX 77055	Amount of Each Receipt this Period 1000
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000
Name of Employer	Occupation	
Weekley Properties	Chairman and CEO	
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).....	2300.00
<b>TOTAL</b> This Period (last page this line number only).....	

1402002316

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

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

FOR LINE NUMBER:		PAGE 250 OF 431	
(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>A. Mrs. Joan Weisberg</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 319 Woodland Dr		Transaction ID : SA11Ai-CN38924
City Huntington	State WV	Zip Code 25705
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500
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 1500	

Full Name (Last, First, Middle Initial) <b>B. Mr. Carl E Welch</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 11 / 2013
Mailing Address 1403 Bedford Rd		Transaction ID : SA11Ai-CN37445
City Charleston	State WV	Zip Code 25314
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100
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	

Full Name (Last, First, Middle Initial) <b>C. Ms. Fabene Welch</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 07 / 2013
Mailing Address 1001 Fannin Ste 800		Transaction ID : SA11Ai-CN37975
City Houston	State TX	Zip Code 77002
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000
Name of Employer EnerVest Ltd.	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).....	1600.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022317

**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 251 OF 431
	<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. Jay S Welker**

Mailing Address 123 Laurelwood Dr.

City	State	Zip Code
Danville	CA	94506

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

Name of Employer	Occupation
Wells Fargo	Wealth Management

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 29 2013

**Transaction ID : SA11AI-CN37944**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Katherine Wellford**

Mailing Address 1615 Ridgeview Rd

City	State	Zip Code
Charleston	WV	25314

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

Name of Employer	Occupation
Executive Office Centers LLC	Executive

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1100**

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 31 2013

**Transaction ID : SA11AI-CN39237**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Sally R Wells**

Mailing Address 210 High St

City	State	Zip Code
Fayetteville	WV	25840-1150

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

Name of Employer	Occupation
United Coal Company	Mining Engineer

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **600**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 21 2013

**Transaction ID : SA11AI-CN37578**

Amount of Each Receipt this Period  
**500**

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

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

**1600.00**

14020022318

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

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

FOR LINE NUMBER: PAGE 252 OF 431  
(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. Phyllis J West**

Mailing Address 125 Gulfshore Blvd N

City State Zip Code  
Naples FL 34102

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

Date of Receipt  
M M / D D / Y - Y Y Y Y  
12 06 2013

Transaction ID : SA11AI-CN38553

Amount of Each Receipt this Period  
1600

2600

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Scott West**

Mailing Address P.O Box 441587

City State Zip Code  
Houston TX 77244

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

Name of Employer Occupation  
PathfinderInc. Chairman and CEO

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y - Y Y Y Y  
11 13 2013

Transaction ID : SA11AI-CN38214

Amount of Each Receipt this Period  
250

500

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Donald Wetsch**

Mailing Address Route 2 Box 436

City State Zip Code  
Elkins WV 26241

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

Date of Receipt  
M M / D D / Y - Y Y Y Y  
10 11 2013

Transaction ID : SA11AI-CN37342

Amount of Each Receipt this Period  
50

250

**SUBTOTAL** of Receipts This Page (optional)..... 1900.00

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

14020022319

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

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

FOR LINE NUMBER: PAGE 253 OF 431  
(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. Donald Wetsch**

Mailing Address Route 2 Box 436

City State Zip Code  
Elkins WV 26241

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  
350

Date of Receipt  
12 / 23 / 2013

Transaction ID : SA11Ai-CN39166

Amount of Each Receipt this Period  
100

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

Mailing Address 51 Ambassador Cir

City State Zip Code  
Martinsburg WV 25401

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  
365

Date of Receipt  
10 / 22 / 2013

Transaction ID : SA11Ai-CN37647

Amount of Each Receipt this Period  
75

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Patrick Whitacre**

Mailing Address 51 Ambassador Cir

City State Zip Code  
Martinsburg WV 25401

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  
465

Date of Receipt  
12 / 09 / 2013

Transaction ID : SA11Ai-CN38645

Amount of Each Receipt this Period  
100

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

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

275.00

14020022320

**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 254 OF 431
	<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)  
**Mr. Byrd White**

Mailing Address 167 Table Rock Rd

City State Zip Code  
Beaver WV 25813

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

Name of Employer Occupation  
Asset Management Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
M M / D D / Y Y Y Y  
11 14 2013

Transaction ID : **SA11Ai-CN38242**

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Glenn I White**

Mailing Address 218 2nd Ave

City State Zip Code  
Logan WV 25601

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  
10 21 2013

Transaction ID : **SA11Ai-CN37545**

Amount of Each Receipt this Period  
100

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Glenn I White**

Mailing Address 218 2nd Ave

City State Zip Code  
Logan WV 25601

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  
300

Date of Receipt  
M M / D D / Y Y Y Y  
12 31 2013

Transaction ID : **SA11Ai-CN39197**

Amount of Each Receipt this Period  
100

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

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

1200.00

14020022321

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

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

FOR LINE NUMBER: PAGE 255 OF 431  
(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. John Jay White**

Mailing Address **PO Box 511**

City **Hamlin** State **WV** Zip Code **25523**

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

Name of Employer **Mahue Cont. Co.** Occupation **President**

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **750**

Date of Receipt  
M M / D D / Y Y Y Y  
**12 10 2013**

Transaction ID : **SA11AI-CN38714**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Robert D Whitler**

Mailing Address **5 Evergreen Dr**

City **Elkview** State **WV** Zip Code **25071**

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

Name of Employer **CAMC** Occupation **administrator**

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
M M / D D / Y Y Y Y  
**12 09 2013**

Transaction ID : **SA11AI-CN38614**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Ron Whitmire**

Mailing Address **302 24th St E**

City **Houston** State **TX** Zip Code **77008**

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

Name of Employer **EnerVest Ltd.** Occupation **Vice President & CAO**

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
M M / D D / Y Y Y Y  
**11 07 2013**

Transaction ID : **SA11AI-CN37973**

Amount of Each Receipt this Period  
**1000**

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

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

**2500.00**

14020022322

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

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

FOR LINE NUMBER: PAGE 256 OF 431  
(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. John Wick**

Mailing Address 300 Virginia Ave

City Richmond State VA Zip Code 23226

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

Name of Employer Dickinson Fuel Co. Inc. Occupation VP

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
10 28 2013

Transaction ID : SA11Ai-CN37811

Amount of Each Receipt this Period  
\$ 1000

\$ 1600

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Frank W Wilkinson**

Mailing Address 102 Callaway Cir

City Bluefield State VA Zip Code 24605

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

Name of Employer First Century Bank Occupation Executive

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
10 22 2013

Transaction ID : SA11Ai-CN37677

Amount of Each Receipt this Period  
\$ 500

\$ 500

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Molly A Wilkinson**

Mailing Address 1520 Mount Eagle Pl

City Alexandria State VA Zip Code 22302

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

Name of Employer Regions Financial Corp. Occupation Senior VP

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
12 31 2013

Transaction ID : SA11Ai-CN39234

Amount of Each Receipt this Period  
\$ 250

\$ 250

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

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

1402002323



**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 257 OF 431
	<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. Henry K Willard II</b>		Date of Receipt MM / DD / YYYY 10 / 22 / 2013
Mailing Address PO Box 3269		Transaction ID : SA11Ai-CN37703
City Shepherdstown	State WV	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2000
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 4000	

Full Name (Last, First, Middle Initial) <b>Mr. Henry K Willard II</b>		Date of Receipt MM / DD / YYYY 10 / 23 / 2013
Mailing Address PO Box 3269		Transaction ID : SA11Ai-CN38509
City Shepherdstown	State WV	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period -1400
Name of Employer Retired	Occupation Retired	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 2600	<b>[MEMO ITEM]</b> Redesignated

Full Name (Last, First, Middle Initial) <b>Mr. Henry K Willard II</b>		Date of Receipt MM / DD / YYYY 10 / 23 / 2013
Mailing Address PO Box 3269		Transaction ID : SA11Ai-CN38510
City Shepherdstown	State WV	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1400
Name of Employer Retired	Occupation Retired	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 4000	<b>[MEMO ITEM]</b> Redesignation

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

14020022524

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

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

FOR LINE NUMBER: PAGE 258 OF 431  
(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. Henry K Willard II**

Mailing Address **PO Box 3269**

City **Shepherdstown** State **WV** Zip Code **25443**

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  
**12 06 2013**

Transaction ID : **SA11Ai-CN38508**

Amount of Each Receipt this Period  
**1200**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Charles B Williams**

Mailing Address **105 Juliana St.**

City **Beckley** State **WV** Zip Code **25801**

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

Name of Employer **Self Employed** Occupation **Restaurant Owner**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
M M / D D / Y - Y - Y - Y  
**11 14 2013**

Transaction ID : **SA11Ai-CN38247**

Amount of Each Receipt this Period  
**300**

**C.** Full Name (Last, First, Middle Initial)  
**Dr. James S Wilson**

Mailing Address **426 8th St**

City **Glen Dale** State **WV** Zip Code **26038**

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  
**12 10 2013**

Transaction ID : **SA11Ai-CN38782**

Amount of Each Receipt this Period  
**250**

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

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

1402002325

**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 259 OF 431
	<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. Ralph M Wilson**

Mailing Address **6405 Keith Springs Cir**

City **Louisville** State **KY** Zip Code **40207**

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  
 M M / D D / Y - Y Y - Y Y  
**12 23 2013**

Transaction ID : **SA11AI-CN39099**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Michael Winter**

Mailing Address **406 Wynterhall Lane**

City **South Charleston** State **WV** Zip Code **25309**

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

Name of Employer **Bray & Oakley Insurance Agency** Occupation **Insurance/Banking**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y - Y Y - Y Y  
**12 23 2013**

Transaction ID : **SA11AI-CN39117**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Donnan Chancellor Wintermute**

Mailing Address **915 Vicar Ln**

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

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

Name of Employer **Coldwell Banker** Occupation **Real Estate Agent**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y - Y Y - Y Y  
**12 04 2013**

Transaction ID : **SA11AI-CN38349**

Amount of Each Receipt this Period  
**250**

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

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

**1250.00**

14020022326

**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 260 OF 431
	<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>A. Ms. Candida Wolff</b>		Date of Receipt M M / D D / Y - Y - Y - Y 12 23 2013	
Mailing Address 2105 Virginia Ave		<b>Transaction ID : SA11AI-CN39181</b>	
City State Zip Code Mc Lean VA 22101	Amount of Each Receipt this Period \$ 1500		
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 1500	
Name of Employer Citi	Occupation Executive Vice President		
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>B. Ms. Alison Wolfson</b>		Date of Receipt M M / D D / Y - Y - Y - Y 11 15 2013	
Mailing Address 1125 Park Ave		<b>Transaction ID : SA11AI-CN38104</b>	
City State Zip Code New York NY 10128	Amount of Each Receipt this Period \$ 2000		
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 2000	
Name of Employer Credit Asset Management	Occupation Managing Director		
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>C. Mr. Robert Worley</b>		Date of Receipt M M / D D / Y - Y - Y - Y 11 14 2013	
Mailing Address 2823 Grandview Road		<b>Transaction ID : SA11AI-CN38279</b>	
City State Zip Code Beaver WV 25813	Amount of Each Receipt this Period \$ 2600		
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period \$ 2600	
Name of Employer Baylor Mining Co.	Occupation Owner		
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).....	\$ 6100.00
<b>TOTAL</b> This Period (last page this line number only).....	\$

14020022327

**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 261 OF 431
	<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>A. Mrs. Fay Wright</b>		Date of Receipt M M / D D / Y Y Y Y 12 06 2013	
Mailing Address PO Box 357 87 Fieldstone		<b>Transaction ID : SA11AI-CN38547</b>	
City State Zip Code Bunker Hill WV 25413	Amount of Each Receipt this Period \$ 100		
FEC ID number of contributing federal political committee. C	Name of Employer Requested Occupation Requested 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 200		

Full Name (Last, First, Middle Initial) <b>B. Mr. Robert Wymer</b>		Date of Receipt M M / D D / Y Y Y Y 10 29 2013	
Mailing Address PO Box 334		<b>Transaction ID : SA11AI-CN37744</b>	
City State Zip Code Pratt WV 25162	Amount of Each Receipt this Period \$ 250		
FEC ID number of contributing federal political committee. C	Name of Employer Requested Occupation Requested Globe Meallurgical Inc. Corporate Manager-Facilities		
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. Robert Wymer</b>		Date of Receipt M M / D D / Y Y Y Y 12 09 2013	
Mailing Address PO Box 334		<b>Transaction ID : SA11AI-CN38643</b>	
City State Zip Code Pratt WV 25162	Amount of Each Receipt this Period \$ 100		
FEC ID number of contributing federal political committee. C	Name of Employer Requested Occupation Requested Globe Meallurgical Inc. Corporate Manager-Facilities		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	\$ 450.00
<b>TOTAL</b> This Period (last page this line number only) .....	\$

14020022328

**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 262 OF 431
	<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>A. Mr. Willard Wynne</b>			Date of Receipt M M / D D / Y Y Y Y 11 26 2013	
Mailing Address 473 Nancy Jack Road			Transaction ID : SA11Ai-CN38990	
City Gerrardstown	State WV	Zip Code 25420	Amount of Each Receipt this Period \$ 200	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period \$ 300	
Name of Employer retired		Occupation retired	Amount of Each Receipt this Period \$ 300	
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>B. Mrs. Jill Yablon</b>			Date of Receipt M M / D D / Y Y Y Y 11 13 2013	
Mailing Address 131 East 65th St.			Transaction ID : SA11AI-CN38226	
City New York	State NY	Zip Code 10065	Amount of Each Receipt this Period \$ 2000	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period \$ 2000	
Name of Employer Self Employed		Occupation Businesswoman	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 \$ 2000		

Full Name (Last, First, Middle Initial) <b>C. Ms. Barbara A Young</b>			Date of Receipt M M / D D / Y Y Y Y 12 10 2013	
Mailing Address 1125 Lyndale Drive			Transaction ID : SA11AI-CN38675	
City Charleston	State WV	Zip Code 25314	Amount of Each Receipt this Period \$ 300	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period \$ 950	
Name of Employer Valley Home Cleaning		Occupation Executive	Amount of Each Receipt this Period \$ 950	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date \$ 950		

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

14020022329

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

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

FOR LINE NUMBER: PAGE 263 OF 431  
(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>A. Ms. Lynne Zande</b>			Date of Receipt M M / D D / Y Y Y Y 12 16 2013	
Mailing Address 10530 Savannah Dr			<b>Transaction ID : SA11Ai-CN38658</b>	
City Vero Beach	State FL	Zip Code 32963	Amount of Each Receipt this Period \$ 5200	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period \$ 5200	
Name of Employer Housewife		Occupation Housewife	Election Cycle-to-Date \$ 5200	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			Election Cycle-to-Date \$ 5200	

Full Name (Last, First, Middle Initial) <b>B. Ms. Lynne Zande</b>			Date of Receipt M M / D D / Y Y Y Y 12 17 2013	
Mailing Address 10530 Savannah Dr			<b>Transaction ID : SA11Ai-CN39317</b>	
City Vero Beach	State FL	Zip Code 32963	Amount of Each Receipt this Period \$ -2600	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period \$ -2600	
Name of Employer Housewife		Occupation Housewife	Election Cycle-to-Date \$ 2600	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			Election Cycle-to-Date \$ 2600	
			Redesignated to General 2014 <b>[MEMO ITEM]</b> Redesignated	

Full Name (Last, First, Middle Initial) <b>C. Ms. Lynne Zande</b>			Date of Receipt M M / D D / Y Y Y Y 12 17 2013	
Mailing Address 10530 Savannah Dr			<b>Transaction ID : SA11Ai-CN39318</b>	
City Vero Beach	State FL	Zip Code 32963	Amount of Each Receipt this Period \$ 2600	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period \$ 2600	
Name of Employer Housewife		Occupation Housewife	Election Cycle-to-Date \$ 5200	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			Election Cycle-to-Date \$ 5200	
			Redesignated from Primary 2014 <b>[MEMO ITEM]</b> Redesignation	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	\$ 5200.00
<b>TOTAL</b> This Period (last page this line number only).....	\$ 5200.00

14020022330

**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 264 OF 431
	<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. Tony Zande**

Mailing Address 10530 Savannah Dr

City State Zip Code  
Vero Beach FL 32963

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  
\$ \$ 5200

Date of Receipt  
M M / D D / Y Y Y Y  
12 16 2013

**Transaction ID : SA11Ai-CN38657**

Amount of Each Receipt this Period  
\$ \$ \$ 2600

**B.** Full Name (Last, First, Middle Initial)  
**Mr. John Mitchell Zannoni**

Mailing Address 704 Bridgeport Dr

City State Zip Code  
Knoxville TN 37934

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

Name of Employer Occupation  
RPR Industries President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
\$ \$ \$ 1000

Date of Receipt  
M M / D D / Y Y Y Y  
12 09 2013

**Transaction ID : SA11Ai-CN38646**

Amount of Each Receipt this Period  
\$ \$ \$ 500

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Michael R Zanotti**

Mailing Address 281 Hedrick Ave

City State Zip Code  
Martinsburg WV 25405

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

Name of Employer Occupation  
US Dept Of Defense Senior Watch Officer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
\$ \$ \$ 200

Date of Receipt  
M M / D D / Y Y Y Y  
12 09 2013

**Transaction ID : SA11Ai-CN38640**

Amount of Each Receipt this Period  
\$ \$ \$ 100

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

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

\$ \$ \$ 3200.00

\$ \$ \$

14020022331



**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 265 OF 431
	<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. Rob Zimmer**

Mailing Address **3308 Cummings Ln**

City <b>Chevy Chase</b>	State <b>MD</b>	Zip Code <b>20815</b>
----------------------------	--------------------	--------------------------

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

Name of Employer <b>Self</b>	Occupation <b>Finance</b>
---------------------------------	------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
MM / DD / YYYY  
**12 / 06 / 2013**

Transaction ID : **SA11Ai-CN38585**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**VoteSane Pac**

Mailing Address **PO BOX 2713**

City <b>Alexandria</b>	State <b>VA</b>	Zip Code <b>22301</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C C00484535**

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**750**

Date of Receipt  
MM / DD / YYYY  
**12 / 06 / 2013**

Transaction ID : **SA11C-CN38587**

Amount of Each Receipt this Period  
**500**

Earmarked contribution-Rob Zimmer

**[MEMO ITEM]**  
Total earmarked through conduit. PAC limit not affected.

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Robert Lee Zimmerman**

Mailing Address **1415 Bath Ave  
Apt 302**

City <b>Ashland</b>	State <b>KY</b>	Zip Code <b>41101</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  
**200**

Date of Receipt  
MM / DD / YYYY  
**11 / 07 / 2013**

Transaction ID : **SA11Ai-CN38059**

Amount of Each Receipt this Period  
**100**

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

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

**600.00**

1402002332

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

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

FOR LINE NUMBER: PAGE 266 OF 431  
(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. John T Zitter**

Mailing Address 530 Foster Rd.

City                                  State                  Zip Code  
Huntington                                  WV                  25701

FEC ID number of contributing federal political committee.                  C

Name of Employer                                  Occupation  
Sterling Supply Co.                                  Owner

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y - Y Y  
11                  11                  2013

Transaction ID : SA11Ai-CN38117

Amount of Each Receipt this Period  
250

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Phillip Zsoldos**

Mailing Address 22 Dove Lane

City                                  State                  Zip Code  
Beckley                                  WV                  25801

FEC ID number of contributing federal political committee.                  C

Name of Employer                                  Occupation  
Beckley Oncology Associates                                  Healthcare Executive

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y - Y Y  
11                  14                  2013

Transaction ID : SA11Ai-CN38289

Amount of Each Receipt this Period  
250

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Phillip Zsoldos**

Mailing Address 22 Dove Lane

City                                  State                  Zip Code  
Beckley                                  WV                  25801

FEC ID number of contributing federal political committee.                  C

Name of Employer                                  Occupation  
Beckley Oncology Associates                                  Healthcare Executive

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y - Y Y  
11                  14                  2013

Transaction ID : SA11Ai-CN38291

Amount of Each Receipt this Period  
-125  
Reattributed to Marlana Zsoldos

**[MEMO ITEM]**  
Reattributed

**SUBTOTAL** of Receipts This Page (optional)..... 500.00

**TOTAL** This Period (last page this line number only)..... 562889.88

14020022333

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

**A.** Full Name (Last, First, Middle Initial)  
**21st Century Majority Fund**

Mailing Address 6065 Roswell Rd  
Apt 2274

City Atlanta State GA Zip Code 30328

FEC ID number of contributing federal political committee. **C** C00361956

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  
12 31 2013

Transaction ID : SA11C-CN39225

Amount of Each Receipt this Period  
\$ 5000

**B.** Full Name (Last, First, Middle Initial)  
**Aaron's Inc. PAC**

Mailing Address 1015 Cobb Place Blvd

City Kennesaw State GA Zip Code 30144

FEC ID number of contributing federal political committee. **C** C00459933

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  
12 12 2013

Transaction ID : SA11C-CN38837

Amount of Each Receipt this Period  
\$ 2600

**C.** Full Name (Last, First, Middle Initial)  
**Action Committee for Rural Electrification Pac**

Mailing Address 4301 Wilson Blvd

City Arlington State VA Zip Code 22203-1860

FEC ID number of contributing federal political committee. **C** C00002972

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  
12 09 2013

Transaction ID : SA11C-CN38610

Amount of Each Receipt this Period  
\$ 1000

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

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

\$ 8600.00

14020022334

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

**A.** Full Name (Last, First, Middle Initial)  
**AFSA Pac**

Mailing Address **919 18th St NW**

City **Washington** State **DC** Zip Code **20006**

FEC ID number of contributing federal political committee. **C C00038604**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2250**

Date of Receipt  
M M / D D / Y Y Y Y  
**12 / 20 / 2013**

Transaction ID : **SA11C-CN38904**

Amount of Each Receipt this Period  
**1250**

**B.** Full Name (Last, First, Middle Initial)  
**Airlines For America PAC**

Mailing Address **1301 Pennsylvania Ave NW  
Ste 1100**

City **Washington** State **DC** Zip Code **20004**

FEC ID number of contributing federal political committee. **C C00114694**

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  
**12 / 04 / 2013**

Transaction ID : **SA11C-CN38381**

Amount of Each Receipt this Period  
**1000**

**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  
**2500**

Date of Receipt  
M M / D D / Y Y Y Y  
**10 / 30 / 2013**

Transaction ID : **SA11C-CN37953**

Amount of Each Receipt this Period  
**1000**

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

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

**3250.00**

14020022335

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**A. American Assn Of Nurse Anesthetists CRNA PAC**

Mailing Address **25 Massachusetts Ave NW  
Ste 550**

City **Washington** State **DC** Zip Code **20001**

FEC ID number of contributing federal political committee. **C C00173153**

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  
12 / 20 / 2013

Transaction ID : **SA11C-CN38920**

Amount of Each Receipt this Period  
\$ 2500

Full Name (Last, First, Middle Initial)  
**B. American Cable Association PAC**

Mailing Address **One Parkway Center  
Suite 212**

City **Pittsburgh** State **PA** Zip Code **15220**

FEC ID number of contributing federal political committee. **C C00364109**

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  
12 / 09 / 2013

Transaction ID : **SA11C-CN38602**

Amount of Each Receipt this Period  
\$ 1000

Full Name (Last, First, Middle Initial)  
**C. American Chiropractic Assn PAC**

Mailing Address **1701 Clarendon Blvd**

City **Arlington** State **VA** Zip Code **22209**

FEC ID number of contributing federal political committee. **C C00102764**

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  
12 / 04 / 2013

Transaction ID : **SA11C-CN38370**

Amount of Each Receipt this Period  
\$ 1000

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

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

\$ 4500.00

14020022336

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

Full Name (Last, First, Middle Initial)  
**A. American Express Pac**

Mailing Address **801 Pennsylvania Ave NWSuite 650**

City State Zip Code  
**Washington DC 20004**

FEC ID number of contributing federal political committee. **C C00040535**

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  
**12 04 2013**  
 Transaction ID : **SA11C-CN38359**

Amount of Each Receipt this Period  
**1000**

Full Name (Last, First, Middle Initial)  
**B. American Hospital Assn. Pac**

Mailing Address **325 Seventh Street NW**

City State Zip Code  
**Washington DC 20004**

FEC ID number of contributing federal political committee. **C C00106146**

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  
**12 09 2013**  
 Transaction ID : **SA11C-CN38615**

Amount of Each Receipt this Period  
**3000**

Full Name (Last, First, Middle Initial)  
**C. American Podiatric Medical Assn. PAC**

Mailing Address **9312 Old Georgetown Rd**

City State Zip Code  
**Bethesda MD 20814**

FEC ID number of contributing federal political committee. **C C00008839**

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  
**12 09 2013**  
 Transaction ID : **SA11C-CN38616**

Amount of Each Receipt this Period  
**1000**

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

**5000.00**

14020022337

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

Use separate schedule(s)  
for each category of the  
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(check only one)  
 11a  11b  11c  11d  
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NAME OF COMMITTEE (in Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**American Waterways Operators PAC**

Mailing Address 801 N Quincy St  
Ste 200

City State Zip Code  
Arlington VA 22203

FEC ID number of contributing federal political committee. **C** C00034678

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  
12 03 2013

Transaction ID : SA11C-CN38307

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**Anadarko Petroleum Corp PAC**

Mailing Address 1201 Lake Robbins Drive

City State Zip Code  
The Woodlands TX 77380

FEC ID number of contributing federal political committee. **C** C00231951

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
M M / D D / Y Y Y Y  
12 04 2013

Transaction ID : SA11C-CN38364

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**Appraisal Institute PAC**

Mailing Address 2600 Virginia Ave NW Ste 123

City State Zip Code  
Washington DC 20037

FEC ID number of contributing federal political committee. **C** C00144261

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  
12 09 2013

Transaction ID : SA11C-CN38595

Amount of Each Receipt this Period  
1000

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

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

3000.00

14020022338

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

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

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

Full Name (Last, First, Middle Initial) <b>A. AZ PAC</b>		Date of Receipt M M / D D / Y Y Y Y 12 31 2013
Mailing Address 1800 Concord Pike PO Box 15438		Transaction ID : SA11C-CN39224
City State Zip Code Wilmington DE 19805	Amount of Each Receipt this Period 1500	
FEC ID number of contributing federal political committee. <b>C</b> C00279455		Amount of Each Receipt this Period 1500
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 1500	

Full Name (Last, First, Middle Initial) <b>B. Balch &amp; Bingham LLP PAC</b>		Date of Receipt M M / D D / Y Y Y Y 12 31 2013
Mailing Address 1710 Sixth Ave North		Transaction ID : SA11C-CN39276
City State Zip Code Birmingham AL 35203	Amount of Each Receipt this Period 2500	
FEC ID number of contributing federal political committee. <b>C</b> C00358440		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 5000	

Full Name (Last, First, Middle Initial) <b>C. Caterpillar Employees PAC</b>		Date of Receipt M M / D D / Y Y Y Y 12 23 2013
Mailing Address 100 Adams St NE		Transaction ID : SA11C-CN39182
City State Zip Code Peoria IL 61629	Amount of Each Receipt this Period 1000	
FEC ID number of contributing federal political committee. <b>C</b> C00148031		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 3500	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5000.00
<b>TOTAL</b> This Period (last page this line number only).....	5000.00

14020022339



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

Use separate schedule(s)  
for each category of the  
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(check only one)  
 11a  11b  11c  11d  
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A. Chevron Employees PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 6016  
 City San Ramon State CA Zip Code 94583  
 Date of Receipt M M / D D / Y Y Y Y 12 / 04 / 2013  
 Transaction ID : SA11C-CN38376  
 Amount of Each Receipt this Period 1000  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 2000

**B. CIT Group Inc PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1 CIT Dr  
 City Livingston State NJ Zip Code 07039  
 Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013  
 Transaction ID : SA11C-CN39229  
 Amount of Each Receipt this Period 1000  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 1000

**C. Citigroup Inc. Pac**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 153 53rd St E  
 City New York State NY Zip Code 10043  
 Date of Receipt M M / D D / Y Y Y Y 10 / 17 / 2013  
 Transaction ID : SA11C-CN37501  
 Amount of Each Receipt this Period 1000  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 2000

**SUBTOTAL** of Receipts This Page (optional)..... 3000.00  
**TOTAL** This Period (last page this line number only).....

14020022340

**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 274 OF 431
	<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**

Full Name (Last, First, Middle Initial) <b>A. Citigroup Inc. Pac</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 17 / 2013
Mailing Address 153 53rd St E		Transaction ID : SA11C-CN37502
City New York	State NY	Zip Code 10043
FEC ID number of contributing federal political committee. C C00008474		Amount of Each Receipt this Period \$ 4000
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 \$ 6000	

Full Name (Last, First, Middle Initial) <b>B. CMS Energy Corp Employees For Better Govt.</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address One Energy Plaza		Transaction ID : SA11C-CN38332
City Jackson	State MI	Zip Code 49201
FEC ID number of contributing federal political committee. C C00075473		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>C. Council of Insurance Agents Pac</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address 701 Pennsylvania Ave NW No.750		Transaction ID : SA11C-CN38608
City Washington	State DC	Zip Code 20004
FEC ID number of contributing federal political committee. C C00039578		Amount of Each Receipt this Period \$ 1000
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 \$ 7000	

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

14020022341

**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 275 OF 431
	<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**

Full Name (Last, First, Middle Initial) <b>Council of Insurance Agents Pac</b>			Date of Receipt M - M / D - D / Y - Y - Y - Y 12 / 20 / 2013
Mailing Address 701 Pennsylvania Ave NW No.750			Transaction ID : SA11C-CN38917
City Washington	State DC	Zip Code 20004	Amount of Each Receipt this Period \$ 2500
FEC ID number of contributing federal political committee. C C00039578		Amount of Each Receipt this Period \$ 2500	
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 \$ 9500		

Full Name (Last, First, Middle Initial) <b>Council of Insurance Agents Pac</b>			Date of Receipt M - M / D - D / Y - Y - Y - Y 12 / 23 / 2013
Mailing Address 701 Pennsylvania Ave NW No.750			Transaction ID : SA11C-CN39186
City Washington	State DC	Zip Code 20004	Amount of Each Receipt this Period \$ 1000
FEC ID number of contributing federal political committee. C C00039578		Amount of Each Receipt this Period \$ 1000	
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 \$ 10500		

Full Name (Last, First, Middle Initial) <b>Croplife America PAC</b>			Date of Receipt M - M / D - D / Y - Y - Y - Y 12 / 03 / 2013
Mailing Address 1156 15th St NW Ste 400			Transaction ID : SA11C-CN38322
City Washington	State DC	Zip Code 20005	Amount of Each Receipt this Period \$ 1000
FEC ID number of contributing federal political committee. C C00248849		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).....	\$ 4500.00
<b>TOTAL</b> This Period (last page this line number only).....	\$

14020022342

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

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

FOR LINE NUMBER: PAGE 276 OF 431  
(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)  
**CUNA Mutual PAC**

Mailing Address PO Box 747

City Madison State WI Zip Code 53701

FEC ID number of contributing federal political committee. **C** C00402107

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  
 12 09 2013

Transaction ID : SA11C-CN38609

Amount of Each Receipt this Period  
 1000

**B.** Full Name (Last, First, Middle Initial)  
**Denali Leadership PAC**

Mailing Address 2755 Iliamna

City Anchorage State AK Zip Code 99517

FEC ID number of contributing federal political committee. **C** C00438291

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  
 12 31 2013

Transaction ID : SA11C-CN39248

Amount of Each Receipt this Period  
 5000

**C.** Full Name (Last, First, Middle Initial)  
**Dow Chemical Co. Employees PAC**

Mailing Address 2030 Dow Center

City Midland State MI Zip Code 48674

FEC ID number of contributing federal political committee. **C** C00074096

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  
 12 09 2013

Transaction ID : SA11C-CN38606

Amount of Each Receipt this Period  
 1000

**SUBTOTAL** of Receipts This Page (optional)..... 7000.00

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

14020022343

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

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

FOR LINE NUMBER: PAGE 277 OF 431  
(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>DuPont Good Government Fund</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 04 / 2013
Mailing Address 1007 Market St		Transaction ID : SA11C-CN38390
City Wilmington	State DE	
FEC ID number of contributing federal political committee. C C00171926		Amount of Each Receipt this Period 1250
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 1250	

Full Name (Last, First, Middle Initial) <b>Emerson Electric Co Good Govt Fund</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address 8000 W Florissant Ave		Transaction ID : SA11C-CN38914
City St. Louis	State MO	
FEC ID number of contributing federal political committee. C C00080515		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 2000	

Full Name (Last, First, Middle Initial) <b>Employees of Northrop Grumman PAC</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 04 / 2013
Mailing Address 3699 Wilshire Blvd Ste 1290		Transaction ID : SA11C-CN38375
City Los Angeles	State CA	
FEC ID number of contributing federal political committee. C C00088591		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	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7250.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022344

**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 278 OF 431
	<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. Encore Capital Group PAC</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 06 / 2013
Mailing Address 3111 camino Del Rio N Ste 1300		<b>Transaction ID : SA11C-CN38466</b>
City State Zip Code San Diego CA 92108	Amount of Each Receipt this Period 1500	
FEC ID number of contributing federal political committee. <b>C C00507392</b>		Amount of Each Receipt this Period 1500
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 1500	

Full Name (Last, First, Middle Initial) <b>B. Equifax PAC</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address PO Box 4081		<b>Transaction ID : SA11C-CN38315</b>
City State Zip Code Atlanta GA 30302	Amount of Each Receipt this Period 1000	
FEC ID number of contributing federal political committee. <b>C C00143867</b>		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>C. Equifax PAC</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address PO Box 4081		<b>Transaction ID : SA11C-CN38841</b>
City State Zip Code Atlanta GA 30302	Amount of Each Receipt this Period 1000	
FEC ID number of contributing federal political committee. <b>C C00143867</b>		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).....	3500.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022345

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

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

FOR LINE NUMBER: PAGE 279 OF 431  
(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)  
**Ernst and Young PAC**

Mailing Address 1101 New York Ave. NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00227744

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt 12 / 04 / 2013  
Transaction ID : SA11C-CN38371

Amount of Each Receipt this Period 500

**B.** Full Name (Last, First, Middle Initial)  
**Ernst and Young PAC**

Mailing Address 1101 New York Ave. NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00227744

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 6500

Date of Receipt 12 / 04 / 2013  
Transaction ID : SA11C-CN38372

Amount of Each Receipt this Period 1500

**C.** Full Name (Last, First, Middle Initial)  
**Evans For House**

Mailing Address 502 Dunns Dr. BS

City Cameron State WV Zip Code 26033

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

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 100

Date of Receipt 12 / 20 / 2013  
Transaction ID : SA11C-CN38922

Amount of Each Receipt this Period 100

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

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

14020022346

**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 280 OF 431
	<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**

Full Name (Last, First, Middle Initial) <b>Exxon Mobil Corp PAC</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address 5959 Las Colinas Blvd		Transaction ID : SA11C-CN38331
City Irving	State TX	Zip Code 75039
FEC ID number of contributing federal political committee. C C00095406		Amount of Each Receipt this Period 1250
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 3250	

Full Name (Last, First, Middle Initial) <b>First Team PAC</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address PO Box 3166		Transaction ID : SA11C-CN38754
City Jupiter	State FL	Zip Code 33469
FEC ID number of contributing federal political committee. C C00479253		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>Fiscal Leadership &amp; Knowing Economics PAC</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address PO Box 13692		Transaction ID : SA11C-CN38845
City Tempe	State AZ	Zip Code 85284
FEC ID number of contributing federal political committee. C C00432930		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	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4750.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022347



**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 281 OF 431
	<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. Fraternity & Sorority PAC**

Full Name (Last, First, Middle Initial)  
Fraternity & Sorority PAC

Mailing Address PO Box 3435

City: Alexandria State: VA Zip Code: 22302

FEC ID number of contributing federal political committee: **C** C00410068

Name of Employer: Occupation:

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date: 5000

Date of Receipt  
MM / DD / YYYY  
10 / 30 / 2013

Transaction ID : SA11C-CN37956

Amount of Each Receipt this Period  
5000

**B. Freedom Fund**

Full Name (Last, First, Middle Initial)  
Freedom Fund

Mailing Address 701 8th St NW #500

City: Washington State: DC Zip Code: 20001

FEC ID number of contributing federal political committee: **C** C00390674

Name of Employer: Occupation:

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date: 5000

Date of Receipt  
MM / DD / YYYY  
12 / 03 / 2013

Transaction ID : SA11C-CN38311

Amount of Each Receipt this Period  
2500

**C. Friends Of 340B PAC**

Full Name (Last, First, Middle Initial)  
Friends Of 340B PAC

Mailing Address 2716 Franklin Court

City: Alexandria State: VA Zip Code: 22302

FEC ID number of contributing federal political committee: **C** C00547844

Name of Employer: Occupation:

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date: 1500

Date of Receipt  
MM / DD / YYYY  
12 / 20 / 2013

Transaction ID : SA11C-CN38921

Amount of Each Receipt this Period  
1500

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

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

9000.00

14020022348

**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 282 OF 431
	<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**

Full Name (Last, First, Middle Initial) <b>FROG JUMP PAC</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 08 / 2013
Mailing Address <b>PO Box 651374</b>		Transaction ID : <b>SA11C-CN37336</b>
City <b>Potomac Falls</b>	State <b>VA</b>	Zip Code <b>20165</b>
FEC ID number of contributing federal political committee. <b>C C00504365</b>		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>Fund For America's Future</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address <b>PO Box 1373</b>		Transaction ID : <b>SA11C-CN39196</b>
City <b>Columbia</b>	State <b>SC</b>	Zip Code <b>29202</b>
FEC ID number of contributing federal political committee. <b>C C00388934</b>		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>Gibson Dunn &amp; Crutcher LLP Pac</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address <b>333 S Grand Ave</b> <b>44th Floor</b>		Transaction ID : <b>SA11C-CN38913</b>
City <b>Los Angeles</b>	State <b>CA</b>	Zip Code <b>90071</b>
FEC ID number of contributing federal political committee. <b>C C00344754</b>		Amount of Each Receipt this Period 1250
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 1250	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5750.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022349

**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 283 OF 431
	<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**

Full Name (Last, First, Middle Initial) <b>GM PAC</b>		Date of Receipt MM / DD / YYYY 12 / 05 / 2013
A. Mailing Address 25 Massachusetts Ave NW Suite 450		Transaction ID : SA11C-CN38395
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C C00076810		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>Goldman Sachs Group Inc. Pac</b>		Date of Receipt MM / DD / YYYY 11 / 11 / 2013
B. Mailing Address 101 Constitution Ave NW Ste.1000 E		Transaction ID : SA11C-CN38112
City Washington	State DC	Zip Code 20001
FEC ID number of contributing federal political committee. C C00350744		Amount of Each Receipt this Period 1000
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 8500	

Full Name (Last, First, Middle Initial) <b>Hardwood Federation Pac</b>		Date of Receipt MM / DD / YYYY 11 / 08 / 2013
C. Mailing Address 6830 Raleigh-LaGrange Rd		Transaction ID : SA11C-CN38082
City Memphis	State TN	Zip Code 38134
FEC ID number of contributing federal political committee. C C00396671		Amount of Each Receipt this Period 3000
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 3000	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	9000.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022350

**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 284 OF 431
	<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**

Full Name (Last, First, Middle Initial) <b>Hartford Advocates Fund</b>		Date of Receipt MM / DD / YYYY 12 / 03 / 2013
Mailing Address 690 Asylum Ave		Transaction ID : SA11C-CN38325
City Hartford	State CT	Zip Code 06115
FEC ID number of contributing federal political committee. <b>C C00168864</b>		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 2000	

Full Name (Last, First, Middle Initial) <b>HCA Good Gov. Fund</b>		Date of Receipt MM / DD / YYYY 12 / 09 / 2013
Mailing Address One Park Plaza PO Box 550		Transaction ID : SA11C-CN38607
City Nashville	State TN	Zip Code 37202-0550
FEC ID number of contributing federal political committee. <b>C C00067231</b>		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>Health Net Inc. Pac</b>		Date of Receipt MM / DD / YYYY 12 / 20 / 2013
Mailing Address 455 Capitol Mall Suite 600		Transaction ID : SA11C-CN38912
City Sacramento	State CA	Zip Code 95814
FEC ID number of contributing federal political committee. <b>C C00230789</b>		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).....	3000.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022351

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

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

FOR LINE NUMBER: PAGE 285 OF 431  
(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. Heller Highwater PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 370672  
 City State Zip Code  
 Las Vegas NV 89137  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 12 23 2013  
 Transaction ID : SA11C-CN39187  
 Amount of Each Receipt this Period  
 10000  
 FEC ID number of contributing federal political committee. **C** C00471607  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 10000

**B. Husch Blackwell PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4801 Main Ste 1000  
 City State Zip Code  
 Kansas City MO 64112  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 12 03 2013  
 Transaction ID : SA11C-CN38326  
 Amount of Each Receipt this Period  
 1000  
 FEC ID number of contributing federal political committee. **C** C00424382  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 1000

**C. Ice Miller PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address One American Square Ste 2900  
 City State Zip Code  
 Indianapolis IN 46282  
 Date of Receipt  
 M M / D D / Y Y Y Y  
 12 04 2013  
 Transaction ID : SA11C-CN38362  
 Amount of Each Receipt this Period  
 2000  
 FEC ID number of contributing federal political committee. **C** C00520973  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date  
 2000

**SUBTOTAL** of Receipts This Page (optional)..... 13000.00  
**TOTAL** This Period (last page this line number only).....

1402002352

**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 286 OF 431
	<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**

Full Name (Last, First, Middle Initial) <b>A. Independent Community Bankers</b>		Date of Receipt M M / D D / Y Y - Y Y 12 04 2013
Mailing Address 1615 L St NW Ste 900		Transaction ID : SA11C-CN38377
City Washington	State DC	
Zip Code 20036		Amount of Each Receipt this Period \$ 1250
FEC ID number of contributing federal political committee. C C00032698		
Name of Employer	Occupation	Election Cycle-to-Date \$ 7250
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>B. Independent Community Bankers</b>		Date of Receipt M M / D D / Y Y - Y Y 12 20 2013
Mailing Address 1615 L St NW Ste 900		Transaction ID : SA11C-CN38905
City Washington	State DC	
Zip Code 20036		Amount of Each Receipt this Period \$ 2750
FEC ID number of contributing federal political committee. C C00032698		
Name of Employer	Occupation	Election Cycle-to-Date \$ 10000
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>C. ING US PAC</b>		Date of Receipt M M / D D / Y Y - Y Y 12 31 2013
Mailing Address One Orange WayC1N		Transaction ID : SA11C-CN39227
City Windsor	State CT	
Zip Code 06095		Amount of Each Receipt this Period \$ 1000
FEC ID number of contributing federal political committee. C C00184028		
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).....	\$ 5000.00
<b>TOTAL</b> This Period (last page this line number only).....	\$

14020022353

**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 287 OF 431
	<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**

Full Name (Last, First, Middle Initial) <b>Ingram Barge Co PAC</b>		Date of Receipt M M / D D / Y Y Y Y 10 30 2013
Mailing Address 4400 Harding Rd		Transaction ID : SA11C-CN37960
City State Zip Code Nashville TN 37205	Amount of Each Receipt this Period \$ 500	
FEC ID number of contributing federal political committee. <b>C</b> C00364471		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	

Full Name (Last, First, Middle Initial) <b>Institute Of Makers Of Explosive PAC</b>		Date of Receipt M M / D D / Y Y Y Y 12 04 2013
Mailing Address 1120 19th St NW Ste 310		Transaction ID : SA11C-CN38360
City State Zip Code Washington DC 20036	Amount of Each Receipt this Period \$ 1000	
FEC ID number of contributing federal political committee. <b>C</b> C00135590		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>Insured Retirement Institute Inc. PAC</b>		Date of Receipt M M / D D / Y Y Y Y 12 20 2013
Mailing Address 1101 New York Ave NW Ste 825		Transaction ID : SA11C-CN38915
City State Zip Code Washington DC 20005	Amount of Each Receipt this Period \$ 5000	
FEC ID number of contributing federal political committee. <b>C</b> C00490474		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	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	\$ 6500.00
<b>TOTAL</b> This Period (last page this line number only).....	\$

14020022354

**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 288 OF 431
	<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**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>International Foodservice Distributors Assn PAC</b>		Date of Receipt MM/DD/YYYY 12/03/2013
Mailing Address 1410 Spring Hill Rd Ste 210 City State Zip Code Mc Lean VA 22102		Transaction ID : SA11C-CN38335
FEC ID number of contributing federal political committee. <b>C C00383521</b>		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	

<b>B.</b> Full Name (Last, First, Middle Initial) <b>Intl Bank Of Commerce PAC</b>		Date of Receipt MM/DD/YYYY 12/12/2013
Mailing Address 1200 San Bernardo City State Zip Code Laredo TX 78040		Transaction ID : SA11C-CN38882
FEC ID number of contributing federal political committee. <b>C C00276592</b>		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	

<b>C.</b> Full Name (Last, First, Middle Initial) <b>IPHFHA Inc. PAC</b>		Date of Receipt MM/DD/YYYY 12/04/2013
Mailing Address 7829 East Rockhill Suite 201 City State Zip Code Wichita KS 67206		Transaction ID : SA11C-CN38357
FEC ID number of contributing federal political committee. <b>C C00251447</b>		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).....	6000.00
<b>TOTAL</b> This Period (last page this line number only).....	

1402002355



**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 289 OF 431
	<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>IPHFHA Inc. PAC</b>		Date of Receipt M M / D D / Y Y Y Y 12 04 2013	
Mailing Address 7829 East Rockhill Suite 201		<b>Transaction ID : SA11C-CN38361</b>	
City Wichita State KS Zip Code 67206	Amount of Each Receipt this Period \$ 1000		
FEC ID number of contributing federal political committee. <b>C C00251447</b>		Amount of Each Receipt this Period \$ 1000	
Name of Employer	Occupation	Amount of Each Receipt this Period \$ 1000	
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>KBR Inc. PAC</b>		Date of Receipt M M / D D / Y Y Y Y 11 13 2013	
Mailing Address 601 Jefferson Street KT3746C		<b>Transaction ID : SA11C-CN38218</b>	
City Houston State TX Zip Code 77002	Amount of Each Receipt this Period \$ 1000		
FEC ID number of contributing federal political committee. <b>C C00431114</b>		Amount of Each Receipt this Period \$ 1000	
Name of Employer	Occupation	Amount of Each Receipt this Period \$ 1000	
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>Kirby PAC</b>		Date of Receipt M M / D D / Y Y Y Y 12 12 2013	
Mailing Address 55 Waugh Dr Suite 1000		<b>Transaction ID : SA11C-CN38847</b>	
City Houston State TX Zip Code 77007	Amount of Each Receipt this Period \$ 3000		
FEC ID number of contributing federal political committee. <b>C C00250027</b>		Amount of Each Receipt this Period \$ 3000	
Name of Employer	Occupation	Amount of Each Receipt this Period \$ 3000	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date \$ 3000	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	\$ 5000.00
<b>TOTAL</b> This Period (last page this line number only).....	\$

14020022356

**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 290 OF 431
	<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**

Full Name (Last, First, Middle Initial) <b>A. Kroger PAC</b>		Date of Receipt M M / D D / Y Y Y Y 12 04 2013
Mailing Address 1014 Vine St		Transaction ID : SA11C-CN38365
City State Zip Code Cincinnati OH 45202	Amount of Each Receipt this Period 1000	
FEC ID number of contributing federal political committee. C C00059238	Amount of Each Receipt this Period 1000	
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)	Election Cycle-to-Date 1000	

Full Name (Last, First, Middle Initial) <b>B. Lifepoint Hospital Inc Good Govt Fund</b>		Date of Receipt M M / D D / Y Y Y Y 12 09 2013
Mailing Address 103 Powell Ct Ste 200		Transaction ID : SA11C-CN38589
City State Zip Code Brentwood TN 37027	Amount of Each Receipt this Period 500	
FEC ID number of contributing federal political committee. C C00347955	Amount of Each Receipt this Period 500	
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)	Election Cycle-to-Date 500	

Full Name (Last, First, Middle Initial) <b>C. Loews PAC</b>		Date of Receipt M M / D D / Y Y Y Y 12 23 2013
Mailing Address 655 Madison Avenue		Transaction ID : SA11C-CN39188
City State Zip Code New York NY 10065	Amount of Each Receipt this Period 1000	
FEC ID number of contributing federal political committee. C C00416495	Amount of Each Receipt this Period 1000	
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)	Election Cycle-to-Date 1000	

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

14020022357

**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 291 OF 431
	<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**

Full Name (Last, First, Middle Initial) <b>LPL Financial Corporation PAC</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address One Beacon Street 22nd Floor		Transaction ID : SA11C-CN38923
City Boston	State MA	Zip Code 02108
FEC ID number of contributing federal political committee. <b>C</b> C00486217		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>Marathon Oil Co. Employees PAC</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address 539 Main St S		Transaction ID : SA11C-CN37962
City Findlay	State OH	Zip Code 45840
FEC ID number of contributing federal political committee. <b>C</b> C00040568		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	6000

Full Name (Last, First, Middle Initial) <b>Marathon Oil Co. Employees PAC</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address 539 Main St S		Transaction ID : SA11C-CN37965
City Findlay	State OH	Zip Code 45840
FEC ID number of contributing federal political committee. <b>C</b> C00040568		Amount of Each Receipt this Period -1000
Name of Employer	Occupation	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	5000

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

14020022358

**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 292 OF 431
	<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**

Full Name (Last, First, Middle Initial) <b>A. Marathon Oil Co. Employees PAC</b>		Date of Receipt M M / D D / Y Y Y Y 10 30 2013
Mailing Address 539 Main St S		Transaction ID : SA11C-CN37966
City State Zip Code Findlay OH 45840	Amount of Each Receipt this Period 1000	
FEC ID number of contributing federal political committee. <b>C</b> C00040568		Redesignated from Primary 2014 <b>[MEMO ITEM]</b> Redesignation
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 6000	

Full Name (Last, First, Middle Initial) <b>B. McGraw Hill Financial Inc PAC</b>		Date of Receipt M M / D D / Y Y Y Y 12 09 2013
Mailing Address 1221 Ave of the Americas 48th Floor		Transaction ID : SA11C-CN38590
City State Zip Code New York NY 10020	Amount of Each Receipt this Period 2500	
FEC ID number of contributing federal political committee. <b>C</b> C00494682		
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. Meadwestvaco Pac</b>		Date of Receipt M M / D D / Y Y Y Y 12 03 2013
Mailing Address 501 S 5th St		Transaction ID : SA11C-CN38337
City State Zip Code Richmond VA 23219	Amount of Each Receipt this Period 1000	
FEC ID number of contributing federal political committee. <b>C</b> C00065987		
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	

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

14020022359

**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 293 OF 431
	<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**

Full Name (Last, First, Middle Initial) <b>Metlife Inc. Employees PAC</b>		Date of Receipt M M / D D / Y Y Y Y 12 16 2013	
Mailing Address 1095 Avenue of the Americas		<b>Transaction ID : SA11C-CN38850</b>	
City State Zip Code New York NY 10036	Amount of Each Receipt this Period 1000		
FEC ID number of contributing federal political committee. <b>C C00040923</b>	Name of Employer Occupation Election Cycle-to-Date 2000		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>Morgan Stanley PAC</b>		Date of Receipt M M / D D / Y Y Y Y 12 31 2013	
Mailing Address 1585 Broadway 39th Floor		<b>Transaction ID : SA11C-CN39226</b>	
City State Zip Code New York NY 10036	Amount of Each Receipt this Period 1500		
FEC ID number of contributing federal political committee. <b>C C00337626</b>	Name of Employer Occupation Election Cycle-to-Date 4000		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>NAMA PAC</b>		Date of Receipt M M / D D / Y Y Y Y 12 31 2013	
Mailing Address 20 Wacker Drive Ste 3500		<b>Transaction ID : SA11C-CN39287</b>	
City State Zip Code Chicago IL 60606	Amount of Each Receipt this Period 1000		
FEC ID number of contributing federal political committee. <b>C C00235762</b>	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) .....	3500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

14020022360

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

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

FOR LINE NUMBER: PAGE 294 OF 431  
(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. National Roofing Contractors Assn PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10255 West Higgins Road No 600  
 City Rosemont State IL Zip Code 60018  
 Date of Receipt 12 / 09 / 2013  
 Transaction ID : SA11C-CN38613  
 Amount of Each Receipt this Period 1000  
 FEC ID number of contributing federal political committee. C C00244863  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 3000

**B. Nebraska Sandhills PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 228 S Washington St Ste 115  
 City Alexandria State VA Zip Code 22314  
 Date of Receipt 12 / 04 / 2013  
 Transaction ID : SA11C-CN38388  
 Amount of Each Receipt this Period 1000  
 FEC ID number of contributing federal political committee. C C00540054  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 1000

**C. NemPac**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 619911  
 City Dallas State TX Zip Code 75261  
 Date of Receipt 12 / 09 / 2013  
 Transaction ID : SA11C-CN38612  
 Amount of Each Receipt this Period 2500  
 FEC ID number of contributing federal political committee. C C00140061  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date 8500

**SUBTOTAL** of Receipts This Page (optional)..... 4500.00  
**TOTAL** This Period (last page this line number only).....

14020022361

**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 295 OF 431			
	<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) <b>New Republican Majority Fund</b>		Date of Receipt M M / D D / Y Y Y Y 12 13 2013
Mailing Address 530201 Union St Suite 530 N		Transaction ID : SA11C-CN38755
City Alexandria	State Zip Code VA 22314	
FEC ID number of contributing federal political committee. <b>C</b> C00219220		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>New York Life Insurance Co Pac</b>		Date of Receipt M M / D D / Y Y Y Y 12 31 2013
Mailing Address 51 Madison Ave		Transaction ID : SA11C-CN39230
City New York	State Zip Code NY 10010	
FEC ID number of contributing federal political committee. <b>C</b> C00158881		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 \$ 3500	

Full Name (Last, First, Middle Initial) <b>Northwestern Mutual Life Insurance PAC</b>		Date of Receipt M M / D D / Y Y Y Y 10 30 2013
Mailing Address 720 Wisconsin Ave E		Transaction ID : SA11C-CN37958
City Milwaukee	State Zip Code WI 53202	
FEC ID number of contributing federal political committee. <b>C</b> C00197095		Amount of Each Receipt this Period \$ 500
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 \$ 4500	

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

14020022562

**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 296 OF 431
	<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**

Full Name (Last, First, Middle Initial) <b>Northwestern Mutual Life Insurance PAC</b>		Date of Receipt M M / D D / Y Y Y Y 10 30 2013
Mailing Address 720 Wisconsin Ave E		Transaction ID : SA11C-CN37959
City Milwaukee	State WI	Zip Code 53202
FEC ID number of contributing federal political committee. <b>C</b> C00197095		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 5500	

Full Name (Last, First, Middle Initial) <b>OPHTH PAC</b>		Date of Receipt M M / D D / Y Y Y Y 12 16 2013
Mailing Address 655 Beach St Box 7424		Transaction ID : SA11C-CN38858
City San Francisco	State CA	Zip Code 94120-7424
FEC ID number of contributing federal political committee. <b>C</b> C00196246		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>Oppenheimer Funds PAC</b>		Date of Receipt M M / D D / Y Y Y Y 12 31 2013
Mailing Address 498 7th Ave 10th Floor		Transaction ID : SA11C-CN39255
City New York	State NY	Zip Code 10018
FEC ID number of contributing federal political committee. <b>C</b> C00367920		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).....	4500.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022363



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

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

FOR LINE NUMBER: PAGE 297 OF 431  
(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. Phillipsby Winthrop Shaw Pittman LLP PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 7880  
 City San Francisco State CA Zip Code 94120  
 FEC ID number of contributing federal political committee. **C** C00177972  
 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  
 10 17 2013  
 Transaction ID : SA11C-CN37506  
 Amount of Each Receipt this Period  
 1000

**B. Physical Therapy PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1111 North Fairfax Street  
 City Alexandria State VA Zip Code 22314  
 FEC ID number of contributing federal political committee. **C** C00012880  
 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  
 12 31 2013  
 Transaction ID : SA11C-CN39228  
 Amount of Each Receipt this Period  
 2500

**C. Pinnacle West PAC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 400 N 5th St.  
 City Phoenix State AZ Zip Code 85004  
 FEC ID number of contributing federal political committee. **C** C00015933  
 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  
 12 20 2013  
 Transaction ID : SA11C-CN38907  
 Amount of Each Receipt this Period  
 1000

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

4500.00

14020022364

**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 298 OF 431
	<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**

Full Name (Last, First, Middle Initial) <b>Portland Cement Assn Inc. PAC</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 04 / 2013
Mailing Address <b>500 New Jersey Ave NW</b> <b>7th Floor</b>		Transaction ID : <b>SA11C-CN38383</b>
City State Zip Code Washington DC 20001	Amount of Each Receipt this Period 1000	
FEC ID number of contributing federal political committee. C C00237065	Name of Employer Occupation	Amount of Each Receipt this Period 1000
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>Responsibility &amp; Freedom Work PAC</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address <b>PO Box 1281</b>		Transaction ID : <b>SA11C-CN39289</b>
City State Zip Code Tupelo MS 38802	Amount of Each Receipt this Period 5000	
FEC ID number of contributing federal political committee. C C00368696	Name of Employer Occupation	Amount of Each Receipt this Period 5000
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>S. C. Johnson &amp; Son Inc. PAC</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 04 / 2013
Mailing Address <b>1667 K Street NW</b> <b>Suite 650</b>		Transaction ID : <b>SA11C-CN38363</b>
City State Zip Code Washington DC 20006	Amount of Each Receipt this Period 1000	
FEC ID number of contributing federal political committee. C C00342246	Name of Employer Occupation	Amount of Each Receipt this Period 1000
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) .....	7000.00
<b>TOTAL</b> This Period (last page this line number only) .....	\$ .....

14020022365

**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 299 OF 431
	<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**

Full Name (Last, First, Middle Initial) <b>Safeway PAC</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 17 / 2013
Mailing Address 5918 Stoneridge Mall Road		Transaction ID : SA11C-CN37507
City Pleasanton	State CA	Zip Code 94588
FEC ID number of contributing federal political committee. <b>C</b> C00194084		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>Southern Company Employee PAC</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address 241 Ralph McGill Boulevard NE		Transaction ID : SA11C-CN38840
City Atlanta	State GA	Zip Code 30308
FEC ID number of contributing federal political committee. <b>C</b> C00144774		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 2000	

Full Name (Last, First, Middle Initial) <b>Suntrust Bank Good Government Group</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 18 / 2013
Mailing Address Ms. Benda Skidmore PO Box 26665		Transaction ID : SA11C-CN38276
City Richmond	State VA	Zip Code 23261
FEC ID number of contributing federal political committee. <b>C</b> C00214965		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 4000	

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

14020022366

**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 300 OF 431
	<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) <b>A. Suntrust Bank Good Government Group</b>		Date of Receipt M M / D D / Y Y Y Y 12 20 2013
Mailing Address Ms. Benda Skidmore PO Box 26665 City Richmond State VA Zip Code 23261		Transaction ID : SA11C-CN38906
FEC ID number of contributing federal political committee. <b>C</b> C00214965		Amount of Each Receipt this Period 1000
Name of Employer Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Election Cycle-to-Date 5000	

Full Name (Last, First, Middle Initial) <b>B. Taco PAC</b>		Date of Receipt M M / D D / Y Y Y Y 12 03 2013
Mailing Address 6405 Metcalf Ave Ste 503 City Shawnee Mission State KS Zip Code 66202		Transaction ID : SA11C-CN38336
FEC ID number of contributing federal political committee. <b>C</b> C00330118		Amount of Each Receipt this Period 1000
Name of Employer Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Election Cycle-to-Date 1000	

Full Name (Last, First, Middle Initial) <b>C. Tenaska Employees PAC</b>		Date of Receipt M M / D D / Y Y Y Y 12 04 2013
Mailing Address 1044 N 115th St Ste 400 City Omaha State NE Zip Code 68154		Transaction ID : SA11C-CN38387
FEC ID number of contributing federal political committee. <b>C</b> C00479998		Amount of Each Receipt this Period 1000
Name of Employer Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation 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).....	

14020022367

**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 301 OF 431
	<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**

Full Name (Last, First, Middle Initial) <b>A. The Brink's Company PAC</b>		Date of Receipt MM / DD / YYYY 12 / 31 / 2013
Mailing Address 1801 Bayberry Court Ste 400		Transaction ID : SA11C-CN39191
City Richmond	State VA	
Zip Code 23226	FEC ID number of contributing federal political committee. <b>C</b> C00207472	Amount of Each Receipt this Period 2000
Name of Employer	Occupation	Election Cycle-to-Date 2000
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. The Charles Schwab Corporation PAC</b>		Date of Receipt MM / DD / YYYY 12 / 31 / 2013
Mailing Address 211 Main Street		Transaction ID : SA11C-CN39232
City San Francisco	State CA	
Zip Code 94105	FEC ID number of contributing federal political committee. <b>C</b> C00370114	Amount of Each Receipt this Period 1500
Name of Employer	Occupation	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>C. The Chubb Corporation PAC</b>		Date of Receipt MM / DD / YYYY 12 / 31 / 2013
Mailing Address 15 Mountain View Rd		Transaction ID : SA11C-CN39233
City Plainfield	State NJ	
Zip Code 07061	FEC ID number of contributing federal political committee. <b>C</b> C00229203	Amount of Each Receipt this Period 1000
Name of Employer	Occupation	Election Cycle-to-Date 2000
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).....	4500.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022368

**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 302 OF 431
	<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**

Full Name (Last, First, Middle Initial) <b>A. The Hawkeye PAC</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address PO Box 192		Transaction ID : SA11C-CN38846
City Des Moines	State IA	Zip Code 50301
FEC ID number of contributing federal political committee. C C00379479		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>B. The Wendy's Company PAC</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address One Dave Thomas Blvd		Transaction ID : SA11C-CN39288
City Dublin	State OH	Zip Code 43017
FEC ID number of contributing federal political committee. C C00369090		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>C. TIAA-CREF PAC</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 23 / 2013
Mailing Address 1101 Pennsylvania Ave NW Suite 800		Transaction ID : SA11C-CN39189
City Washington	State DC	Zip Code 20004
FEC ID number of contributing federal political committee. C C00431361		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 3500	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7000.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022369

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

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

FOR LINE NUMBER: PAGE 303 OF 431  
(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**

Full Name (Last, First, Middle Initial) <b>A. Tim Griffin For Congress Committee</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address PO Box 7526		Transaction ID : SA11C-CN38881
City Little Rock	State AR	Zip Code 72217
FEC ID number of contributing federal political committee. C C00468116		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>B. Toyota Motor North American Inc. PAC</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 601 Thirteenth Street NW Ste 910 S		Transaction ID : SA11C-CN39250
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. C C00542365		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. United Health Services PAC</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address PO Box 1210		Transaction ID : SA11C-CN38838
City Toccoa	State GA	Zip Code 30577
FEC ID number of contributing federal political committee. C C00400135		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).....	\$

14020022370

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

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

FOR LINE NUMBER: PAGE 304 OF 431  
(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>UPS PAC</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 16 / 2013
A. Mailing Address 55 Glenlake Parkway NE		Transaction ID : SA11C-CN38851
City Atlanta	State GA	
FEC ID number of contributing federal political committee. C C00064766		Amount of Each Receipt this Period 500
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 5500	

Full Name (Last, First, Middle Initial) <b>US Cellular Corporation PAC</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 23 / 2013
B. Mailing Address 8410 W Bryn Mawr Ave Suite 700		Transaction ID : SA11C-CN39184
City Chicago	State IL	
FEC ID number of contributing federal political committee. C C00336057		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 4000	

Full Name (Last, First, Middle Initial) <b>Vanguard Committee For Responsible Govt</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 23 / 2013
C. Mailing Address 975 F Street NW Ste 500		Transaction ID : SA11C-CN39183
City Washington	State DC	
FEC ID number of contributing federal political committee. C C00410266		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 3000	

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

14020022371



**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 305 OF 431
	<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)  
**VHA Inc PAC**

Mailing Address **220 E Las Colinas Blvd**

City **Irving** State **TX** Zip Code **75039**

FEC ID number of contributing federal political committee. **C C00199497**

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  
 12 09 2013

Transaction ID : **SA11C-CN38605**

Amount of Each Receipt this Period  
 \$ 1000

**B.** Full Name (Last, First, Middle Initial)  
**Virginia Victory PAC**

Mailing Address **215 E Alexandria Ave**

City **Alexandria** State **VA** Zip Code **22301**

FEC ID number of contributing federal political committee. **C C00387860**

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  
 12 04 2013

Transaction ID : **SA11C-CN38353**

Amount of Each Receipt this Period  
 \$ 1000

**C.** Full Name (Last, First, Middle Initial)  
**Wells Fargo PAC**

Mailing Address **Wells Fargo Center  
Sixth & Marquette**

City **Minneapolis** State **MN** Zip Code **55479**

FEC ID number of contributing federal political committee. **C C00034595**

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  
 12 03 2013

Transaction ID : **SA11C-CN38309**

Amount of Each Receipt this Period  
 \$ 5000

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

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

7000.00

14020022372

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

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

FOR LINE NUMBER: PAGE 306 OF 431  
(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**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Wells Fargo PAC</b>		Date of Receipt M M / D D / Y Y Y Y 12 03 2013
Mailing Address <b>Wells Fargo Center Sixth &amp; Marquette</b>		<b>Transaction ID : SA11C-CN38310</b>
City <b>Minneapolis</b>	State <b>MN</b> Zip Code <b>55479</b>	
FEC ID number of contributing federal political committee. <b>C C00034595</b>		Amount of Each Receipt this Period 5000
Name of Employer	Occupation	Amount of Each Receipt this Period 10000
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 10000	

<b>B.</b> Full Name (Last, First, Middle Initial) <b>Yum Brands Good Govt. Fund</b>		Date of Receipt M M / D D / Y Y Y Y 12 23 2013
Mailing Address <b>1441 Gardiner Ln</b>		<b>Transaction ID : SA11C-CN39185</b>
City <b>Louisville</b>	State <b>KY</b> Zip Code <b>40213</b>	
FEC ID number of contributing federal political committee. <b>C C00329474</b>		Amount of Each Receipt this Period 1000
Name of Employer	Occupation	Amount of Each Receipt this Period 1000
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000	

<b>C.</b> Full Name (Last, First, Middle Initial)		Date of Receipt M M / D D / Y Y Y Y
Mailing Address		<b>Transaction ID :</b>
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	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6000.00
<b>TOTAL</b> This Period (last page this line number only).....	207700.00

14020022373

**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 307 OF 431
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 15	
	<input checked="" 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**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Fiscal Conservative Majority Fund</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address 228 S Washington St Ste 115		<b>Transaction ID : SA12-TI5</b>
City State Zip Code Alexandria VA 22314	Amount of Each Receipt this Period 10662.26 Transfer In Affiliated	
FEC ID number of contributing federal political committee. <b>C</b> C00550822		Amount of Each Receipt this Period 10662.26 Transfer In Affiliated
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 10662.26	

<b>B.</b> Full Name (Last, First, Middle Initial) <b>Mr. Harvey J Berger</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address 2 Avery St		<b>Transaction ID : SA12-TI5-1</b>
City State Zip Code Boston MA 02111	Amount of Each Receipt this Period 1666.67 Transfer In Affiliated	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1666.67 Transfer In Affiliated <b>[MEMO ITEM]</b> Fiscal Conservative Majority Fund
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 1666.67	

<b>C.</b> Full Name (Last, First, Middle Initial) <b>Mr. Robert Gheewalla</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address 325 Weaver St		<b>Transaction ID : SA12-TI5-2</b>
City State Zip Code Larchmont NY 10538	Amount of Each Receipt this Period 1666.67 Transfer In Affiliated	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1666.67 Transfer In Affiliated <b>[MEMO ITEM]</b> Fiscal Conservative Majority Fund
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 1666.67	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10662.26
<b>TOTAL</b> This Period (last page this line number only).....	

14020022374

**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 308 OF 431
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input checked="" 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) <b>Mr. Christopher Hayward</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address 725 Bedford Rd		<b>Transaction ID : SA12-TI5-3</b>
City State Zip Code Bedford Corners NY 10549	Amount of Each Receipt this Period 1666.67	
FEC ID number of contributing federal political committee. <b>C</b>		Transfer In Affiliated
Name of Employer Highbridge Capital	Occupation Investment Advisor	<b>[MEMO ITEM]</b> Fiscal Conservative Majority Fund
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1666.67	

<b>B.</b> Full Name (Last, First, Middle Initial) <b>Mr. James H Herring</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address 132 E 72nd St		<b>Transaction ID : SA12-TI5-4</b>
City State Zip Code New York NY 10021	Amount of Each Receipt this Period 1666.67	
FEC ID number of contributing federal political committee. <b>C</b>		Transfer In Affiliated
Name of Employer Goldman Sachs	Occupation Investment Advisor	<b>[MEMO ITEM]</b> Fiscal Conservative Majority Fund
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1666.67	

<b>C.</b> Full Name (Last, First, Middle Initial) <b>Mr. Stephen Jones</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address 84 Park Ave		<b>Transaction ID : SA12-TI5-5</b>
City State Zip Code Bronxville NY 10708	Amount of Each Receipt this Period 1666.67	
FEC ID number of contributing federal political committee. <b>C</b>		Transfer In Affiliated
Name of Employer Capmark	Occupation Vice President	<b>[MEMO ITEM]</b> Fiscal Conservative Majority Fund
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1666.67	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022375

**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 309 OF 431
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input checked="" 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) <b>Mr. Scott B Kapnick</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address 20 E 73rd St  City State Zip Code New York NY 10021		Transaction ID : SA12-T15-6
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 2600
Name of Employer Occupation Highbridge Capital CEP		Transfer In Affiliated
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		<b>[MEMO ITEM]</b> Fiscal Conservative Majority Fund
Election Cycle-to-Date 2600		

<b>B.</b> Full Name (Last, First, Middle Initial) <b>Mr. Michael Millette</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address PO Box 7138  City State Zip Code Garden City NY 11530		Transaction ID : SA12-T15-7
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000
Name of Employer Occupation Goldman Sachs Managing Director		Transfer In Affiliated
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		<b>[MEMO ITEM]</b> Fiscal Conservative Majority Fund
Election Cycle-to-Date 2000		

<b>C.</b> Full Name (Last, First, Middle Initial) <b>Mr. Martin A Packouz</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address PO Box 839  City State Zip Code Bernardsville NJ 07924		Transaction ID : SA12-T15-8
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 333.33
Name of Employer Occupation Goldman Sachs Investment Advisor		Transfer In Affiliated
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		<b>[MEMO ITEM]</b> Fiscal Conservative Majority Fund
Election Cycle-to-Date 333.33		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	10662.26

14020022376

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

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

FOR LINE NUMBER: PAGE 310 OF 431  
(check only one)

<input 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 checked="" type="checkbox"/> 14	

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

**A.** Full Name (Last, First, Middle Initial)  
**Targeted Victory**

Mailing Address **PO Box 2187**

City **Arlington** State **VA** Zip Code **22202**

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

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  
**10 23 2013**

Transaction ID : **SA14-ER114**

Amount of Each Receipt this Period  
**500**

Expenditure Refund

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

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

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

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)..... **500.00**

**TOTAL** This Period (last page this line number only)..... **500.00**

14020022377

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

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

FOR LINE NUMBER: PAGE 311 OF 431  
(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)  
**BB&T**

Mailing Address 300 Summers Street

City Charleston State WV Zip Code 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  
556.06

Date of Receipt  
M M / D D / Y Y Y Y  
10 31 2013

Transaction ID : SA15-RC565

Amount of Each Receipt this Period  
73.55

Interest Earned

**B.** Full Name (Last, First, Middle Initial)  
**BB&T**

Mailing Address 300 Summers Street

City Charleston State WV Zip Code 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  
630.42

Date of Receipt  
M M / D D / Y Y Y Y  
11 29 2013

Transaction ID : SA15-RC566

Amount of Each Receipt this Period  
74.36

Interest Earned

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

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).....

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

147.91

147.91

14020022378

**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 312 OF 431			
	<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. Trail Blazer Campaign Services Inc.</b>		Date of Disbursement MM / DD / YYYY 12 / 06 / 2013
Mailing Address 5115 Excelsior Blvd #103		Amount of Each Disbursement this Period 14600.00 <b>Transaction ID : SB17-EX13506</b>
City Minneapolis	State MN	
Zip Code 55416	Purpose of Disbursement Reporting Software	Reporting Software
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. Alison Bibbee</b>		Date of Disbursement MM / DD / YYYY 10 / 01 / 2013
Mailing Address 1210 Dudley Road		Amount of Each Disbursement this Period 162.72 <b>Transaction ID : SB17-EX13348</b>
City Charleston	State WV	
Zip Code 25314	Purpose of Disbursement REIMBURSEMENT: SEE BELOW	REIMBURSEMENT: SEE BELOW
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. Kroger</b>		Date of Disbursement MM / DD / YYYY 10 / 01 / 2013
Mailing Address MacCorkle Ave.		Amount of Each Disbursement this Period 162.72 <b>Transaction ID : SB17-EX13349</b>
City South Charleston	State WV	
Zip Code 25309	Purpose of Disbursement Food and Beverage	[MEMO ITEM]
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).....	14762.72
<b>TOTAL</b> This Period (last page this line number only).....	

1402002379



**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 313 OF 431			
	<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. WV American Water</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2013
Mailing Address PO Box 371880		Amount of Each Disbursement this Period 23.05 <b>Transaction ID : SB17-EX13378</b>
City Pittsburgh	State PA	
Purpose of Disbursement Office Utilities	Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State:	District:	Office Utilities

Full Name (Last, First, Middle Initial) <b>B. WV American Water</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address PO Box 371880		Amount of Each Disbursement this Period 24.52 <b>Transaction ID : SB17-EX13625</b>
City Pittsburgh	State PA	
Purpose of Disbursement Office Utilities	Candidate Name	Category/ Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State:	District:	Office Utilities

Full Name (Last, First, Middle Initial) <b>c. Townsend Group</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2013
Mailing Address 1006 Pendleton St.		Amount of Each Disbursement this Period 5025.38 <b>Transaction ID : SB17-EX13361</b>
City Alexandria	State VA	
Purpose of Disbursement PAYMENT: SEE BELOW	Candidate Name	Category/ Type 003
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State:	District:	PAYMENT: SEE BELOW

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5072.95
<b>TOTAL</b> This Period (last page this line number only).....	

14020022380

**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 431
	<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. Townsend Group</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2013
Mailing Address 1006 Pendleton St.		Amount of Each Disbursement this Period 5000.00 <b>Transaction ID : SB17-EX13362</b> <b>[MEMO ITEM]</b>
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:	

Full Name (Last, First, Middle Initial) <b>B. FedEx</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2013
Mailing Address PO Box 371461		Amount of Each Disbursement this Period 25.38 <b>Transaction ID : SB17-EX13363</b> <b>[MEMO ITEM]</b>
City Pittsburgh	State PA	
Zip Code 15250	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:	

Full Name (Last, First, Middle Initial) <b>c. Townsend Group</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address 1006 Pendleton St.		Amount of Each Disbursement this Period 10102.87 <b>Transaction ID : SB17-EX13602</b> <b>PAYMENT: SEE BELOW</b>
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:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	10102.87
<b>TOTAL</b> This Period (last page this line number only) .....	

14020022381

**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 431			
	<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. Townsend Group</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address 1006 Pendleton St.		Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17-EX13603
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Fundraising Retainer	[MEMO ITEM]
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:		

Full Name (Last, First, Middle Initial) <b>B. W Millar &amp; Co Catering</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address 1335 14th St NW		Amount of Each Disbursement this Period 777.18 Transaction ID : SB17-EX13604
City Washington	State DC	
Zip Code 20005	Purpose of Disbursement Catering	[MEMO ITEM]
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:		

Full Name (Last, First, Middle Initial) <b>C. Bullfeathers</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address 410 1st SE		Amount of Each Disbursement this Period 640.00 Transaction ID : SB17-EX13605
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Food and Beverage	[MEMO ITEM]
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022382

**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 316 OF 431			
	<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. 101 Constitution</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address 101 Constitution Ave		Amount of Each Disbursement this Period \$ 23.00 Transaction ID : SB17-EX13606
City Washington	State DC	
Zip Code 20001	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	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Devour Catering</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address 2341 Distribution Cir		Amount of Each Disbursement this Period \$ 340.20 Transaction ID : SB17-EX13607
City Silver Spring	State MD	
Zip Code 20910	Purpose of Disbursement Catering	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	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. FedEx</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address PO Box 371461		Amount of Each Disbursement this Period \$ 102.68 Transaction ID : SB17-EX13608
City Pittsburgh	State PA	
Zip Code 15250	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	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

14020022383

**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 317 OF 431			
	<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. Acqua Al 2</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address 212 7th Street SE		Amount of Each Disbursement this Period 708.35 Transaction ID : SB17-EX13609
City Washington	State DC	
Zip Code 20003	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:	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. Catering By Charlene</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address 104 N West St		Amount of Each Disbursement this Period 2511.46 Transaction ID : SB17-EX13610
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Catering	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. Townsend Group</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address 1006 Pendleton St.		Amount of Each Disbursement this Period 10647.31 Transaction ID : SB17-EX13480
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:	PAYMENT: SEE BELOW

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	10647.31
<b>TOTAL</b> This Period (last page this line number only) .....	

14020022384

**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 431
	<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. Townsend Group</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address 1006 Pendleton St.		Amount of Each Disbursement this Period \$ 5000.00 Transaction ID : SB17-EX13481 <b>[MEMO ITEM]</b>
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:	

Full Name (Last, First, Middle Initial) <b>B. Townsend Group</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address 1006 Pendleton St.		Amount of Each Disbursement this Period \$ 5000.00 Transaction ID : SB17-EX13482 <b>[MEMO ITEM]</b>
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Fundraising Commission	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. W Millar &amp; Co Catering</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address 1335 14th St NW		Amount of Each Disbursement this Period \$ 346.75 Transaction ID : SB17-EX13483 <b>[MEMO ITEM]</b>
City Washington	State DC	
Zip Code 20005	Purpose of Disbursement Catering	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).....	

14020022385

**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 431			
	<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. 300 New Jersey Partners</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address 300 New Jersey Ave NW		Amount of Each Disbursement this Period \$ 250.00 Transaction ID : SB17-EX13484
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Room Rental	Category/ Type 003
Candidate Name	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. Townsend Group</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address 1006 Pendleton St.		Amount of Each Disbursement this Period \$ 7.90 Transaction ID : SB17-EX13485
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Taxi Fare	Category/ Type 003
Candidate Name	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. FedEx</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address PO Box 371461		Amount of Each Disbursement this Period \$ 42.66 Transaction ID : SB17-EX13486
City Pittsburgh	State PA	
Zip Code 15250	Purpose of Disbursement Shipping	Category/ Type 003
Candidate Name	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	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).....	

14020022386

**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 320 OF 431			
	<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. City of Charleston</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2013
Mailing Address <b>Box 7786</b>		Amount of Each Disbursement this Period 164.00 <b>Transaction ID : SB17-EX13335</b>
City <b>Charleston</b>	State <b>WV</b>	
Zip Code <b>25356</b>	Purpose of Disbursement <b>City Service Fee</b>	City Service Fee
Candidate Name	Category/Type <b>001</b>	
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:		

Full Name (Last, First, Middle Initial) <b>B. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2013
Mailing Address <b>1002 Lee St.</b>		Amount of Each Disbursement this Period 2005.17 <b>Transaction ID : SB17-EX13474</b>
City <b>Charleston</b>	State <b>WV</b>	
Zip Code <b>25301</b>	Purpose of Disbursement <b>Postage</b>	Postage
Candidate Name	Category/Type <b>001</b>	
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:		

Full Name (Last, First, Middle Initial) <b>c. Lumos Networks</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address <b>PO Box 11171</b>		Amount of Each Disbursement this Period 92.66 <b>Transaction ID : SB17-EX13358</b>
City <b>Charleston</b>	State <b>WV</b>	
Zip Code <b>25339</b>	Purpose of Disbursement <b>Telephone Expense</b>	Telephone Expense
Candidate Name	Category/Type <b>001</b>	
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2261.83
<b>TOTAL</b> This Period (last page this line number only) .....	

14020022387



**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 431			
	<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. Lumos Networks</b>		Date of Disbursement MM / DD / YYYY 10 / 21 / 2013
Mailing Address PO Box 11171		Amount of Each Disbursement this Period \$ 89.82 Transaction ID : SB17-EX13376
City Charleston	State WV	
Zip Code 25339	Purpose of Disbursement Telephone Expense	Telephone Expense
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. Lumos Networks</b>		Date of Disbursement MM / DD / YYYY 12 / 06 / 2013
Mailing Address PO Box 11171		Amount of Each Disbursement this Period \$ 87.05 Transaction ID : SB17-EX13504
City Charleston	State WV	
Zip Code 25339	Purpose of Disbursement Telephone Expense	Telephone Expense
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. M&amp;M Mailing</b>		Date of Disbursement MM / DD / YYYY 12 / 06 / 2013
Mailing Address PO Box 6605		Amount of Each Disbursement this Period \$ 1316.94 Transaction ID : SB17-EX13476
City Huntington	State WV	
Zip Code 25772	Purpose of Disbursement Card Mailing	Card Mailing
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).....	1493.81
<b>TOTAL</b> This Period (last page this line number only).....	

14020022388

**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 322 OF 431			
	<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. Capitol Conference Center</b>		Date of Disbursement MM / DD / YYYY 10 / 02 / 2013
Mailing Address PO Box 3740		Amount of Each Disbursement this Period 1844.94 <b>Transaction ID : SB17-EX13360</b>
City Charleston	State WV	
Zip Code 25337	Purpose of Disbursement Facility Rental & Catering	Category/ Type 003
Candidate Name	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	Facility Rental & Catering

Full Name (Last, First, Middle Initial) <b>B. AT&amp;T Mobility</b>		Date of Disbursement MM / DD / YYYY 10 / 01 / 2013
Mailing Address PO Box 6463		Amount of Each Disbursement this Period 507.91 <b>Transaction ID : SB17-EX13355</b>
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement Telephone Expense	Category/ Type 001
Candidate Name	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	Telephone Expense

Full Name (Last, First, Middle Initial) <b>c. AT&amp;T Mobility</b>		Date of Disbursement MM / DD / YYYY 10 / 28 / 2013
Mailing Address PO Box 6463		Amount of Each Disbursement this Period 506.50 <b>Transaction ID : SB17-EX13381</b>
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement Telephone Expense	Category/ Type 001
Candidate Name	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	Telephone Expense

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2859.35
<b>TOTAL</b> This Period (last page this line number only) .....	

14020022389

**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 323 OF 431			
	<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)

**A. 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: 12 / 06 / 2013

Amount of Each Disbursement this Period: 508.36

Transaction ID : SB17-EX13499

Telephone Expense

Full Name (Last, First, Middle Initial)

**B. 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: 12 / 19 / 2013

Amount of Each Disbursement this Period: 597.07

Transaction ID : SB17-EX13526

Telephone Expense

Full Name (Last, First, Middle Initial)

**C. Goldman & Associates**

Mailing Address 1014 Bridge Rd.

City Charleston State WV Zip Code 25314

Purpose of Disbursement Office Rent

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) Primary 2014

State: District:

Date of Disbursement: 10 / 01 / 2013

Amount of Each Disbursement this Period: 400.00

Transaction ID : SB17-EX13337

Office Rent

**SUBTOTAL** of Disbursements This Page (optional) ..... 1505.43

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

14020022390

**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 324 OF 431
	<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. Goldman &amp; Associates</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2013
Mailing Address 1014 Bridge Rd.		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17-EX13385
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>B. Goldman &amp; Associates</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2013
Mailing Address 1014 Bridge Rd.		Amount of Each Disbursement this Period 400.00 Transaction ID : SB17-EX13478
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. Patton Boggs</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address 2550 M St. NW		Amount of Each Disbursement this Period 2950.00 Transaction ID : SB17-EX13388
City Washington	State DC	
Zip Code 20037	Purpose of Disbursement Legal Services	Legal Services
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).....	3750.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022391

**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 325 OF 431			
	<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. Charles Capito Jr.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 04 2013
Mailing Address Two Comstock Place		Amount of Each Disbursement this Period 145.86 Transaction ID : SB17-EX13493
City Charleston	State WV Zip Code 25314	
Purpose of Disbursement REIMBURSEMENT: SEE BELOW	Candidate Name	REIMBURSEMENT: SEE BELOW
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>B. Clyde's</b>		Date of Disbursement M M / D D / Y Y Y Y 12 04 2013
Mailing Address 3236 M St NW		Amount of Each Disbursement this Period 145.86 Transaction ID : SB17-EX13494
City Washington	State DC Zip Code 20007	
Purpose of Disbursement Food and Beverage	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>C. Artistic Promotions LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 16 2013
Mailing Address 2306 Charles Ave.		Amount of Each Disbursement this Period 286.53 Transaction ID : SB17-EX13372
City Dunbar	State WV Zip Code 25064	
Purpose of Disbursement T-Shirts	Candidate Name	T-Shirts
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Category/Type 006	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	432.39
<b>TOTAL</b> This Period (last page this line number only) .....	

14020022392

**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 326 OF 431			
	<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. Artistic Promotions LLC</b>		Date of Disbursement MM / DD / YYYY 11 / 06 / 2013
Mailing Address 2306 Charles Ave.		Amount of Each Disbursement this Period 920.00 Transaction ID : SB17-EX13612
City Dunbar State WV Zip Code 25064	Purpose of Disbursement Campaign Decals 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	Campaign Decals
Category/Type 006		

Full Name (Last, First, Middle Initial) <b>B. Artistic Promotions LLC</b>		Date of Disbursement MM / DD / YYYY 11 / 15 / 2013
Mailing Address 2306 Charles Ave.		Amount of Each Disbursement this Period 55.20 Transaction ID : SB17-EX13626
City Dunbar State WV Zip Code 25064	Purpose of Disbursement Campaign Decals 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	Campaign Decals
Category/Type 006		

Full Name (Last, First, Middle Initial) <b>c. Brabender &amp; Cox</b>		Date of Disbursement MM / DD / YYYY 10 / 16 / 2013
Mailing Address 1218 Grandview Ave.		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB17-EX13373
City Pittsburgh State PA Zip Code 15211	Purpose of Disbursement Media Consulting 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	Media Consulting
Category/Type 004		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3475.20
<b>TOTAL</b> This Period (last page this line number only) .....	

14020022393

**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 327 OF 431
	<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. Brabender &amp; Cox</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2013
Mailing Address 1218 Grandview Ave.		Amount of Each Disbursement this Period 3500.00 Transaction ID : SB17-EX13613
City Pittsburgh	State PA	
Zip Code 15211	Purpose of Disbursement Media Consulting	Category/ Type 004
Candidate Name	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	Media Consulting

Full Name (Last, First, Middle Initial) <b>B. Charles Flannery</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 307 Winwood Dr.		Amount of Each Disbursement this Period 52.59 Transaction ID : SB17-EX13350
City Charleston	State WV	
Zip Code 25302	Purpose of Disbursement REIMBURSEMENT: SEE BELOW	Category/ Type 001
Candidate Name	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial) <b>c. Walmart Super Center</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address RHL Blvd.		Amount of Each Disbursement this Period 45.22 Transaction ID : SB17-EX13351
City South Charleston	State WV	
Zip Code 25309	Purpose of Disbursement Paper Supplies	Category/ Type 001
Candidate Name	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3552.59
<b>TOTAL</b> This Period (last page this line number only) .....	

14020022394

**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 328 OF 431
	<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. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 01 2013
Mailing Address 1002 Lee St.		Amount of Each Disbursement this Period 7.37
City Charleston	State WV Zip Code 25301	
Purpose of Disbursement Postage	001	Transaction ID : SB17-EX13352
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	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Appalachian Power</b>		Date of Disbursement M M / D D / Y Y Y Y 10 01 2013
Mailing Address PO Box24413		Amount of Each Disbursement this Period 159.49
City Canton	State OH Zip Code 44701	
Purpose of Disbursement Office Utilities	001	Transaction ID : SB17-EX13354
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	Office Utilities
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Appalachian Power</b>		Date of Disbursement M M / D D / Y Y Y Y 11 08 2013
Mailing Address PO Box24413		Amount of Each Disbursement this Period 94.68
City Canton	State OH Zip Code 44701	
Purpose of Disbursement Office Utilities	001	Transaction ID : SB17-EX13618
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	Office Utilities
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	254.17
TOTAL This Period (last page this line number only).....	

14020022395



**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. Appalachian Power</b>		Date of Disbursement MM / DD / YYYY 12 / 06 / 2013
Mailing Address <b>PO Box 24413</b>		Amount of Each Disbursement this Period 51.68 <b>Transaction ID : SB17-EX13498</b>
City Canton	State OH	
Purpose of Disbursement 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	Office Utilities
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>B. Chapman Printing</b>		Date of Disbursement MM / DD / YYYY 10 / 10 / 2013
Mailing Address <b>PO Box 2867</b>		Amount of Each Disbursement this Period 101.36 <b>Transaction ID : SB17-EX13370</b>
City Huntington	State WV	
Purpose of Disbursement Stationary Printing	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	Stationary Printing
State: _____ District: _____		

Full Name (Last, First, Middle Initial) <b>c. Chapman Printing</b>		Date of Disbursement MM / DD / YYYY 10 / 28 / 2013
Mailing Address <b>PO Box 2867</b>		Amount of Each Disbursement this Period 103.46 <b>Transaction ID : SB17-EX13382</b>
City Huntington	State WV	
Purpose of Disbursement Envelope Printing	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	Envelope Printing
State: _____ District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	256.50
<b>TOTAL</b> This Period (last page this line number only) .....	

1402002396

**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. Chapman Printing**

Mailing Address PO Box 2867

City State Zip Code  
Huntington WV 25728

Purpose of Disbursement  
Pens

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  
11 08 2013

Amount of Each Disbursement this Period

1291.69

Transaction ID : SB17-EX13622

Pens

006  
Category/  
Type

**B. Chapman Printing**

Mailing Address PO Box 2867

City State Zip Code  
Huntington WV 25728

Purpose of Disbursement  
Pens & Note Pads

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  
12 06 2013

Amount of Each Disbursement this Period

1600.55

Transaction ID : SB17-EX13502

Pens & Note Pads

006  
Category/  
Type

**C. FEC Financial Inc.**

Mailing Address PO Box 651374

City State Zip Code  
Potomac Falls VA 20165

Purpose of Disbursement  
PAYMENT: SEE BELOW

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  
10 08 2013

Amount of Each Disbursement this Period

3920.30

Transaction ID : SB17-EX13367

PAYMENT: SEE BELOW

001  
Category/  
Type

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

6812.54

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

14020022397

**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. FEC Financial Inc.</b>		Date of Disbursement MM / DD / YYYY 10 / 08 / 2013
Mailing Address PO Box 651374		Amount of Each Disbursement this Period 3800.00 Transaction ID : SB17-EX13368
City Potomac Falls	State VA	
Zip Code 20165	Purpose of Disbursement Accounting Services	001 Category/ Type
Candidate Name		[MEMO ITEM]
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. FEC Financial Inc.</b>		Date of Disbursement MM / DD / YYYY 10 / 08 / 2013
Mailing Address PO Box 651374		Amount of Each Disbursement this Period 120.30 Transaction ID : SB17-EX13369
City Potomac Falls	State VA	
Zip Code 20165	Purpose of Disbursement Postage Reimbursement	001 Category/ Type
Candidate Name		[MEMO ITEM]
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 11 / 06 / 2013
Mailing Address PO Box 651374		Amount of Each Disbursement this Period 3295.95 Transaction ID : SB17-EX13614
City Potomac Falls	State VA	
Zip Code 20165	Purpose of Disbursement PAYMENT: SEE BELOW	001 Category/ Type
Candidate Name		PAYMENT: 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3295.95
<b>TOTAL</b> This Period (last page this line number only) .....	

14020022398

**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.**

Mailing Address PO Box 651374

City Potomac Falls State VA Zip Code 20165

Purpose of Disbursement  
Accounting Services

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  
11 / 06 / 2013

Amount of Each Disbursement this Period

3250.00

Transaction ID : SB17-EX13615

[MEMO ITEM]

**B. FEC Financial Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 651374

City Potomac Falls State VA Zip Code 20165

Purpose of Disbursement  
Postage Reimbursement

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  
11 / 06 / 2013

Amount of Each Disbursement this Period

45.95

Transaction ID : SB17-EX13616

[MEMO ITEM]

**c. FEC Financial Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 651374

City Potomac Falls State VA Zip Code 20165

Purpose of Disbursement  
PAYMENT: SEE BELOW

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  
12 / 05 / 2013

Amount of Each Disbursement this Period

3277.54

Transaction ID : SB17-EX13495

PAYMENT: SEE BELOW

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

3277.54

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

14020022399

**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 333 OF 431
	<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. FEC Financial Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 05 2013
Mailing Address PO Box 651374		Amount of Each Disbursement this Period 3250.00
City Potomac Falls	State VA	
Zip Code 20165	Category/ Type 001	Transaction ID : SB17-EX13496
Purpose of Disbursement Accounting Services	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) <b>B. FEC Financial Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 05 2013
Mailing Address PO Box 651374		Amount of Each Disbursement this Period 27.54
City Potomac Falls	State VA	
Zip Code 20165	Category/ Type 001	Transaction ID : SB17-EX13497
Purpose of Disbursement Postage Reimbursement	Candidate Name	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Charleston Sanitary Board</b>		Date of Disbursement M M / D D / Y Y Y Y 11 08 2013
Mailing Address PO Box 7949		Amount of Each Disbursement this Period 21.87
City Charleston	State WV	
Zip Code 25356	Category/ Type 001	Transaction ID : SB17-EX13619
Purpose of Disbursement Office Utilities	Candidate Name	Office Utilities
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	21.87
<b>TOTAL</b> This Period (last page this line number only).....	

14020022400

**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 334 OF 431
	<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. Charleston Sanitary Board</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 06 / 2013
Mailing Address PO Box 7949		Amount of Each Disbursement this Period 21.87 Transaction ID : SB17-EX13503
City Charleston	State WV	
Zip Code 25356	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. Harrison Co. Republican Party</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address Rt. 3 Box 1145		Amount of Each Disbursement this Period 175.00 Transaction ID : SB17-EX13491
City Clarksburg	State WV	
Zip Code 26301	Purpose of Disbursement Event Tickets	Event Tickets
Candidate Name	Category/Type 007	
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. Mountaineer Gas Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2013
Mailing Address PO Box 362		Amount of Each Disbursement this Period 27.35 Transaction ID : SB17-EX13366
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	224.22
<b>TOTAL</b> This Period (last page this line number only) .....	

14020022401

**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 335 OF 431	
	<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. Mountaineer Gas Co.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2013
Mailing Address PO Box 362		Amount of Each Disbursement this Period 18.98 <b>Transaction ID : SB17-EX13620</b>
City Charleston	State WV	
Zip Code 25322	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:		

Full Name (Last, First, Middle Initial) <b>B. Suddenlink</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 21 / 2013
Mailing Address PO Box 660365		Amount of Each Disbursement this Period 167.64 <b>Transaction ID : SB17-EX13377</b>
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Internet Service	Internet Service
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. Suddenlink</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 30 / 2013
Mailing Address PO Box 660365		Amount of Each Disbursement this Period 0.01 <b>Transaction ID : SB17-EX13389</b>
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Internet Service	Internet Service
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).....	186.63
<b>TOTAL</b> This Period (last page this line number only).....	

14020022402

**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 336 OF 431
	<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. Suddenlink</b>		Date of Disbursement MM / DD / YYYY 12 / 06 / 2013
Mailing Address PO Box 660365		Amount of Each Disbursement this Period 173.52 Transaction ID : SB17-EX13505
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Internet Service	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:	Internet Service

Full Name (Last, First, Middle Initial) <b>B. Suddenlink</b>		Date of Disbursement MM / DD / YYYY 12 / 19 / 2013
Mailing Address PO Box 660365		Amount of Each Disbursement this Period 175.54 Transaction ID : SB17-EX13527
City Dallas	State TX	
Zip Code 75266	Purpose of Disbursement Internet Service	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:	Internet Service

Full Name (Last, First, Middle Initial) <b>c. Dixon Hughes PLLC</b>		Date of Disbursement MM / DD / YYYY 10 / 01 / 2013
Mailing Address PO Box 3049		Amount of Each Disbursement this Period 2534.75 Transaction ID : SB17-EX13340
City Asheville	State NC	
Zip Code 28802	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:	Accounting Services

SUBTOTAL of Disbursements This Page (optional) .....	2883.81
TOTAL This Period (last page this line number only) .....	

14020022403



**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 337 OF 431			
	<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. WVGOP</b>		Date of Disbursement MM / DD / YYYY 10 / 17 / 2013
Mailing Address 5019 MacCorkle Ave. SW		Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17-EX13374</b>
City South Charleston	State WV	
Zip Code 25309	Purpose of Disbursement Event Sponsorship	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:	Event Sponsorship

Full Name (Last, First, Middle Initial) <b>B. Vanco Services</b>		Date of Disbursement MM / DD / YYYY 10 / 07 / 2013
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period 69.20 <b>Transaction ID : SB17-EX13392</b>
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>c. Vanco Services</b>		Date of Disbursement MM / DD / YYYY 10 / 08 / 2013
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period 100.65 <b>Transaction ID : SB17-EX13393</b>
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

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1169.85
<b>TOTAL</b> This Period (last page this line number only) .....	

14020022404

**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 338 OF 431			
	<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. Vanco Services</b>		Date of Disbursement M M / D D / Y Y Y Y 10 10 2013
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period \$ 56.35 <b>Transaction ID : SB17-EX13394</b>
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	
State: _____	District: _____	Credit Card Service Fee

Full Name (Last, First, Middle Initial) <b>B. Vanco Services</b>		Date of Disbursement M M / D D / Y Y Y Y 10 11 2013
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period \$ 38.99 <b>Transaction ID : SB17-EX13395</b>
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	
State: _____	District: _____	Credit Card Service Fee

Full Name (Last, First, Middle Initial) <b>c. Vanco Services</b>		Date of Disbursement M M / D D / Y Y Y Y 10 11 2013
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period \$ 19.45 <b>Transaction ID : SB17-EX13683</b>
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	
State: _____	District: _____	Credit Card Service Fee

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	114.79
<b>TOTAL</b> This Period (last page this line number only).....	

14020022405

**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. Vanco Services</b>		Date of Disbursement M M / D D / Y Y - Y Y 10 22 2013
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period \$ 200.40 <b>Transaction ID : SB17-EX13396</b>
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	
State: _____	District: _____	Credit Card Service Fee

Full Name (Last, First, Middle Initial) <b>B. Vanco Services</b>		Date of Disbursement M M / D D / Y Y - Y Y 10 23 2013
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period \$ 33.97 <b>Transaction ID : SB17-EX13397</b>
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	
State: _____	District: _____	Credit Card Service Fee

Full Name (Last, First, Middle Initial) <b>c. Vanco Services</b>		Date of Disbursement M M / D D / Y Y - Y Y 10 25 2013
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period \$ 206.55 <b>Transaction ID : SB17-EX13398</b>
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	
State: _____	District: _____	Credit Card Service Fee

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	440.92
<b>TOTAL</b> This Period (last page this line number only) .....	

14020022406

**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 340 OF 431			
	<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. Vanco Services</b>		Date of Disbursement M M / D D / Y Y Y Y 10 31 2013
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period 56.44
City Minnetonka	State MN	
Zip Code 55343	Purpose of Disbursement Credit Card Service Fee	Transaction ID : SB17-EX13399
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. Vanco Services</b>		Date of Disbursement M M / D D / Y Y Y Y 11 04 2013
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period 406.05
City Minnetonka	State MN	
Zip Code 55343	Purpose of Disbursement Credit Card Service Fee	Transaction ID : SB17-EX13400
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. Vanco Services</b>		Date of Disbursement M M / D D / Y Y Y Y 11 05 2013
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period 7.45
City Minnetonka	State MN	
Zip Code 55343	Purpose of Disbursement Credit Card Service Fee	Transaction ID : SB17-EX13401
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).....	469.94
<b>TOTAL</b> This Period (last page this line number only).....	

14020022407

**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 341 OF 431	
	<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 M M / D D / Y Y Y Y 11 / 12 / 2013
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period \$ 83.85 <b>Transaction ID : SB17-EX13402</b>
City Minnetonka	State MN	
Purpose of Disbursement Credit Card Service Fee	Candidate Name	001 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: _____ District: _____	Credit Card Service Fee	

Full Name (Last, First, Middle Initial) <b>B. Vanco Services</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period \$ 214.11 <b>Transaction ID : SB17-EX13403</b>
City Minnetonka	State MN	
Purpose of Disbursement Credit Card Service Fee	Candidate Name	001 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: _____ District: _____	Credit Card Service Fee	

Full Name (Last, First, Middle Initial) <b>C. Vanco Services</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2013
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period \$ 1.83 <b>Transaction ID : SB17-EX13407</b>
City Minnetonka	State MN	
Purpose of Disbursement Credit Card Service Fee	Candidate Name	001 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: _____ District: _____	Credit Card Service Fee	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	\$ 299.79
<b>TOTAL</b> This Period (last page this line number only) .....	\$

14020022408

**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 342 OF 431
	<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 11 / 15 / 2013
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period \$ 21.45 <b>Transaction ID : SB17-EX13684</b>
City Minnetonka	State MN	
Zip Code 55343	Purpose of Disbursement Credit Card Service Fee	001 Category/ Type
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	Credit Card Service Fee

Full Name (Last, First, Middle Initial) <b>B. Vanco Services</b>		Date of Disbursement MM / DD / YYYY 11 / 19 / 2013
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period \$ 421.77 <b>Transaction ID : SB17-EX13404</b>
City Minnetonka	State MN	
Zip Code 55343	Purpose of Disbursement Credit Card Service Fee	001 Category/ Type
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	Credit Card Service Fee

Full Name (Last, First, Middle Initial) <b>C. Vanco Services</b>		Date of Disbursement MM / DD / YYYY 12 / 09 / 2013
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period \$ 14.42 <b>Transaction ID : SB17-EX13406</b>
City Minnetonka	State MN	
Zip Code 55343	Purpose of Disbursement redit Card Service Fee	001 Category/ Type
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	redit Card Service Fee

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	457.64
<b>TOTAL</b> This Period (last page this line number only).....	

14020022409

**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 343 OF 431
	<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. Vanco Services</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2013
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period 72.28
City Minnetonka	State MN	
Zip Code 55343	Purpose of Disbursement redit Card Service Fee	Transaction ID : <b>SB17-EX13408</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	redit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Vanco Services</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period 82.24
City Minnetonka	State MN	
Zip Code 55343	Purpose of Disbursement Credit Card Service Fee	Transaction ID : <b>SB17-EX13409</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. Vanco Services</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period 55.38
City Minnetonka	State MN	
Zip Code 55343	Purpose of Disbursement Credit Card Service Fee	Transaction ID : <b>SB17-EX13410</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).....	209.90
<b>TOTAL</b> This Period (last page this line number only).....	

14020022410

**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 344 OF 431			
	<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. Vanco Services</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period 22.35 <b>Transaction ID : SB17-EX13685</b>
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. Vanco Services</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2013
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period 74.85 <b>Transaction ID : SB17-EX13411</b>
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>c. Vanco Services</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 19 / 2013
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period 191.31 <b>Transaction ID : SB17-EX13412</b>
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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	288.51
<b>TOTAL</b> This Period (last page this line number only).....	

14020022411



**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 345 OF 431	
	<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 M M / D D / Y Y Y Y 12 / 23 / 2013
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period 116.85 <b>Transaction ID : SB17-EX13462</b>
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. Office &amp; Commercial Cleaning</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address PO Box 18445		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : SB17-EX13359</b>
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

Full Name (Last, First, Middle Initial) <b>c. Office &amp; Commercial Cleaning</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address PO Box 18445		Amount of Each Disbursement this Period 200.00 <b>Transaction ID : SB17-EX13391</b>
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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	516.85
<b>TOTAL</b> This Period (last page this line number only).....	

14020022412

**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 346 OF 431
	<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**

<b>A. Office &amp; Commercial Cleaning</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 18445 City South Charleston State WV Zip Code 25303 Purpose of Disbursement Office Cleaning 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:		Date of Disbursement M M / D D / Y Y Y Y 11 08 2013 Amount of Each Disbursement this Period 200.00 <b>Transaction ID : SB17-EX13621</b> Office Cleaning
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<b>B. Auge+Gray</b> Full Name (Last, First, Middle Initial) Mailing Address 3508 Noyes Ave City Charleston State WV Zip Code 25304 Purpose of Disbursement Card Design 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:		Date of Disbursement M M / D D / Y Y Y Y 12 06 2013 Amount of Each Disbursement this Period 1500.00 <b>Transaction ID : SB17-EX13500</b> Card Design
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<b>c. Auge+Gray</b> Full Name (Last, First, Middle Initial) Mailing Address 3508 Noyes Ave City Charleston State WV Zip Code 25304 Purpose of Disbursement Card Design 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:		Date of Disbursement M M / D D / Y Y Y Y 12 11 2013 Amount of Each Disbursement this Period 1000.00 <b>Transaction ID : SB17-EX13508</b> Card Design
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<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2700.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022413

**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 347 OF 431	
	<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. Targeted Victory</b>		Date of Disbursement MM / DD / YYYY 10 / 07 / 2013
Mailing Address PO Box 2187		Amount of Each Disbursement this Period 3500.00
City Arlington	State VA	
Zip Code 22202	Purpose of Disbursement Email Marketing	Email Marketing
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. Targeted Victory</b>		Date of Disbursement MM / DD / YYYY 10 / 31 / 2013
Mailing Address PO Box 2187		Amount of Each Disbursement this Period 12700.00
City Arlington	State VA	
Zip Code 22202	Purpose of Disbursement Email Marketing & Online Advertising	Email Marketing & Online Advertising
Candidate Name	004 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 10 / 04 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 10.63
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).....	16210.63
<b>TOTAL</b> This Period (last page this line number only).....	

14020022414

**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 348 OF 431	
	<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 10 07 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 23.81 Transaction ID : SB17-EX13414
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	001 Category/ Type
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 10 08 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 8.50 Transaction ID : SB17-EX13415
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	001 Category/ Type
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 10 09 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 8.50 Transaction ID : SB17-EX13416
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	001 Category/ Type
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).....	40.81
<b>TOTAL</b> This Period (last page this line number only).....	

14020022415

**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 349 OF 431	
	<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 M M / D D / Y Y Y Y 10 11 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 8.50 <b>Transaction ID : SB17-EX13417</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 M M / D D / Y Y Y Y 10 15 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 10.63 <b>Transaction ID : SB17-EX13418</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 M M / D D / Y Y Y Y 10 16 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 93.50 <b>Transaction ID : SB17-EX13419</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) .....	112.63
<b>TOTAL</b> This Period (last page this line number only) .....	

14020022416

**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 350 OF 431			
	<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 10 / 18 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 129.63 <b>Transaction ID : SB17-EX13420</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 MM / DD / YYYY 10 / 21 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 8.50 <b>Transaction ID : SB17-EX13421</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 MM / DD / YYYY 10 / 22 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 4.26 <b>Transaction ID : SB17-EX13422</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).....	142.39
<b>TOTAL</b> This Period (last page this line number only).....	

14020022417

**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 351 OF 431			
	<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 10 / 23 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 2.13 <b>Transaction ID : SB17-EX13423</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 MM / DD / YYYY 10 / 25 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 157.25 <b>Transaction ID : SB17-EX13424</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 MM / DD / YYYY 10 / 29 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 21.25 <b>Transaction ID : SB17-EX13425</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).....	180.63
<b>TOTAL</b> This Period (last page this line number only).....	

14020022418

**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 352 OF 431	
	<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 10 / 30 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period \$ 121.56 <b>Transaction ID : SB17-EX13426</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 MM / DD / YYYY 10 / 31 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period \$ 65.88 <b>Transaction ID : SB17-EX13427</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 MM / DD / YYYY 11 / 04 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period \$ 42.50 <b>Transaction ID : SB17-EX13428</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).....	229.94
<b>TOTAL</b> This Period (last page this line number only).....	

14020022419



**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 353 OF 431	
	<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 M M / D D / Y Y Y Y 11 / 06 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 221.00 Transaction ID : SB17-EX13429
City San Francisco	State CA	
Purpose of Disbursement Credit Card Service Fee	Zip Code 94105	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 M M / D D / Y Y Y Y 11 / 07 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 8.50 Transaction ID : SB17-EX13430
City San Francisco	State CA	
Purpose of Disbursement Credit Card Service Fee	Zip Code 94105	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 M M / D D / Y Y Y Y 11 / 08 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 29.75 Transaction ID : SB17-EX13431
City San Francisco	State CA	
Purpose of Disbursement Credit Card Service Fee	Zip Code 94105	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) .....	259.25
<b>TOTAL</b> This Period (last page this line number only) .....	

14020022420

**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 354 OF 431	
	<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 11 / 13 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 13.61 Transaction ID : SB17-EX13432
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	
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Service Fee

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement MM / DD / YYYY 11 / 14 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 2.13 Transaction ID : SB17-EX13433
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	
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Service Fee

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement MM / DD / YYYY 11 / 15 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 4.26 Transaction ID : SB17-EX13434
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	
State: District:	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Service Fee

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	20.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022421

**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

City State Zip Code  
San Francisco CA 94105

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

M M / D D / Y Y Y Y  
11 / 18 / 2013

Amount of Each Disbursement this Period

10.63

Transaction ID : SB17-EX13435

Credit Card Service Fee

**B. Piryx**

Mailing Address 144 2nd St. 1st Floor

City State Zip Code  
San Francisco CA 94105

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

M M / D D / Y Y Y Y  
11 / 19 / 2013

Amount of Each Disbursement this Period

85.00

Transaction ID : SB17-EX13436

Credit Card Service Fee

**C. Piryx**

Mailing Address 144 2nd St. 1st Floor

City State Zip Code  
San Francisco CA 94105

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

M M / D D / Y Y Y Y  
11 / 20 / 2013

Amount of Each Disbursement this Period

8.50

Transaction ID : SB17-EX13437

Credit Card Service Fee

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

104.13

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

14020022422

**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 356 OF 431
	<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 11 / 21 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 263.50 <b>Transaction ID : SB17-EX13438</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 MM / DD / YYYY 11 / 22 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 12.75 <b>Transaction ID : SB17-EX13439</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 MM / DD / YYYY 11 / 25 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 2.13 <b>Transaction ID : SB17-EX13440</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) .....	278.38
<b>TOTAL</b> This Period (last page this line number only) .....	

14020022423

**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 357 OF 431	
	<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 M M / D D / Y Y Y Y 11 / 26 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 60.36 <b>Transaction ID : SB17-EX13441</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 11 / 27 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 148.76 <b>Transaction ID : SB17-EX13442</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 11 / 29 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 8.50 <b>Transaction ID : SB17-EX13443</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) .....	217.62
<b>TOTAL</b> This Period (last page this line number only) .....	

14020022424

**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 358 OF 431			
	<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 11 / 29 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 561.00 Transaction ID : SB17-EX13444
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 M M / D D / Y Y - Y Y 12 / 03 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 17.00 Transaction ID : SB17-EX13713
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 M M / D D / Y Y - Y Y 12 / 04 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 2.13 Transaction ID : SB17-EX13446
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).....	580.13
<b>TOTAL</b> This Period (last page this line number only).....	

14020022425

**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 359 OF 431			
	<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 M M / D D / Y Y Y Y 12 / 05 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period \$ 127.50 <b>Transaction ID : SB17-EX13447</b>
City San Francisco	State CA	
Zip Code 94105	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Service Fee
Purpose of Disbursement Credit Card Service Fee	001 Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 09 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period \$ 8.50 <b>Transaction ID : SB17-EX13448</b>
City San Francisco	State CA	
Zip Code 94105	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Service Fee
Purpose of Disbursement Credit Card Service Fee	001 Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 10 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period \$ 63.75 <b>Transaction ID : SB17-EX13449</b>
City San Francisco	State CA	
Zip Code 94105	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Service Fee
Purpose of Disbursement Credit Card Service Fee	001 Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	199.75
<b>TOTAL</b> This Period (last page this line number only) .....	

14020022426

**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 360 OF 431			
	<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 M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period \$ 426.70 <b>Transaction ID : SB17-EX13450</b>
City San Francisco	State CA	
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. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 12 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period \$ 63.75 <b>Transaction ID : SB17-EX13451</b>
City San Francisco	State CA	
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. Piryx</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 16 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period \$ 42.50 <b>Transaction ID : SB17-EX13452</b>
City San Francisco	State CA	
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).....	\$ 532.95
<b>TOTAL</b> This Period (last page this line number only).....	

14020022427



**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 361 OF 431	
	<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

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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 12 / 17 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 6.38
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Transaction ID : SB17-EX13453
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 12 / 18 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 291.13
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Transaction ID : SB17-EX13454
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 12 / 20 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 23.38
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Transaction ID : SB17-EX13455
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:		

SUBTOTAL of Disbursements This Page (optional).....	320.89
TOTAL This Period (last page this line number only).....	

14020022428

**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 362 OF 431			
	<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 M M / D D / Y Y - Y Y 12 / 24 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period \$ 221.00 <b>Transaction ID : SB17-EX13456</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 12 / 26 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period \$ 46.75 <b>Transaction ID : SB17-EX13457</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 12 / 30 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period \$ 54.17 <b>Transaction ID : SB17-EX13714</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) .....	\$ 321.92
<b>TOTAL</b> This Period (last page this line number only) .....	\$

14020022429

**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 363 OF 431			
	<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 M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 8.50 <b>Transaction ID : SB17-EX13458</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Category/ Type 001
Candidate Name	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	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 12 / 31 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 649.72 <b>Transaction ID : SB17-EX13459</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Category/ Type 001
Candidate Name	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	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 12 / 31 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 119.44 <b>Transaction ID : SB17-EX13460</b>
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Category/ Type 001
Candidate Name	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	Credit Card Service Fee

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	777.66
<b>TOTAL</b> This Period (last page this line number only).....	

14020022430

**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 364 OF 431			
	<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 12 / 31 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 8.50 <b>Transaction ID : SB17-EX13461</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 12 / 31 / 2013
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 42.50 <b>Transaction ID : SB17-EX13682</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. Pinnacle List Co</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2013
Mailing Address 2800 Shirlington Rd		Amount of Each Disbursement this Period 3678.29 <b>Transaction ID : SB17-EX13364</b>
City Arlington	State VA	
Zip Code 22206	Purpose of Disbursement Mail List Rental	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:	Mail List Rental

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3729.29
<b>TOTAL</b> This Period (last page this line number only) .....	

14020022431

**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 365 OF 431

<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. Dunbar Printing**

Mailing Address 1310 Ohio Ave

City Dunbar State WV Zip Code 25064

Purpose of Disbursement  
Card Printing

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

001  
Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y  
10 01 2013

Amount of Each Disbursement this Period

78.97

Transaction ID : SB17-EX13341

Card Printing

**B. Dunbar Printing**

Mailing Address 1310 Ohio Ave

City Dunbar State WV Zip Code 25064

Purpose of Disbursement  
Direct Mail

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

003  
Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y  
10 28 2013

Amount of Each Disbursement this Period

1506.79

Transaction ID : SB17-EX13383

Direct Mail

**C. Dunbar Printing**

Mailing Address 1310 Ohio Ave

City Dunbar State WV Zip Code 25064

Purpose of Disbursement  
Card Printing

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

001  
Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y  
12 02 2013

Amount of Each Disbursement this Period

5371.02

Transaction ID : SB17-EX13487

Card Printing

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

6956.78

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

14020022432

**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 Lukens Co**

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

M M / D D / Y Y Y Y  
10 28 2013

Amount of Each Disbursement this Period

10928.75

Transaction ID : SB17-EX13384

Direct Mail

**B. BB&T Financial**

Mailing Address PO Box 580340

City Charlotte State NC Zip Code 28258

Purpose of Disbursement  
CREDIT CARD PAYMENT: SEE BELOW

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  
10 01 2013

Amount of Each Disbursement this Period

12867.05

Transaction ID : SB17-EX13654

CREDIT CARD PAYMENT: SEE BELOW

**C. AT&T**

Mailing Address P.O. Box 8212

City Aurora State IL Zip Code 60572

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  
10 01 2013

Amount of Each Disbursement this Period

50.00

Transaction ID : SB17-EX13628

[MEMO ITEM]  
Data Plan

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

23795.80

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

14020022433

**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 367 OF 431

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. Exxon Mobil**

Mailing Address 5959 Las Colinas Boulevard

City State Zip Code  
Irving TX 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

M M / D D / Y Y Y Y  
10 01 2013

Amount of Each Disbursement this Period

229.16

Transaction ID : SB17-EX13629

[MEMO ITEM]

Fuel

Full Name (Last, First, Middle Initial)

**B. Giant Food**

Mailing Address 2901 S Glebe

City State Zip Code  
Arlington VA 22206

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  
10 01 2013

Amount of Each Disbursement this Period

50.00

Transaction ID : SB17-EX13630

[MEMO ITEM]

Food and Beverage

Full Name (Last, First, Middle Initial)

**C. Bob Evans**

Mailing Address 3776 S High St

City State Zip Code  
Columbus OH 43207

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  
10 01 2013

Amount of Each Disbursement this Period

27.95

Transaction ID : SB17-EX13631

[MEMO ITEM]

Food and Beverage

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

0.00

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

14020022434

**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 368 OF 431			
	<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)		Date of Disbursement
<b>A. Federal Express</b>		M M / D D / Y Y Y Y 10 01 2013
Mailing Address Box 1140		Amount of Each Disbursement this Period \$ 388.71
City Memphis	State TN	
Purpose of Disbursement Administrative/Salary/Overhead Expenses		Transaction ID : SB17-EX13632
Candidate Name		
Office Sought:	Disbursement For: 2014	[MEMO ITEM] Delivery Expense
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. Rackspace Hosting</b>		M M / D D / Y Y Y Y 10 01 2013
Mailing Address 5000 Walzem Rd		Amount of Each Disbursement this Period \$ 29.00
City San Antonio	State TX	
Purpose of Disbursement Administrative/Salary/Overhead Expenses		Transaction ID : SB17-EX13633
Candidate Name		
Office Sought:	Disbursement For: 2014	[MEMO ITEM] Email Hosting
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. USPS</b>		M M / D D / Y Y Y Y 10 01 2013
Mailing Address 1002 Lee St.		Amount of Each Disbursement this Period \$ 652.58
City Charleston	State WV	
Purpose of Disbursement Administrative/Salary/Overhead Expenses		Transaction ID : SB17-EX13634
Candidate Name		
Office Sought:	Disbursement For: 2014	[MEMO ITEM] Postage
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<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) .....	

14020022435



**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 369 OF 431
	<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. Go Mart</b>		Date of Disbursement MM / DD / YYYY 10 / 01 / 2013
Mailing Address MacCorkle Ave.		Amount of Each Disbursement this Period 134.00 Transaction ID : SB17-EX13635
City Charleston	State WV	
Zip Code 25304	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>B. Marathon Oil</b>		Date of Disbursement MM / DD / YYYY 10 / 01 / 2013
Mailing Address 703 Main St W		Amount of Each Disbursement this Period 150.56 Transaction ID : SB17-EX13636
City Ripley	State WV	
Zip Code 25271	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. Bigley Foodland Fresh</b>		Date of Disbursement MM / DD / YYYY 10 / 01 / 2013
Mailing Address 10 Spring Street		Amount of Each Disbursement this Period 11.00 Transaction ID : SB17-EX13637
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] Food and Beverage

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

14020022436

**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 370 OF 431			
	<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. Walmart Super Center</b>		Date of Disbursement MM / DD / YYYY 10 / 01 / 2013
Mailing Address Rhl Blvd.		Amount of Each Disbursement this Period 257.05 Transaction ID : SB17-EX13638
City South Charleston	State WV	
Zip Code 25309	Purpose of Disbursement Administrative/Salary/Overhead Expenses	[MEMO ITEM] Paper Supplies
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. Constant Contact</b>		Date of Disbursement MM / DD / YYYY 10 / 01 / 2013
Mailing Address 1601 Trapelp Rd. Suite 329		Amount of Each Disbursement this Period 75.00 Transaction ID : SB17-EX13639
City Waltham	State MA	
Zip Code 02451	Purpose of Disbursement Advertising Expenses	[MEMO ITEM] Email Newsletter
Candidate Name	004 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. Pilot Travel Center</b>		Date of Disbursement MM / DD / YYYY 10 / 01 / 2013
Mailing Address 16921 Halfway Blvd		Amount of Each Disbursement this Period 84.65 Transaction ID : SB17-EX13640
City Hagerstown	State MN	
Zip Code 21740	Purpose of Disbursement Travel Expenses	[MEMO ITEM] Fuel
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	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022437

**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 371 OF 431	
	<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. Accuconference.com</b>		Date of Disbursement MM / DD / YYYY 10 / 01 / 2013
Mailing Address 2360 Corporate Cir		Amount of Each Disbursement this Period \$ 2.44 Transaction ID : SB17-EX13641
City Henderson	State NV	
Zip Code 89074	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] Conference Call

Full Name (Last, First, Middle Initial) <b>B. Hussons Pizza</b>		Date of Disbursement MM / DD / YYYY 10 / 01 / 2013
Mailing Address PO Box 299		Amount of Each Disbursement this Period \$ 24.71 Transaction ID : SB17-EX13642
City Scott Depot	State WV	
Zip Code 25560	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

Full Name (Last, First, Middle Initial) <b>c. Bridge Road Bistro</b>		Date of Disbursement MM / DD / YYYY 10 / 01 / 2013
Mailing Address 915 Bridge Rd		Amount of Each Disbursement this Period \$ 1050.04 Transaction ID : SB17-EX13643
City Charleston	State WV	
Zip Code 25314	Purpose of Disbursement Campaign Event Expenses	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:	[MEMO ITEM] Food and Beverage

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022438

**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 372 OF 431			
	<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. Ampco Parking</b>		Date of Disbursement MM / DD / YYYY 10 / 01 / 2013
Mailing Address 4 Seagate		Amount of Each Disbursement this Period 2.00 Transaction ID : SB17-EX13644
City Toledo	State OH	
Zip Code 43604	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>B. Benton Grove Bed &amp; Banquets</b>		Date of Disbursement MM / DD / YYYY 10 / 01 / 2013
Mailing Address 154 Benton Grove Rd		Amount of Each Disbursement this Period 3181.50 Transaction ID : SB17-EX13645
City Morgantown	State WV	
Zip Code 26508	Purpose of Disbursement Campaign Event Expenses	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:	[MEMO ITEM] Facility Rental & Catering

Full Name (Last, First, Middle Initial) <b>c. McGuffey Tents</b>		Date of Disbursement MM / DD / YYYY 10 / 01 / 2013
Mailing Address 160 Dixie St		Amount of Each Disbursement this Period 1429.51 Transaction ID : SB17-EX13646
City Williamstown	State WV	
Zip Code 26187	Purpose of Disbursement Campaign Event Expenses	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:	[MEMO ITEM] Tent Rental

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

14020022439

**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 373 OF 431			
	<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. Dunbar Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 1310 Ohio Ave		Amount of Each Disbursement this Period 2610.25
City Dunbar	State WV Zip Code 25064	
Purpose of Disbursement Solicitation and Fundraising Expenses	Candidate Name	Transaction ID : <b>SB17-EX13647</b>
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	[MEMO ITEM] Direct Mail
State: District:		

Full Name (Last, First, Middle Initial) <b>B. United Air</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address Yeager Airport		Amount of Each Disbursement this Period 844.40
City Charleston	State WV Zip Code 25311	
Purpose of Disbursement Travel Expenses	Candidate Name	Transaction ID : <b>SB17-EX13648</b>
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:		

Full Name (Last, First, Middle Initial) <b>c. USAirways</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address Yeager Airport		Amount of Each Disbursement this Period 1251.70
City Charleston	State WV Zip Code 25311	
Purpose of Disbursement Travel Expenses	Candidate Name	Transaction ID : <b>SB17-EX13649</b>
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).....	

14020022440

**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 374 OF 431
	<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)		Date of Disbursement
<b>A. Safeway Store</b>		M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 1525 Wilson Blvd.		Amount of Each Disbursement this Period
City	State	Zip Code
Arlington	VA	22206
Purpose of Disbursement	001 Category/ Type	37.95
Administrative/Salary/Overhead Expenses		Transaction ID : SB17-EX13650
Candidate Name		[MEMO ITEM] Food and Beverage
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>B. Sheetz</b>		M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 1220 Johnson Ave.		Amount of Each Disbursement this Period
City	State	Zip Code
Bridgeport	WV	26330
Purpose of Disbursement	002 Category/ Type	127.60
Travel Expenses		Transaction ID : SB17-EX13651
Candidate Name		[MEMO ITEM] Fuel
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
<b>C. BP Oil</b>		M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address 1064 National Highway		Amount of Each Disbursement this Period
City	State	Zip Code
Cumberland	MD	21502
Purpose of Disbursement	002 Category/ Type	57.29
Travel Expenses		Transaction ID : SB17-EX13652
Candidate Name		[MEMO ITEM] Fuel
Office Sought:	Disbursement For: 2014	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<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).....	

14020022441

**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 375 OF 431			
	<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. Ronald Reagan National Airport</b>			Date of Disbursement M M / D D / Y Y Y Y 10 01 2013
Mailing Address 2401 Smith Blvd			Amount of Each Disbursement this Period 108.00
City Arlington	State VA	Zip Code 22202	
Purpose of Disbursement Travel Expenses	Candidate Name		Transaction ID : <b>SB17-EX13653</b>
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:	Category/Type 002		[MEMO ITEM] Parking

Full Name (Last, First, Middle Initial) <b>B. BB&amp;T Financial</b>			Date of Disbursement M M / D D / Y Y Y Y 11 01 2013
Mailing Address PO Box 580340			Amount of Each Disbursement this Period 10064.55
City Charlotte	State NC	Zip Code 28258	
Purpose of Disbursement Credit Card Paid by BB&T Financial	Candidate Name		Transaction ID : <b>SB17-EX13681</b>
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:	Category/Type 001		Credit Card Paid by BB&T Financial

Full Name (Last, First, Middle Initial) <b>c. Go Mart</b>			Date of Disbursement M M / D D / Y Y Y Y 11 01 2013
Mailing Address MacCorkle Ave.			Amount of Each Disbursement this Period 216.29
City Charleston	State WV	Zip Code 25304	
Purpose of Disbursement Travel Expenses	Candidate Name		Transaction ID : <b>SB17-EX13655</b>
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:	Category/Type 002		[MEMO ITEM] Fuel

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	10064.55
<b>TOTAL</b> This Period (last page this line number only).....	

14020022442

**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 376 OF 431
	<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. Exxon Mobil</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address 5959 Las Colinas Boulevard		Amount of Each Disbursement this Period 307.95 Transaction ID : SB17-EX13656
City Irving	State TX Zip Code 75039	
Purpose of Disbursement Travel Expenses	Candidate Name	002 Category/ Type
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. Office Max</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address 228 RHL Blvd.		Amount of Each Disbursement this Period 73.13 Transaction ID : SB17-EX13657
City South Charleston	State WV Zip Code 25309	
Purpose of Disbursement Administrative/Salary/Overhead Expenses	Candidate Name	001 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	[MEMO ITEM] Toner	

Full Name (Last, First, Middle Initial) <b>c. Rackspace Hosting</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address 5000 Walzem Rd		Amount of Each Disbursement this Period 29.00 Transaction ID : SB17-EX13658
City San Antonio	State TX Zip Code 78218	
Purpose of Disbursement Administrative/Salary/Overhead Expenses	Candidate Name	001 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	[MEMO ITEM] Email Hosting	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

14020022443



**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 377 OF 431

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. Holl's Chocolates Inc.**

Mailing Address 2001 Grand Central Ave

City Vienna State WV Zip Code 26105

Purpose of Disbursement  
Campaign Event Expenses

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

007  
Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y  
11 / 01 / 2013

Amount of Each Disbursement this Period

85.00

Transaction ID : SB17-EX13659

[MEMO ITEM]  
Host Gifts

Full Name (Last, First, Middle Initial)

**B. Marathon Oil**

Mailing Address 703 Main St W

City Ripley State WV Zip Code 25271

Purpose of Disbursement  
Travel Expenses

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

002  
Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y  
11 / 01 / 2013

Amount of Each Disbursement this Period

41.19

Transaction ID : SB17-EX13660

[MEMO ITEM]  
Fuel

Full Name (Last, First, Middle Initial)

**C. 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:

004  
Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y  
11 / 01 / 2013

Amount of Each Disbursement this Period

75.00

Transaction ID : SB17-EX13661

[MEMO ITEM]  
Email Newsletter

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

0.00

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

14020022444

**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 378 OF 431
	<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. Charleston Blueprint</b>		Date of Disbursement MM / DD / YYYY 11 / 01 / 2013
Mailing Address 1203 Virginia St E		Amount of Each Disbursement this Period \$ 172.53 Transaction ID : SB17-EX13662
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] Printing Supplies

Full Name (Last, First, Middle Initial) <b>B. Signs By Dan</b>		Date of Disbursement MM / DD / YYYY 11 / 01 / 2013
Mailing Address 5217 Monta Vista Dr		Amount of Each Disbursement this Period \$ 96.40 Transaction ID : SB17-EX13663
City Cross Lanes	State WV	
Zip Code 25313	Purpose of Disbursement Campaign Event Expenses	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:	[MEMO ITEM] Event Signage

Full Name (Last, First, Middle Initial) <b>c. Home Depot</b>		Date of Disbursement MM / DD / YYYY 11 / 01 / 2013
Mailing Address 2320 Legge Blvd.		Amount of Each Disbursement this Period \$ 21.70 Transaction ID : SB17-EX13664
City Winchester	State VA	
Zip Code 22601	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] Cable Ties

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

14020022445

**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 379 OF 431			
	<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. Walmart Super Center</b>		Date of Disbursement M M / D D / Y Y Y Y 11 01 2013
Mailing Address Rhl Blvd.		Amount of Each Disbursement this Period 222.69
City South Charleston	State WV	
Zip Code 25309	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX13665
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] Paper Supplies
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kroger</b>		Date of Disbursement M M / D D / Y Y Y Y 11 01 2013
Mailing Address MacCorkle Ave.		Amount of Each Disbursement this Period 100.00
City South Charleston	State WV	
Zip Code 25309	Purpose of Disbursement Travel Expenses	Transaction ID : SB17-EX13666
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] Fuel
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Cj Maggies</b>		Date of Disbursement M M / D D / Y Y Y Y 11 01 2013
Mailing Address 309 Davis Ave.		Amount of Each Disbursement this Period 55.09
City Elkins	State WV	
Zip Code 26241	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX13667
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] Food and Beverage
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022446

**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 380 OF 431	
	<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. Breckers Balloon Haven</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address PO Box 5006		Amount of Each Disbursement this Period 503.96 Transaction ID : SB17-EX13668
City Charleston	State WV	
Zip Code 25361	Purpose of Disbursement Campaign Event Expenses	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:	[MEMO ITEM] Event Decorations

Full Name (Last, First, Middle Initial) <b>B. Accuconference.com</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address 2360 Corporate Cir		Amount of Each Disbursement this Period 3.49 Transaction ID : SB17-EX13669
City Henderson	State NV	
Zip Code 89074	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] Conference Call

Full Name (Last, First, Middle Initial) <b>C. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address 1002 Lee St.		Amount of Each Disbursement this Period 1426.00 Transaction ID : SB17-EX13670
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] Postage

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022447

**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 381 OF 431			
	<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. Little General Store</b>		Date of Disbursement MM / DD / YYYY 11 / 01 / 2013
Mailing Address 4008 Malden Dr		Amount of Each Disbursement this Period 51.32 Transaction ID : SB17-EX13671
City Charleston	State WV	
Zip Code 25306	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>B. Loves Travel Stop</b>		Date of Disbursement MM / DD / YYYY 11 / 01 / 2013
Mailing Address 3875 Charleston Rd		Amount of Each Disbursement this Period 141.63 Transaction ID : SB17-EX13672
City Ripley	State WV	
Zip Code 25271	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. The Greenbrier</b>		Date of Disbursement MM / DD / YYYY 11 / 01 / 2013
Mailing Address 300 West Main Street		Amount of Each Disbursement this Period 425.40 Transaction ID : SB17-EX13673
City White Sulphursprings	State WV	
Zip Code 24986	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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022448

**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 382 OF 431
	<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. Dunbar Printing</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address 1310 Ohio Ave		Amount of Each Disbursement this Period \$ 4180.11 Transaction ID : SB17-EX13674
City Dunbar	State WV Zip Code 25064	
Purpose of Disbursement Solicitation and Fundraising Expenses	Candidate Name	Category/Type 003
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	[MEMO ITEM] Direct Mail	

Full Name (Last, First, Middle Initial) <b>B. Delta</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address Yeager Airport		Amount of Each Disbursement this Period \$ 139.80 Transaction ID : SB17-EX13675
City Charleston	State WV Zip Code 25311	
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] Airfare	

Full Name (Last, First, Middle Initial) <b>c. United Air</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 01 / 2013
Mailing Address Yeager Airport		Amount of Each Disbursement this Period \$ 845.90 Transaction ID : SB17-EX13677
City Charleston	State WV Zip Code 25311	
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] Airfare	

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

14020022449

**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 383 OF 431
	<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. Chick Fil A</b>		Date of Disbursement MM / DD / YYYY 11 / 01 / 2013
Mailing Address 5200 Buffington Rd		Amount of Each Disbursement this Period 61.50
City Atlanta	State GA	
Zip Code 30349	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX13678
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. Dulles Greenway</b>		Date of Disbursement MM / DD / YYYY 11 / 01 / 2013
Mailing Address 45305 Catalina Ct		Amount of Each Disbursement this Period 5.10
City Sterling	State VA	
Zip Code 20166	Purpose of Disbursement Travel Expenses	Transaction ID : SB17-EX13679
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] Toll
State: District:		

Full Name (Last, First, Middle Initial) <b>c. USAirways</b>		Date of Disbursement MM / DD / YYYY 11 / 01 / 2013
Mailing Address Yeager Airport		Amount of Each Disbursement this Period 784.37
City Charleston	State WV	
Zip Code 25311	Purpose of Disbursement Travel Expenses	Transaction ID : SB17-EX13680
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).....	

14020022450

**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 384 OF 431
	<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. BB&amp;T Financial</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address PO Box 580340		Amount of Each Disbursement this Period 9117.52 Transaction ID : SB17-EX13711
City Charlotte	State NC	
Zip Code 28258		CREDIT CARD PAYMENT: SEE BELOW
Purpose of Disbursement CREDIT CARD PAYMENT: SEE BELOW	Category/ Type 001	
Candidate Name	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>B. USPS</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address 1002 Lee St.		Amount of Each Disbursement this Period 1441.45 Transaction ID : SB17-EX13686
City Charleston	State WV	
Zip Code 25301		[MEMO ITEM] Postage
Purpose of Disbursement Administrative/Salary/Overhead Expenses	Category/ Type 001	
Candidate Name	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Federal Express</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address Box 1140		Amount of Each Disbursement this Period 374.52 Transaction ID : SB17-EX13687
City Memphis	State TN	
Zip Code 38101		[MEMO ITEM] Delivery Expense
Purpose of Disbursement Administrative/Salary/Overhead Expenses	Category/ Type 001	
Candidate Name	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9117.52
<b>TOTAL</b> This Period (last page this line number only).....	

14020022451



**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 385 OF 431	
	<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

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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 M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address 5959 Las Colinas Boulevard		Amount of Each Disbursement this Period 157.12
City Irving	State TX Zip Code 75039	
Purpose of Disbursement Travel Expenses	Candidate Name	Transaction ID : SB17-EX13688
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>B. Rackspace Hosting</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address 5000 Walzem Rd		Amount of Each Disbursement this Period 29.00
City San Antonio	State TX Zip Code 78218	
Purpose of Disbursement Administrative/Salary/Overhead Expenses	Candidate Name	Transaction ID : SB17-EX13689
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] Email Hosting

Full Name (Last, First, Middle Initial) <b>C. Go Mart</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address MacCorkle Ave.		Amount of Each Disbursement this Period 189.06
City Charleston	State WV Zip Code 25304	
Purpose of Disbursement Travel Expenses	Candidate Name	Transaction ID : SB17-EX13690
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

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

14020022452

**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 386 OF 431
	<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. Constant Contact</b>		Date of Disbursement MM / DD / YYYY 12 / 02 / 2013
Mailing Address 1601 Trapelp Rd. Suite 329		Amount of Each Disbursement this Period 75.00 <b>Transaction ID : SB17-EX13691</b>
City Waltham	State MA	
Purpose of Disbursement Advertising Expenses	Zip Code 02451	[MEMO ITEM] Email Newsletter
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	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Office Max</b>		Date of Disbursement MM / DD / YYYY 12 / 02 / 2013
Mailing Address 228 RHL Blvd.		Amount of Each Disbursement this Period 27.68 <b>Transaction ID : SB17-EX13692</b>
City South Charleston	State WV	
Purpose of Disbursement Administrative/Salary/Overhead Expenses	Zip Code 25309	[MEMO ITEM] Envelopes
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. Sheetz</b>		Date of Disbursement MM / DD / YYYY 12 / 02 / 2013
Mailing Address 1220 Johnson Ave.		Amount of Each Disbursement this Period 68.26 <b>Transaction ID : SB17-EX13693</b>
City Bridgeport	State WV	
Purpose of Disbursement Travel Expenses	Zip Code 26330	[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) .....	

14020022453

**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 387 OF 431			
	<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)  
**A. Al's Pizza**

Mailing Address 12911 Clear Spring Rd

City Clear Spring State MD Zip Code 21722

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  
12 02 2013

Amount of Each Disbursement this Period  
77.83

Transaction ID : SB17-EX13694

**[MEMO ITEM]**  
Food and Beverage

Full Name (Last, First, Middle Initial)  
**B. Crystal City Marriott**

Mailing Address 1999 Jefferson Davis Hwy

City Arlington State VA Zip Code 22202

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  
12 02 2013

Amount of Each Disbursement this Period  
39.95

Transaction ID : SB17-EX13695

**[MEMO ITEM]**  
Food and Beverage

Full Name (Last, First, Middle Initial)  
**c. Capitol Host**

Mailing Address B-339B Rayburn House Office Bldg

City Washington State DC Zip Code 20515

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  
12 02 2013

Amount of Each Disbursement this Period  
215.35

Transaction ID : SB17-EX13696

**[MEMO ITEM]**  
Food and Beverage

**SUBTOTAL** of Disbursements This Page (optional)..... 0.00

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

14020022454

**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**

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  
12 02 2013

Amount of Each Disbursement this Period

2766.60

Transaction ID : SB17-EX13697

[MEMO ITEM]  
Airfare

Full Name (Last, First, Middle initial)

**B. Delta**

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  
12 02 2013

Amount of Each Disbursement this Period

761.80

Transaction ID : SB17-EX13698

[MEMO ITEM]  
Airfare

Full Name (Last, First, Middle Initial)

**C. The Phoenixian**

Mailing Address 6000 E Camelback Rd

City Scottsdale State AZ Zip Code 85251

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  
12 02 2013

Amount of Each Disbursement this Period

63.53

Transaction ID : SB17-EX13699

[MEMO ITEM]  
Food and Beverage

SUBTOTAL of Disbursements This Page (optional)..... 0.00

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

14020022455

**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. Dunbar Printing**

Mailing Address 1310 Ohio Ave

City Dunbar State WV Zip Code 25064

Purpose of Disbursement  
Campaign Event Expenses

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

007  
Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y  
12 02 2013

Amount of Each Disbursement this Period

212.10

Transaction ID : SB17-EX13700

[MEMO ITEM]  
Invitation Printing

**B. Los Agaves**

Mailing Address 508 3rd Ave

City Charleston State WV Zip Code 25303

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:

001  
Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y  
12 02 2013

Amount of Each Disbursement this Period

38.81

Transaction ID : SB17-EX13701

[MEMO ITEM]  
Food and Beverage

**C. Aladdin's**

Mailing Address 3024 Chesterfield Ave SE

City Charleston State WV Zip Code 25304

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:

001  
Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y  
12 02 2013

Amount of Each Disbursement this Period

29.97

Transaction ID : SB17-EX13702

[MEMO ITEM]  
Food and Beverage

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

0.00

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

14020022456

**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 390 OF 431

<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. Charlie Palmer Steakhouse</b>		Date of Disbursement MM / DD / Y Y Y Y 12 / 02 / 2013
Mailing Address 101 Constitution Ave NW		Amount of Each Disbursement this Period 1785.55 Transaction ID : SB17-EX13703
City Washington	State DC	
Purpose of Disbursement Campaign Event Expenses	Candidate Name	007 Category/ Type
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>B. Bob Evans</b>		Date of Disbursement MM / DD / Y Y Y Y 12 / 02 / 2013
Mailing Address 3776 S High St		Amount of Each Disbursement this Period 45.45 Transaction ID : SB17-EX13704
City Columbus	State OH	
Purpose of Disbursement Administrative/Salary/Overhead Expenses	Candidate Name	001 Category/ Type
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. Sonoma</b>		Date of Disbursement MM / DD / Y Y Y Y 12 / 02 / 2013
Mailing Address 223 Pennsylvania Ave SE		Amount of Each Disbursement this Period 127.00 Transaction ID : SB17-EX13705
City Washington	State DC	
Purpose of Disbursement Administrative/Salary/Overhead Expenses	Candidate Name	001 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	[MEMO ITEM] Food and Beverage	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

1402002457

**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 391 OF 431			
	<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. AT&amp;T</b>		Date of Disbursement M M / D D / Y Y Y Y 12 02 2013
Mailing Address P.O. Box 8212		Amount of Each Disbursement this Period 50.00
City Aurora	State IL	
Purpose of Disbursement Administrative/Salary/Overhead Expenses		Transaction ID : <b>SB17-EX13706</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) Primary 2014	[MEMO ITEM] Data Plan
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Yeager Airport</b>		Date of Disbursement M M / D D / Y Y Y Y 12 02 2013
Mailing Address 100 Airport Rd		Amount of Each Disbursement this Period 40.00
City Charleston	State WV	
Purpose of Disbursement Travel Expenses		Transaction ID : <b>SB17-EX13707</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) Primary 2014	[MEMO ITEM] Parking
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Amtrak</b>		Date of Disbursement M M / D D / Y Y Y Y 12 02 2013
Mailing Address 50 Massachusetts Ave. NE		Amount of Each Disbursement this Period 125.00
City Washington	State DC	
Purpose of Disbursement Travel Expenses		Transaction ID : <b>SB17-EX13708</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) Primary 2014	[MEMO ITEM] Train Tickets
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022458

**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. Uber**

Mailing Address 800 Market St

City San Francisco State CA Zip Code 94102

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  
12 02 2013

Amount of Each Disbursement this Period

105.00

Transaction ID : SB17-EX13709

**[MEMO ITEM]**  
Taxi

Full Name (Last, First, Middle Initial)

**B. The Phoenician**

Mailing Address 6000 E Camelback Rd

City Scottsdale State AZ Zip Code 85251

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  
12 02 2013

Amount of Each Disbursement this Period

271.49

Transaction ID : SB17-EX13710

**[MEMO ITEM]**  
Lodging

Full Name (Last, First, Middle Initial)

**c. The Endicott Group**

Mailing Address 209 Pennsylvania Ave SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
PAYMENT: SEE BELOW

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  
10 01 2013

Amount of Each Disbursement this Period

13497.30

Transaction ID : SB17-EX13342

PAYMENT: SEE BELOW

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

13497.30

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

14020022459



**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. The Endicott Group**

Mailing Address 209 Pennsylvania Ave SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Fundraising Retainer

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

003  
Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y  
10 01 2013

Amount of Each Disbursement this Period

10000.00

Transaction ID : SB17-EX13343

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. The Endicott Group**

Mailing Address 209 Pennsylvania Ave SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Taxi Fare

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

003  
Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y  
10 01 2013

Amount of Each Disbursement this Period

108.50

Transaction ID : SB17-EX13344

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. United Air**

Mailing Address Yeager Airport

City Charleston State WV Zip Code 25311

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

003  
Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y  
10 01 2013

Amount of Each Disbursement this Period

3112.10

Transaction ID : SB17-EX13345

[MEMO ITEM]

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

0.00

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

14020022460

**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**

Mailing Address Yeager Airport

City Charleston State WV Zip Code 25311

Purpose of Disbursement  
Airfare

Candidate Name

003  
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  
10 01 2013

Amount of Each Disbursement this Period

207.80

Transaction ID : SB17-EX13346

[MEMO ITEM]

**B. Delta**

Mailing Address Yeager Airport

City Charleston State WV Zip Code 25311

Purpose of Disbursement  
Airfare

Candidate Name

003  
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  
10 01 2013

Amount of Each Disbursement this Period

68.90

Transaction ID : SB17-EX13347

[MEMO ITEM]

**c. The Endicott Group**

Mailing Address 209 Pennsylvania Ave SE

City Washington State DC Zip Code 20003

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

M M / D D / Y Y Y Y  
11 04 2013

Amount of Each Disbursement this Period

8247.22

Transaction ID : SB17-EX13592

PAYMENT: SEE BELOW

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

8247.22

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

14020022461

**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 Washington State DC Zip Code 20003

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:

Date of Disbursement

M M / D D / Y Y Y Y  
11 / 04 / 2013

Amount of Each Disbursement this Period

5000.00

Transaction ID : SB17-EX13593

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. FedEx**

Mailing Address PO Box 371461

City Pittsburgh State PA Zip Code 15250

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:

Date of Disbursement

M M / D D / Y Y Y Y  
11 / 04 / 2013

Amount of Each Disbursement this Period

33.99

Transaction ID : SB17-EX13594

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. United Air**

Mailing Address Yeager Airport

City Charleston State WV Zip Code 25311

Purpose of Disbursement  
Airfare

Candidate Name

003  
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  
11 / 04 / 2013

Amount of Each Disbursement this Period

706.90

Transaction ID : SB17-EX13595

[MEMO ITEM]

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

0.00

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

14020022462

**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**

Mailing Address Yeager Airport

City Charleston State WV Zip Code 25311

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 04 / 2013

Amount of Each Disbursement this Period

324.80

Transaction ID : SB17-EX13596

[MEMO ITEM]

003  
Category/  
Type

**B. Omni Berkshire**

Mailing Address 21 E 52nd St

City New York State NY Zip Code 10022

Purpose of Disbursement  
Lodging

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 04 / 2013

Amount of Each Disbursement this Period

461.35

Transaction ID : SB17-EX13597

[MEMO ITEM]

003  
Category/  
Type

**C. Capitol Hill Club**

Mailing Address 300 First St.

City Washington State DC Zip Code 20003

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  
11 / 04 / 2013

Amount of Each Disbursement this Period

70.09

Transaction ID : SB17-EX13598

[MEMO ITEM]

003  
Category/  
Type

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

0.00

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

14020022463

**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 397 OF 431
	<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. Fairmont Copley Plaza Hotel</b>		Date of Disbursement M M / D D / Y Y Y Y 11 04 2013
Mailing Address 138 St James Ave		Amount of Each Disbursement this Period 820.52
City Boston	State MA	
Zip Code 02116	Purpose of Disbursement Lodging	Transaction ID : <b>SB17-EX13599</b>
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	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The Phoenician</b>		Date of Disbursement M M / D D / Y Y Y Y 11 04 2013
Mailing Address 6000 E Camelback Rd		Amount of Each Disbursement this Period 575.18
City Scottsdale	State AZ	
Zip Code 85251	Purpose of Disbursement Lodging	Transaction ID : <b>SB17-EX13600</b>
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	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. The Endicott Group</b>		Date of Disbursement M M / D D / Y Y Y Y 11 04 2013
Mailing Address 209 Pennsylvania Ave SE		Amount of Each Disbursement this Period 254.39
City Washington	State DC	
Zip Code 20003	Purpose of Disbursement Taxi Fare	Transaction ID : <b>SB17-EX13601</b>
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	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022464

**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 398 OF 431			
	<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 12 / 11 / 2013
Mailing Address 209 Pennsylvania Ave SE		Amount of Each Disbursement this Period 9254.32 <b>Transaction ID : SB17-EX13509</b>
City Washington	State DC	
Zip Code 20003	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:	PAYMENT: SEE BELOW

Full Name (Last, First, Middle Initial) <b>B. The Endicott Group</b>		Date of Disbursement MM / DD / YYYY 12 / 11 / 2013
Mailing Address 209 Pennsylvania Ave SE		Amount of Each Disbursement this Period 5000.00 <b>Transaction ID : SB17-EX13510</b> [MEMO ITEM]
City Washington	State DC	
Zip Code 20003	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:	

Full Name (Last, First, Middle Initial) <b>C. Delta</b>		Date of Disbursement MM / DD / YYYY 12 / 11 / 2013
Mailing Address Yeager Airport		Amount of Each Disbursement this Period 471.80 <b>Transaction ID : SB17-EX13511</b> [MEMO ITEM]
City Charleston	State WV	
Zip Code 25311	Purpose of Disbursement Airfare	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).....	9254.32
<b>TOTAL</b> This Period (last page this line number only).....	

14020022465

**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 399 OF 431

<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. USAirways**

Mailing Address Yeager Airport

City Charleston State WV Zip Code 25311

Purpose of Disbursement  
Airfare

Candidate Name

003  
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  
12 / 11 / 2013

Amount of Each Disbursement this Period

409.80

Transaction ID : SB17-EX13512

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. FedEx**

Mailing Address PO Box 371461

City Pittsburgh State PA Zip Code 15250

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:

Date of Disbursement

M M / D D / Y Y Y Y  
12 / 11 / 2013

Amount of Each Disbursement this Period

17.07

Transaction ID : SB17-EX13513

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. FireSide Grille**

Mailing Address 4170 W Virginia 34

City Hurricane State WV Zip Code 25526

Purpose of Disbursement  
Food and Beverage

Candidate Name

003  
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  
12 / 11 / 2013

Amount of Each Disbursement this Period

103.01

Transaction ID : SB17-EX13514

[MEMO ITEM]

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

0.00

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

14020022466

**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 400 OF 431
	<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)  
**A. Uber**

Mailing Address **800 Market St**

City **San Francisco** State **CA** Zip Code **94102**

Purpose of Disbursement **Taxi**

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  
**12 11 2013**

Amount of Each Disbursement this Period  
**135.00**

Transaction ID : **SB17-EX13515**

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)  
**B. Coronado Club**

Mailing Address **919 Milam St**

City **Houston** State **TX** Zip Code **77002**

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  
M M / D D / Y Y Y Y  
**12 11 2013**

Amount of Each Disbursement this Period  
**2003.90**

Transaction ID : **SB17-EX13516**

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)  
**c. Omni Berkshire**

Mailing Address **21 E 52nd St**

City **New York** State **NY** Zip Code **10022**

Purpose of Disbursement **Lodging**

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  
**12 11 2013**

Amount of Each Disbursement this Period  
**966.59**

Transaction ID : **SB17-EX13517**

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional)..... **0.00**

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

14020022467



**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 401 OF 431
	<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. The Endicott Group</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 11 / 2013
Mailing Address 209 Pennsylvania Ave SE		Amount of Each Disbursement this Period \$ 147.15
City Washington State DC Zip Code 20003	Transaction ID : SB17-EX13518	
Purpose of Disbursement Taxi Fare	Candidate Name	[MEMO ITEM]
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:	Category/Type 003	

Full Name (Last, First, Middle Initial) <b>B. National Finance Center</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address PO Box 790341		Amount of Each Disbursement this Period \$ 522.22
City Saint Louis State MO Zip Code 63179	Transaction ID : SB17-EX13338	
Purpose of Disbursement Insurance Expense	Candidate Name	Insurance Expense
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:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>C. National Finance Center</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2013
Mailing Address PO Box 790341		Amount of Each Disbursement this Period \$ 522.22
City Saint Louis State MO Zip Code 63179	Transaction ID : SB17-EX13386	
Purpose of Disbursement Insurance Expense	Candidate Name	Insurance Expense
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:	Category/Type 001	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1044.44
<b>TOTAL</b> This Period (last page this line number only).....	

14020022468

**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 402 OF 431			
	<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. National Finance Center</b>		Date of Disbursement MM / DD / YYYY 11 / 29 / 2013
Mailing Address PO Box 790341		Amount of Each Disbursement this Period 522.22 <b>Transaction ID : SB17-EX13479</b>
City Saint Louis	State MO	
Zip Code 63179	Purpose of Disbursement Insurance Expense	Insurance Expense
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 10 / 15 / 2013
Mailing Address 3960 Stillman Parkway		Amount of Each Disbursement this Period 20993.17 <b>Transaction ID : SB17-EX13543</b>
City Glen Allen	State VA	
Zip Code 25060	Purpose of Disbursement PAYROLL: SEE BELOW	PAYROLL: SEE BELOW
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. Alison Bibbee</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2013
Mailing Address 1210 Dudley Road		Amount of Each Disbursement this Period 1805.99 <b>Transaction ID : SB17-EX13535</b>
City Charleston	State WV	
Zip Code 25314	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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	21515.39
<b>TOTAL</b> This Period (last page this line number only).....	

14020022469

**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 403 OF 431			
	<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. Alyssa Clevenger</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2013
Mailing Address 752 Rocky Moore Rd		Amount of Each Disbursement this Period 1606.93 Transaction ID : SB17-EX13536
City Charleston	State WV	
Zip Code 25309	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 10 / 15 / 2013
Mailing Address 307 Winwood Dr.		Amount of Each Disbursement this Period 2343.01 Transaction ID : SB17-EX13537
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. Christopher Hansen</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2013
Mailing Address 1009A Bridge Rd		Amount of Each Disbursement this Period 5184.11 Transaction ID : SB17-EX13538
City Charleston	State WV	
Zip Code 25339	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) .....	

14020022470

**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 404 OF 431
	<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. Mary Payne</b>		Date of Disbursement M M / D D / Y Y Y Y 10 15 2013
Mailing Address 1414 Loucen Heights Road		Amount of Each Disbursement this Period 621.87
City Charleston	State WV Zip Code 25314	
Purpose of Disbursement Administrative/Salary/Overhead Expenses	001	Transaction ID : <b>SB17-EX13539</b>
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	[MEMO ITEM] Net Salary
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Rebecca Trump</b>		Date of Disbursement M M / D D / Y Y Y Y 10 15 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	001	Transaction ID : <b>SB17-EX13540</b>
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	[MEMO ITEM] Net Salary
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Anne White</b>		Date of Disbursement M M / D D / Y Y Y Y 10 15 2013
Mailing Address 2610 Roselane Dr		Amount of Each Disbursement this Period 1134.59
City Charleston	State WV Zip Code 25302	
Purpose of Disbursement Administrative/Salary/Overhead Expenses	001	Transaction ID : <b>SB17-EX13541</b>
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	[MEMO ITEM] Net Salary
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022471

**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 405 OF 431
	<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 M M / D D / Y Y Y Y 10 15 2013
Mailing Address 3960 Stillman Parkway		Amount of Each Disbursement this Period 7106.33
City Glen Allen	State VA	
Purpose of Disbursement Administrative/Salary/Overhead Expenses	Candidate Name	001 Category/ Type
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>[MEMO ITEM]</b> Withholding Taxes	

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 10 15 2013
Mailing Address 3960 Stillman Parkway		Amount of Each Disbursement this Period 74.57
City Glen Allen	State VA	
Purpose of Disbursement Payroll Service Fee	Candidate Name	001 Category/ Type
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>c. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 10 31 2013
Mailing Address 3960 Stillman Parkway		Amount of Each Disbursement this Period 24444.81
City Glen Allen	State VA	
Purpose of Disbursement PAYROLL: SEE BELOW	Candidate Name	001 Category/ Type
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	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	24519.38
<b>TOTAL</b> This Period (last page this line number only).....	

14020022472

**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 406 OF 431
	<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 10 / 31 / 2013
Mailing Address 1210 Dudley Road		Amount of Each Disbursement this Period 4118.84 Transaction ID : SB17-EX13544
City Charleston	State WV	
Zip Code 25314	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Category/ Type 001
Candidate Name		[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: _____	

Full Name (Last, First, Middle Initial) <b>B. Alyssa Clevenger</b>		Date of Disbursement MM / DD / YYYY 10 / 31 / 2013
Mailing Address 752 Rocky Moore Rd		Amount of Each Disbursement this Period 1606.92 Transaction ID : SB17-EX13545
City Charleston	State WV	
Zip Code 25309	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Category/ Type 001
Candidate Name		[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: _____	

Full Name (Last, First, Middle Initial) <b>C. Charles Flannery</b>		Date of Disbursement MM / DD / YYYY 10 / 31 / 2013
Mailing Address 307 Winwood Dr.		Amount of Each Disbursement this Period 2343.01 Transaction ID : SB17-EX13546
City Charleston	State WV	
Zip Code 25302	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Category/ Type 001
Candidate Name		[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: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022473

**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 407 OF 431
	<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**

**A. Christopher Hansen**

Full Name (Last, First, Middle Initial)

Mailing Address 1009A Bridge Rd

City Charleston State WV Zip Code 25339

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  
10 / 31 / 2013

Amount of Each Disbursement this Period 5184.11

Transaction ID : SB17-EX13547

**[MEMO ITEM]**  
Net Salary

**B. Mary Payne**

Full Name (Last, First, Middle Initial)

Mailing Address 1414 Loudon Heights Road

City Charleston State WV Zip Code 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  
10 / 31 / 2013

Amount of Each Disbursement this Period 621.88

Transaction ID : SB17-EX13548

**[MEMO ITEM]**  
Net Salary

**c. Rebecca Trump**

Full Name (Last, First, Middle Initial)

Mailing Address 20007 Silverbell Drive

City Morgantown State WV Zip Code 26505

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  
10 / 31 / 2013

Amount of Each Disbursement this Period 1190.34

Transaction ID : SB17-EX13549

**[MEMO ITEM]**  
Net Salary

**SUBTOTAL** of Disbursements This Page (optional)..... 0.00

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

14020022474

**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. Anne White**

Mailing Address 2610 Roselane Dr

City Charleston State WV Zip Code 25302

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

10 / 31 / 2013

Amount of Each Disbursement this Period

1134.59

Transaction ID : SB17-EX13550

[MEMO ITEM]

Net Salary

Full Name (Last, First, Middle Initial)

**B. Paychex**

Mailing Address 3960 Stillman Parkway

City Glen Allen State VA Zip Code 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

10 / 31 / 2013

Amount of Each Disbursement this Period

8245.12

Transaction ID : SB17-EX13551

[MEMO ITEM]

Withholding Taxes

Full Name (Last, First, Middle Initial)

**C. Paychex**

Mailing Address 3960 Stillman Parkway

City Glen Allen State VA Zip Code 25060

Purpose of Disbursement  
Payroll Service Fee

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

10 / 31 / 2013

Amount of Each Disbursement this Period

75.21

Transaction ID : SB17-EX13591

Payroll Service Fee

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

75.21

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

14020022475



**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 409 OF 431	
	<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

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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 M M / D D / Y Y Y Y 11 15 2013
Mailing Address 3960 Stillman Parkway		Amount of Each Disbursement this Period \$ 71.81 <b>Transaction ID : SB17-EX13531</b>
City Glen Allen	State VA	
Zip Code 25060	Purpose of Disbursement Payroll Service Fee	Category/ Type 001
Candidate Name	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	Payroll Service Fee

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 11 15 2013
Mailing Address 3960 Stillman Parkway		Amount of Each Disbursement this Period \$ 20951.17 <b>Transaction ID : SB17-EX13561</b>
City Glen Allen	State VA	
Zip Code 25060	Purpose of Disbursement PAYROLL: SEE BELOW	Category/ Type 001
Candidate Name	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	PAYROLL: SEE BELOW

Full Name (Last, First, Middle Initial) <b>c. Alison Bibbee</b>		Date of Disbursement M M / D D / Y Y Y Y 11 15 2013
Mailing Address 1210 Dudley Road		Amount of Each Disbursement this Period \$ 1806.00 <b>Transaction ID : SB17-EX13553</b>
City Charleston	State WV	
Zip Code 25314	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Category/ Type 001
Candidate Name	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	<b>[MEMO ITEM]</b> Net Salary

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	\$ 21022.98
<b>TOTAL</b> This Period (last page this line number only).....	\$

14020022476

**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 410 OF 431

<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. Alyssa Clevenger</b>		Date of Disbursement M M / D D / Y Y Y Y 11 15 2013	
Mailing Address 752 Rocky Moore Rd		Amount of Each Disbursement this Period 1606.93	
City Charleston State WV Zip Code 25309	Purpose of Disbursement Administrative/Salary/Overhead Expenses	001 Category/ Type	Transaction ID : SB17-EX13554  <b>[MEMO ITEM]</b> Net Salary
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. Charles Flannery</b>		Date of Disbursement M M / D D / Y Y Y Y 11 15 2013	
Mailing Address 307 Winwood Dr.		Amount of Each Disbursement this Period 2343.01	
City Charleston State WV Zip Code 25302	Purpose of Disbursement Administrative/Salary/Overhead Expenses	001 Category/ Type	Transaction ID : SB17-EX13555  <b>[MEMO ITEM]</b> Net Salary
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. Christopher Hansen</b>		Date of Disbursement M M / D D / Y Y Y Y 11 15 2013	
Mailing Address 1009A Bridge Rd		Amount of Each Disbursement this Period 5184.11	
City Charleston State WV Zip Code 25339	Purpose of Disbursement Administrative/Salary/Overhead Expenses	001 Category/ Type	Transaction ID : SB17-EX13556  <b>[MEMO ITEM]</b> Net Salary
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) .....		.....	

14020022477

**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 411 OF 431
	<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. Mary Payne</b>		Date of Disbursement MM / DD / YYYY 11 / 15 / 2013
Mailing Address 1414 Louden Heights Road		Amount of Each Disbursement this Period 621.87
City Charleston	State WV	
Zip Code 25314	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : <b>SB17-EX13557</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] Net Salary
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Rebecca Trump</b>		Date of Disbursement MM / DD / YYYY 11 / 15 / 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 : <b>SB17-EX13558</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] Net Salary
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Anne White</b>		Date of Disbursement MM / DD / YYYY 11 / 15 / 2013
Mailing Address 2610 Roselane Dr		Amount of Each Disbursement this Period 1134.59
City Charleston	State WV	
Zip Code 25302	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : <b>SB17-EX13559</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] Net Salary
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022478

**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 412 OF 431
	<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. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 15 / 2013
Mailing Address 3960 Stillman Parkway		Amount of Each Disbursement this Period 7064.32 <b>Transaction ID : SB17-EX13560</b>
City Glen Allen	State VA	
Zip Code 25060	Purpose of Disbursement Administrative/Salary/Overhead Expenses	001 Category/ Type
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>[MEMO ITEM]</b> Withholding Taxes

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2013
Mailing Address 3960 Stillman Parkway		Amount of Each Disbursement this Period 71.81 <b>Transaction ID : SB17-EX13532</b>
City Glen Allen	State VA	
Zip Code 25060	Purpose of Disbursement Payroll Service Fee	001 Category/ Type
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>C. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2013
Mailing Address 3960 Stillman Parkway		Amount of Each Disbursement this Period 20930.92 <b>Transaction ID : SB17-EX13570</b>
City Glen Allen	State VA	
Zip Code 25060	Purpose of Disbursement PAYROLL: SEE BELOW	001 Category/ Type
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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	21002.73
<b>TOTAL</b> This Period (last page this line number only).....	

14020022479

**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 413 OF 431

<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**

<p>Full Name (Last, First, Middle Initial) <b>A. Alison Bibbee</b></p>		<p>Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2013</p>	
<p>Mailing Address 1210 Dudley Road</p>		<p>Amount of Each Disbursement this Period 1805.99</p>	
<p>City Charleston State WV Zip Code 25314</p>	<p>Purpose of Disbursement Administrative/Salary/Overhead Expenses</p>	<p>001 Category/ Type</p>	
<p>Candidate Name</p>		<p>Transaction ID : <b>SB17-EX13562</b></p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014</p>	<p>[MEMO ITEM] Net Salary</p>	
<p>State: District:</p>			
<p>Full Name (Last, First, Middle Initial) <b>B. Alyssa Clevenger</b></p>		<p>Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2013</p>	
<p>Mailing Address 752 Rocky Moore Rd</p>		<p>Amount of Each Disbursement this Period 1606.92</p>	
<p>City Charleston State WV Zip Code 25309</p>	<p>Purpose of Disbursement Administrative/Salary/Overhead Expenses</p>	<p>001 Category/ Type</p>	
<p>Candidate Name</p>		<p>Transaction ID : <b>SB17-EX13563</b></p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014</p>	<p>[MEMO ITEM] Net Salary</p>	
<p>State: District:</p>			
<p>Full Name (Last, First, Middle Initial) <b>C. Charles Flannery</b></p>		<p>Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2013</p>	
<p>Mailing Address 307 Winwood Dr.</p>		<p>Amount of Each Disbursement this Period 2343.02</p>	
<p>City Charleston State WV Zip Code 25302</p>	<p>Purpose of Disbursement Administrative/Salary/Overhead Expenses</p>	<p>001 Category/ Type</p>	
<p>Candidate Name</p>		<p>Transaction ID : <b>SB17-EX13564</b></p>	
<p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p>	<p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014</p>	<p>[MEMO ITEM] Net Salary</p>	
<p>State: District:</p>			
<p><b>SUBTOTAL</b> of Disbursements This Page (optional).....</p>		<p>0.00</p>	
<p><b>TOTAL</b> This Period (last page this line number only).....</p>			

14020022480

**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) <b>A. Christopher Hansen</b>		Date of Disbursement MM / DD / YYYY 11 / 29 / 2013
Mailing Address 1009A Bridge Rd		Amount of Each Disbursement this Period 5184.11 Transaction ID : SB17-EX13565
City Charleston	State WV	
Zip Code 25339	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 11 / 29 / 2013
Mailing Address 1414 Loudon Heights Road		Amount of Each Disbursement this Period 621.88 Transaction ID : SB17-EX13566
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 11 / 29 / 2013
Mailing Address 20007 Silverbell Drive		Amount of Each Disbursement this Period 1190.34 Transaction ID : SB17-EX13567
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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022481

**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. Anne White</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2013	
Mailing Address 2610 Roselane Dr		Amount of Each Disbursement this Period 1134.59	
City Charleston State WV Zip Code 25302	Purpose of Disbursement Administrative/Salary/Overhead Expenses 001 Category/ Type	Transaction ID : SB17-EX13568	
Candidate Name		[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:		
Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2013	
Mailing Address 3960 Stillman Parkway		Amount of Each Disbursement this Period 7044.07	
City Glen Allen State VA Zip Code 25060	Purpose of Disbursement Administrative/Salary/Overhead Expenses 001 Category/ Type	Transaction ID : SB17-EX13569	
Candidate Name		[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>c. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013	
Mailing Address 3960 Stillman Parkway		Amount of Each Disbursement this Period 75.01	
City Glen Allen State VA Zip Code 25060	Purpose of Disbursement Payroll Service Fee 001 Category/ Type	Transaction ID : SB17-EX13533	
Candidate Name		Payroll 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).....		75.01	
<b>TOTAL</b> This Period (last page this line number only).....		75.01	

14020022482

**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. 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

M M / D D / Y Y - Y Y  
12 13 2013

Amount of Each Disbursement this Period

24247.34

Transaction ID : SB17-EX13579

PAYROLL: SEE BELOW

Full Name (Last, First, Middle Initial)

**B. 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

M M / D D / Y Y - Y Y  
12 13 2013

Amount of Each Disbursement this Period

4726.00

Transaction ID : SB17-EX13571

[MEMO ITEM]

Net Salary

Full Name (Last, First, Middle Initial)

**c. Alyssa Clevenger**

Mailing Address 752 Rocky Moore Rd

City State Zip Code  
Charleston WV 25309

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  
12 13 2013

Amount of Each Disbursement this Period

861.53

Transaction ID : SB17-EX13572

[MEMO ITEM]

Net Salary

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

24247.34

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

14020022483



**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 417 OF 431			
	<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. Charles Flannery</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address 307 Winwood Dr.		Amount of Each Disbursement this Period 2343.01 Transaction ID : SB17-EX13573
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. Christopher Hansen</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address 1009A Bridge Rd		Amount of Each Disbursement this Period 5184.11 Transaction ID : SB17-EX13574
City Charleston	State WV	
Zip Code 25339	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 M M / D D / Y Y Y Y 12 / 13 / 2013
Mailing Address 1414 Louven Heights Road		Amount of Each Disbursement this Period 621.87 Transaction ID : SB17-EX13575
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).....	

14020022484

**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 418 OF 431

<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 MM / DD / YYYY 12 / 13 / 2013
Mailing Address 20007 Silverbell Drive		Amount of Each Disbursement this Period 1190.34 Transaction ID : SB17-EX13576
City Morgantown State WV Zip Code 26505	001 Category/ Type	
Purpose of Disbursement Administrative/Salary/Overhead Expenses		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. Anne White</b>		Date of Disbursement MM / DD / YYYY 12 / 13 / 2013
Mailing Address 2610 Roselane Dr		Amount of Each Disbursement this Period 1134.59 Transaction ID : SB17-EX13577
City Charleston State WV Zip Code 25302	001 Category/ Type	
Purpose of Disbursement Administrative/Salary/Overhead Expenses		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. Paychex</b>		Date of Disbursement MM / DD / YYYY 12 / 13 / 2013
Mailing Address 3960 Stillman Parkway		Amount of Each Disbursement this Period 8185.89 Transaction ID : SB17-EX13578
City Glen Allen State VA Zip Code 25060	001 Category/ Type	
Purpose of Disbursement Administrative/Salary/Overhead Expenses		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).....	

14020022485

**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 419 OF 431			
	<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. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 3960 Stillman Parkway		Amount of Each Disbursement this Period 71.81
City Glen Allen	State VA	
Purpose of Disbursement Payroll Service Fee	Candidate Name	001 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Transaction ID : SB17-EX13534 Payroll Service Fee	

Full Name (Last, First, Middle Initial) <b>B. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 3960 Stillman Parkway		Amount of Each Disbursement this Period 19719.85
City Glen Allen	State VA	
Purpose of Disbursement PAYROLL: SEE BELOW	Candidate Name	001 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Transaction ID : SB17-EX13588 PAYROLL: SEE BELOW	

Full Name (Last, First, Middle Initial) <b>C. Alison Bibbee</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 1210 Dudley Road		Amount of Each Disbursement this Period 1805.99
City Charleston	State WV	
Purpose of Disbursement Administrative/Salary/Overhead Expenses	Candidate Name	001 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		
State: District:	Transaction ID : SB17-EX13580 [MEMO ITEM] Net Salary	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	19791.66
<b>TOTAL</b> This Period (last page this line number only).....	

14020022486

**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 420 OF 431			
	<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. Alyssa Clevenger</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 752 Rocky Moore Rd		Amount of Each Disbursement this Period 861.53 Transaction ID : SB17-EX13581
City Charleston	State WV	
Zip Code 25309	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 M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 307 Winwood Dr.		Amount of Each Disbursement this Period 2343.02 Transaction ID : SB17-EX13582
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. Christopher Hansen</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 1009A Bridge Rd		Amount of Each Disbursement this Period 5184.11 Transaction ID : SB17-EX13583
City Charleston	State WV	
Zip Code 25339	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).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020022487

**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 421 OF 431
	<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. Mary Payne</b>		Date of Disbursement MM / DD / YYYY 12 / 31 / 2013
Mailing Address 1414 Louden Heights Road		Amount of Each Disbursement this Period 621.88 Transaction ID : SB17-EX13584
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. Rebecca Trump</b>		Date of Disbursement MM / DD / YYYY 12 / 31 / 2013
Mailing Address 20007 Silverbell Drive		Amount of Each Disbursement this Period 1190.34 Transaction ID : SB17-EX13585
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

Full Name (Last, First, Middle Initial) <b>c. Anne White</b>		Date of Disbursement MM / DD / YYYY 12 / 31 / 2013
Mailing Address 2610 Roselane Dr		Amount of Each Disbursement this Period 1134.59 Transaction ID : SB17-EX13586
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) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

14020022488

**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 422 OF 431
	<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. Paychex</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 3960 Stillman Parkway		Amount of Each Disbursement this Period 6578.39
City Glen Allen	State VA	
Zip Code 25060	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : <b>SB17-EX13587</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] Withholding Taxes
State: District:		

Full Name (Last, First, Middle Initial) <b>B. LovasCo LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 24 / 2013
Mailing Address 6740 W Deer Valley Rd Ste D-107		Amount of Each Disbursement this Period 1040.00
City Glendale	State AZ	
Zip Code 85310	Purpose of Disbursement Fundraising Commission	Transaction ID : <b>SB17-EX13380</b>
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	Fundraising Commission
State: District:		

Full Name (Last, First, Middle Initial) <b>C. LovasCo LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 04 / 2013
Mailing Address 6740 W Deer Valley Rd Ste D-107		Amount of Each Disbursement this Period 260.00
City Glendale	State AZ	
Zip Code 85310	Purpose of Disbursement Fundraising Commission	Transaction ID : <b>SB17-EX13611</b>
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	Fundraising Commission
State: District:		

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

14020022489

**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 423 OF 431
	<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. Cole Chevrolet Cadillac Inc.</b>		Date of Disbursement M M / D D / Y Y - Y Y 10 22 2013
Mailing Address PO Box 688		Amount of Each Disbursement this Period 100.00 <b>Transaction ID : SB17-EX13379</b>
City Bluefield	State WV	
Zip Code 24701	Purpose of Disbursement Event Tickets	Event Tickets
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:		

Full Name (Last, First, Middle Initial) <b>B. Rebecca Trump</b>		Date of Disbursement M M / D D / Y Y - Y Y 10 01 2013
Mailing Address 20007 Silverbell Drive		Amount of Each Disbursement this Period 156.53 <b>Transaction ID : SB17-EX13339</b>
City Morgantown	State WV	
Zip Code 26505	Purpose of Disbursement Mileage Reimbursement	Mileage Reimbursement
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	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Rebecca Trump</b>		Date of Disbursement M M / D D / Y Y - Y Y 10 30 2013
Mailing Address 20007 Silverbell Drive		Amount of Each Disbursement this Period 214.99 <b>Transaction ID : SB17-EX13387</b>
City Morgantown	State WV	
Zip Code 26505	Purpose of Disbursement Mileage Reimbursement	Mileage Reimbursement
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	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	471.52
<b>TOTAL</b> This Period (last page this line number only).....	

1402002490

**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 424 OF 431			
	<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. Rebecca Trump</b>			Date of Disbursement MM / DD / YYYY 11 / 15 / 2013
Mailing Address 20007 Silverbell Drive			Amount of Each Disbursement this Period 83.73 Transaction ID : SB17-EX13627
City Morgantown	State WV	Zip Code 26505	
Purpose of Disbursement Mileage Reimbursement		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		Mileage Reimbursement	
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. Rebecca Trump</b>			Date of Disbursement MM / DD / YYYY 12 / 04 / 2013
Mailing Address 20007 Silverbell Drive			Amount of Each Disbursement this Period 45.43 Transaction ID : SB17-EX13492
City Morgantown	State WV	Zip Code 26505	
Purpose of Disbursement Mileage Reimbursement		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		Mileage Reimbursement	
State:	District:		

Full Name (Last, First, Middle Initial) <b>c. Zigna! Labs Inc.</b>			Date of Disbursement MM / DD / YYYY 10 / 01 / 2013
Mailing Address 106 Lincoln Blvd Suite 106			Amount of Each Disbursement this Period 750.00 Transaction ID : SB17-EX13136
City San Francisco	State CA	Zip Code 94129	
Purpose of Disbursement License 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		License Fee	
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	879.16
<b>TOTAL</b> This Period (last page this line number only) .....	

14020022491



**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 425 OF 431	
	<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

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

Full Name (Last, First, Middle Initial) <b>A. Signal Labs Inc.</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 14 / 2013
Mailing Address 106 Lincoln Blvd Suite 106		Amount of Each Disbursement this Period 750.00 Transaction ID : SB17-EX13371
City San Francisco	State CA Zip Code 94129	
Purpose of Disbursement License Fee	001	License Fee
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. Landmark Aviation</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013
Mailing Address 3550 N McAree Road		Amount of Each Disbursement this Period 157.20 Transaction ID : SB17-EX13473
City Waukegan	State IL Zip Code 60087	
Purpose of Disbursement Airfare	002	Airfare
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. Adventures On The Gorge</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 01 / 2013
Mailing Address PO Box 78		Amount of Each Disbursement this Period 2979.63 Transaction ID : SB17-EX13353
City Lansing	State WV Zip Code 25862	
Purpose of Disbursement Catering and Facility Rental	003	Catering and Facility Rental
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3886.83
<b>TOTAL</b> This Period (last page this line number only).....	

14020022492

**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 426 OF 431	
	<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

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

Full Name (Last, First, Middle Initial) <b>A. Guyan Golf &amp; Country Club</b>		Date of Disbursement MM / DD / YYYY 10 / 01 / 2013
Mailing Address 5450 Route 60 East		Amount of Each Disbursement this Period 1738.40 Transaction ID : SB17-EX13357
City Huntington	State WV	
Purpose of Disbursement Catering & Facility Rental	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	Catering & Facility Rental
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Haley O'Neill LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 21 / 2013
Mailing Address PO Box 16015		Amount of Each Disbursement this Period 10499.34 Transaction ID : SB17-EX13375
City Alexandria	State VA	
Purpose of Disbursement Research Report	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	Research Report
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Haley O'Neill LLC</b>		Date of Disbursement MM / DD / YYYY 12 / 13 / 2013
Mailing Address PO Box 16015		Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17-EX13519
City Alexandria	State VA	
Purpose of Disbursement Research Report	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	Research Report
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	17237.74
<b>TOTAL</b> This Period (last page this line number only) .....	

14020022493

**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 427 OF 431			
	<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. The Sahi Company</b>		Date of Disbursement MM / DD / YYYY 12 / 02 / 2013
Mailing Address 16714 Fitzhugh Rd		Amount of Each Disbursement this Period \$ 5731.12 Transaction ID : SB17-EX13488
City Dripping Springs	State TX	
Zip Code 78620	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:	PAYMENT: SEE BELOW

Full Name (Last, First, Middle Initial) <b>B. The Sahi Company</b>		Date of Disbursement MM / DD / YYYY 12 / 02 / 2013
Mailing Address 16714 Fitzhugh Rd		Amount of Each Disbursement this Period \$ 5710.00 Transaction ID : SB17-EX13489 [MEMO ITEM]
City Dripping Springs	State TX	
Zip Code 78620	Purpose of Disbursement Fundraising Commission	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. The Sahi Company</b>		Date of Disbursement MM / DD / YYYY 12 / 02 / 2013
Mailing Address 16714 Fitzhugh Rd		Amount of Each Disbursement this Period \$ 21.12 Transaction ID : SB17-EX13490 [MEMO ITEM]
City Dripping Springs	State TX	
Zip Code 78620	Purpose of Disbursement Blast Faxes	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) .....	5731.12
<b>TOTAL</b> This Period (last page this line number only) .....	

14020022494

**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 428 OF 431

<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**

<b>A. Black Knight Country Club</b> Full Name (Last, First, Middle Initial) Mailing Address PO Box 3067 City Beckley State WV Zip Code 25801 Purpose of Disbursement Catering 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:		Date of Disbursement M M / D D / Y Y Y Y 12 06 2013 Amount of Each Disbursement this Period 4826.12 Transaction ID : SB17-EX13501 Catering
<b>B. RST Marketing</b> Full Name (Last, First, Middle Initial) Mailing Address 1272 Corporate Park Dr City Forest State VA Zip Code 24551 Purpose of Disbursement Invitation Print and Mail 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:		Date of Disbursement M M / D D / Y Y Y Y 11 08 2013 Amount of Each Disbursement this Period 1714.45 Transaction ID : SB17-EX13623 Invitation Print and Mail
<b>C. Bridgeport Conference Center</b> Full Name (Last, First, Middle Initial) Mailing Address 300 Conference Center Way City Bridgeport State WV Zip Code 26330 Purpose of Disbursement Catering 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:		Date of Disbursement M M / D D / Y Y Y Y 11 12 2013 Amount of Each Disbursement this Period 1330.78 Transaction ID : SB17-EX13624 Catering
<b>SUBTOTAL</b> of Disbursements This Page (optional).....		7871.35
<b>TOTAL</b> 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 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. W. Timothy Locke</b>		Date of Disbursement MM / DD / YYYY 10 / 28 / 2013
Mailing Address 2111 Woodmont Road		Amount of Each Disbursement this Period 801.88 Transaction ID : SB17-CN39290
City Alexandria	State VA	
Zip Code 22307	Purpose of Disbursement IN-KIND RECEIVED Food and Beverage	Category/ Type In-Kind Received Food and Beverage
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. Mr. John McAllister</b>		Date of Disbursement MM / DD / YYYY 11 / 14 / 2013
Mailing Address 1030 15th St NW # 590 West		Amount of Each Disbursement this Period 243.00 Transaction ID : SB17-CN39291
City Washington	State DC	
Zip Code 20005	Purpose of Disbursement IN-KIND RECEIVED Invitation Print & Mail	Category/ Type In-Kind Received Invitation Print & Mail
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.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	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 <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1044.88
<b>TOTAL</b> This Period (last page this line number only).....	360707.10

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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)

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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)

**A. Asian Garden Inc.**

Mailing Address 927 Showers Lane

City Martinsburg State WV Zip Code 25403

Purpose of Disbursement  
Contribution Ref to Corporation

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  
10 30 2013

Amount of Each Disbursement this Period

50.00

Transaction ID : SB20a-CR46

Refund of Corporate Contribution

**B. Rand McCaul Inc.**

Mailing Address RR 3 Box 197

City Philippi State WV Zip Code 26416

Purpose of Disbursement  
Contribution Ref to Corporation

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  
10 22 2013

Amount of Each Disbursement this Period

20.00

Transaction ID : SB20a-CR45

Refund of Contributions

**C. Ms. Helen U Mazzoni**

Mailing Address P O Box 187

City Weirton State WV Zip Code 26062

Purpose of Disbursement  
Contribution Ref to Individual

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  
12 24 2013

Amount of Each Disbursement this Period

25.00

Transaction ID : SB20a-CR47

Refund of Contribution

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

95.00

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

14020022497

**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 431 OF 431			
	<input type="checkbox"/> 17 <input checked="" 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. Mr. Rick Modesitt</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 16 / 2013
Mailing Address PO Box 2206		Amount of Each Disbursement this Period \$ 50.00 Transaction ID : SB20a-CR44
City Parkersburg State WV Zip Code 26102	Purpose of Disbursement Contribution Ref to Individual	
Candidate Name	Category/Type	Refund of Contribution
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.</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	
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:	

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	
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).....	50.00
<b>TOTAL</b> This Period (last page this line number only).....	145.00

14020022498

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:

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Date of Receipt

**1-30-14**

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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 \_\_\_\_\_

UPS \_\_\_\_\_

DHL \_\_\_\_\_

AIRBORNE EXPRESS \_\_\_\_\_

RECEIVED FROM FEDERAL ELECTION COMMISSION \_\_\_\_\_

Date of Receipt

POSTMARK ILLEGIBLE

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FAX \_\_\_\_\_

Date of Receipt

OTHER \_\_\_\_\_

Date of Receipt or Postmark

PREPARER

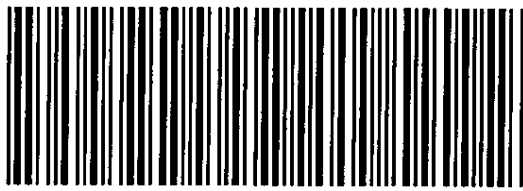
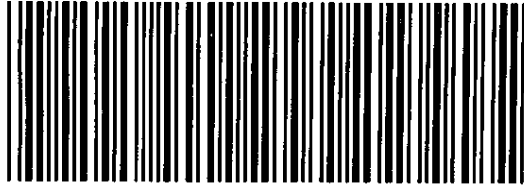
**DH**

DATE PREPARED

**1-30-14**

14020022499





14020022500