

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

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

12FE4M5

WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

ADDRESS (number and street) ▼

25 CANYON ROAD

☐ Check if different than previously reported. (ACC)

MORGANTOWN

WV

26508

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00157537

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☒

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y

in the
State of

WV

(d) 30-Day

POST-Election

Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y

04

01

2016

04

20

2016

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 Mary Anne Buchanan

Signature of Treasurer

Mary Anne Buchanan

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y

04

28

2016

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

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
04 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y
04 / 20 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2016		2003.00
(b) Cash on Hand at Beginning of Reporting Period.....	2003.00	
(c) Total Receipts (from Line 19)	1000.00	1000.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	3003.00	3003.00
7. Total Disbursements (from Line 31)	12.90	12.90
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	2990.10	2990.10
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	711.54	



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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y
04 / 01 / 2016

To:

M M / D D / Y Y Y Y Y
04 / 20 / 2016
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

1000.00

1000.00

(ii) Unitemized

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

1000.00

1000.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

1000.00

1000.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

1000.00

1000.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

1000.00

1000.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	12.90	12.90
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	12.90	12.90
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12.90	12.90

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	1000.00	1000.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1000.00	1000.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	0.00	0.00

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

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

FOR LINE NUMBER: PAGE 6 OF 38

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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

NAME OF COMMITTEE (In Full)

WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. John H Curry

Mailing Address 174 Hamilton Dr

City State Zip Code
 Mount Clare WV 26408

FEC ID number of contributing federal political committee.

C

Name of Employer

Dominion Transmission, Inc.

Occupation

Engineer II

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 11 / 2016

Transaction ID : SA11AI.6668

Amount of Each Receipt this Period

500.00

☐ Memo Item

Donation

Full Name (Last, First, Middle Initial)

B. Louise Deal

Mailing Address 459 Bakers Ridge Rd

City State Zip Code
 Morgantown WV 26505

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 08 / 2016

Transaction ID : SA11AI.6667

Amount of Each Receipt this Period

500.00

☐ Memo Item

Donation

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

1000.00

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

1000.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 7 OF 38

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

PostmasterNature of Debt (Purpose):
Postage

Mailing Address 1902 El Jazid St.

City State

Zip Code

Dellslow

WV

26531

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.6692

Amount Incurred This Period

10.44

Payment This Period

10.44

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

PostmasterNature of Debt (Purpose):
Postage

Mailing Address 40 High St., Ste 101

City State

Zip Code

Morgantown

WV

26505

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.6694

Amount Incurred This Period

2.46

Payment This Period

2.46

Outstanding Balance at Close of This Period

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

West Virginians for Life, Inc.Nature of Debt (Purpose):
Postage and Printing

Mailing Address 25 Canyon Rd

City

State

Zip Code

Morgantown

WV

26508

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.6671

Amount Incurred This Period

2.96

Payment This Period

0.00

Outstanding Balance at Close of This Period

2.96

1) **SUBTOTALS** This Period This Page (optional)..... ►

2.96

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

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 8 OF 38

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

West Virginians for Life, Inc.Nature of Debt (Purpose):
Printing

Mailing Address 25 Canyon Rd

City State

Zip Code

Morgantown

WV

26508

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.6680

Amount Incurred This Period

5.92

Payment This Period

0.00

Outstanding Balance at Close of This Period

5.92

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

West Virginians for Life, Inc.Nature of Debt (Purpose):
Postage and Printing

Mailing Address 25 Canyon Rd

City State

Zip Code

Morgantown

WV

26508

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.6685

Amount Incurred This Period

2.67

Payment This Period

0.00

Outstanding Balance at Close of This Period

2.67

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

West Virginians for Life, Inc.Nature of Debt (Purpose):
Printing

Mailing Address 25 Canyon Rd

City

State

Zip Code

Morgantown

WV

26508

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.6686

Amount Incurred This Period

1.28

Payment This Period

0.00

Outstanding Balance at Close of This Period

1.28

1) **SUBTOTALS** This Period This Page (optional)..... ►

9.87

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

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 9 OF 38

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

West Virginians for Life, Inc.Nature of Debt (Purpose):
Postage and Printing

Mailing Address 25 Canyon Rd

City State

Zip Code

Morgantown

WV

26508

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.6687

Amount Incurred This Period

0.05

Payment This Period

0.00

Outstanding Balance at Close of This Period

0.05

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

West Virginians for Life, Inc.Nature of Debt (Purpose):
Postage and Printing

Mailing Address 25 Canyon Rd

City State

Zip Code

Morgantown

WV

26508

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.6688

Amount Incurred This Period

3.68

Payment This Period

0.00

Outstanding Balance at Close of This Period

3.68

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

West Virginians for Life, Inc.Nature of Debt (Purpose):
Printing

Mailing Address 25 Canyon Rd

City

State

Zip Code

Morgantown

WV

26508

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.6693

Amount Incurred This Period

4.20

Payment This Period

0.00

Outstanding Balance at Close of This Period

4.20

1) **SUBTOTALS** This Period This Page (optional)..... ►

7.93

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

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 10 OF 38

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

West Virginians for Life, Inc.Nature of Debt (Purpose):
Printing Labels

Mailing Address 25 Canyon Rd

City State

Zip Code

Morgantown

WV

26508

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.6747

Amount Incurred This Period

683.83

Payment This Period

0.00

Outstanding Balance at Close of This Period

683.83

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

West Virginians for Life, Inc.Nature of Debt (Purpose):
Printing

Mailing Address 25 Canyon Rd

City State

Zip Code

Morgantown

WV

26508

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.6695

Amount Incurred This Period

2.67

Payment This Period

0.00

Outstanding Balance at Close of This Period

2.67

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

West Virginians for Life, Inc.Nature of Debt (Purpose):
Postage and Printing

Mailing Address 25 Canyon Rd

City

State

Zip Code

Morgantown

WV

26508

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.6696

Amount Incurred This Period

1.85

Payment This Period

0.00

Outstanding Balance at Close of This Period

1.85

1) **SUBTOTALS** This Period This Page (optional)..... ►

688.35

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

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 11 OF 38

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

West Virginians for Life, Inc State PAC FundNature of Debt (Purpose):
Postage

Mailing Address 25 Canyon Rd

City State

Zip Code

Morgantown

WV

26508

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.6734

Amount Incurred This Period

2.43

Payment This Period

0.00

Outstanding Balance at Close of This Period

2.43

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)..... ►

2.43

2) **TOTALS** This Period (last page this line number only)..... ►

711.54

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

711.54

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 12 OF 38
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00157537	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYYYY			
Full Name of Payee Postmaster		<input type="checkbox"/> Memo Item	
Mailing Address 1902 El Jazid St.		Date of Public Distribution/Dissemination MM / DD / YYYYYY 04 / 15 / 2016	
City Dellslow		State WV	
Zip Code 26531		Amount 4.13	
Purpose of Expenditure Postage		Category/Type 	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate		District: _____ State: _____	
Calendar Year-To-Date Per Election for Office Sought 4.13		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee Postmaster		<input type="checkbox"/> Memo Item	
Mailing Address 1902 El Jazid St.		Date of Public Distribution/Dissemination MM / DD / YYYYYY 04 / 15 / 2016	
City Dellslow		State WV	
Zip Code 26531		Amount 2.15	
Purpose of Expenditure Postage		Category/Type 	
Name of Federal Candidate HARVEY D. PEYTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Office Sought: <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate		District: 02 State: WV	
Calendar Year-To-Date Per Election for Office Sought 2.15		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		6.28	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			
(c) TOTAL Independent Expenditures..... ▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Anne Buchanan		[Electronically Filed]	
Signature		Date MM / DD / YYYYYY 04 / 28 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 13 OF 38
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00157537	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYYYY			
Full Name of Payee Postmaster		<input type="checkbox"/> Memo Item	
Mailing Address 1902 El Jazid St.		Date of Public Distribution/Dissemination MM / DD / YYYYYY 04 / 15 / 2016	
City Dellslow		State WV	
Zip Code 26531		Amount 0.38	
Purpose of Expenditure Postage		Category/Type 	
Name of Federal Candidate EVAN H JENKINS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Office Sought: <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV		District: 03	
Calendar Year-To-Date Per Election for Office Sought 0.38		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee Postmaster		<input type="checkbox"/> Memo Item	
Mailing Address 1902 El Jazid St.		Date of Public Distribution/Dissemination MM / DD / YYYYYY 04 / 15 / 2016	
City Dellslow		State WV	
Zip Code 26531		Amount 1.63	
Purpose of Expenditure Postage		Category/Type 	
Name of Federal Candidate DAVID B MCKINLEY		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Office Sought: <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV		District: 01	
Calendar Year-To-Date Per Election for Office Sought 1.63		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		2.01	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶			
(c) TOTAL Independent Expenditures..... ▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <i>Mary Anne Buchanan</i>		Date MM / DD / YYYYYY 04 / 28 / 2016	
		<i>[Electronically Filed]</i>	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 14 OF 38
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00157537 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY		

Full Name of Payee Postmaster		<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 04 / 15 / 2016 </div>	
Mailing Address 1902 El Jazid St.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2.15</div>	
City Dellslow	State WV	Zip Code 26531	Transaction ID : SE.6730
Purpose of Expenditure Postage	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>		Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY 04 / 15 / 2016</div>
Name of Federal Candidate ALEXANDER XAVIER MOONEY		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> State: <u>WV</u>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee Postmaster		<input type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 04 / 18 / 2016 </div>	
Mailing Address 40 High St., Ste 101		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.26</div>	
City Morgantown	State WV	Zip Code 26505	Transaction ID : SE.6731
Purpose of Expenditure Postage	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>		Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM / DD / YYYY 04 / 15 / 2016</div>
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> State: _____	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">2.41</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

[Electronically Filed]

Date

MM / DD / YYYY
 04 / 28 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 15 OF 38
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)

WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

FEC IDENTIFICATION NUMBER ▼

C C00157537

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on

M M M / D D D / Y Y Y Y Y Y

Full Name of Payee

Postmaster

☐ Memo Item

Date of Public Distribution/Dissemination

M M M / D D D / Y Y Y Y Y Y
04 18 2016

Mailing Address

40 High St., Ste 101

Amount

City

Morgantown

State

WV

Zip Code

26505

Purpose of Expenditure

Postage

Category/
Type

Transaction ID : SE.6732

Date of Disbursement or Obligation

M M M / D D D / Y Y Y Y Y Y
04 18 2016

Name of Federal Candidate

RAFAEL EDWARD 'TED' CRUZ

☒ Support
☐ Oppose

Office Sought:

☐ House

District: _____

☒ President☐ Senate

State: _____

Calendar Year-To-Date
Per Election for Office Sought

6.34

Disbursement For: 2016

☒ Primary☐ General☐ Other (specify) ► _____

Full Name of Payee

Postmaster

☐ Memo Item

Date of Public Distribution/Dissemination

M M M / D D D / Y Y Y Y Y Y
04 18 2016

Mailing Address

40 High St., Ste 101

Amount

City

Morgantown

State

WV

Zip Code

26505

Purpose of Expenditure

Postage

Category/
Type

Transaction ID : SE.6733

Date of Disbursement or Obligation

M M M / D D D / Y Y Y Y Y Y
04 18 2016

Name of Federal Candidate

HARVEY D. PEYTON

☒ Support
☐ Oppose

Office Sought:

☒ House

District: 02

☐ President☐ Senate

State: WV

Calendar Year-To-Date
Per Election for Office Sought

4.55

Disbursement For: 2016

☒ Primary☐ General☐ Other (specify) ► _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ►

2.20

(b) SUBTOTAL of Unitemized Independent Expenditures ►

(c) TOTAL Independent Expenditures..... ►

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Mary Anne Buchanan

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
04 28 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 16 OF 38
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00157537</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>			
Full Name of Payee West Virginians for Life, Inc.		<input checked="" type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>	
Mailing Address 25 Canyon Rd		Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div> 0.74	
City Morgantown	State WV	Zip Code 26508	Transaction ID : SE.6672 Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>
Purpose of Expenditure Postage and Printing		Category/ Type <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div>	
Name of Federal Candidate EVAN H JENKINS		<input checked="" type="checkbox"/> Support Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee West Virginians for Life, Inc.		<input checked="" type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>	
Mailing Address 25 Canyon Rd		Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div> 0.74	
City Morgantown	State WV	Zip Code 26508	Transaction ID : SE.6675 Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>
Purpose of Expenditure Postage and Printing		Category/ Type <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div>	
Name of Federal Candidate HARVEY D. PEYTON		<input checked="" type="checkbox"/> Support Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		<div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div> 0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶		<div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div>	
(c) TOTAL Independent Expenditures..... ▶		<div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <i>Mary Anne Buchanan</i>		Date <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 04 / 28 / 2016	

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 17 OF 38
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00157537 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; margin: 0 5px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; margin: 0 5px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; margin: 0 5px;"></div>		

Full Name of Payee West Virginians for Life, Inc.		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; margin: 0 5px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; margin: 0 5px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; margin: 0 5px;"></div>	
Mailing Address 25 Canyon Rd		Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px; margin: 0 5px;"></div> 0.74		
City Morgantown	State WV	Zip Code 26508	Transaction ID : SE.6676	
Purpose of Expenditure Postage and Printing	Category/Type <div style="display: inline-block; border-bottom: 1px solid black; width: 60px; margin: 0 5px;"></div>		Date of Disbursement or Obligation MM / DD / YYYY <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; margin: 0 5px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; margin: 0 5px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; margin: 0 5px;"></div>	
Name of Federal Candidate DAVID B MCKINLEY		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Senate	
Calendar Year-To-Date Per Election for Office Sought		0.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee West Virginians for Life, Inc.		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; margin: 0 5px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; margin: 0 5px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; margin: 0 5px;"></div>	
Mailing Address 25 Canyon Rd		Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px; margin: 0 5px;"></div> 0.74		
City Morgantown	State WV	Zip Code 26508	Transaction ID : SE.6677	
Purpose of Expenditure Postage and Printing	Category/Type <div style="display: inline-block; border-bottom: 1px solid black; width: 60px; margin: 0 5px;"></div>		Date of Disbursement or Obligation MM / DD / YYYY <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; margin: 0 5px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; margin: 0 5px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; margin: 0 5px;"></div>	
Name of Federal Candidate ALEXANDER XAVIER MOONEY		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Senate	
Calendar Year-To-Date Per Election for Office Sought		0.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="display: inline-block; border-bottom: 1px solid black; width: 150px; margin: 0 5px;"></div> 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="display: inline-block; border-bottom: 1px solid black; width: 150px; margin: 0 5px;"></div>
(c) TOTAL Independent Expenditures..... ▶	<div style="display: inline-block; border-bottom: 1px solid black; width: 150px; margin: 0 5px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

[Electronically Filed]

Date

 MM / DD / YYYY
 / /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 18 OF 38
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y		

Full Name of Payee West Virginians for Life, Inc.		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 04 / 08 / 2016	
Mailing Address 25 Canyon Rd			Amount 2.96	
City Morgantown	State WV	Zip Code 26508	Transaction ID : SE.6681	
Purpose of Expenditure Printing	Category/Type 		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought 0.00			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee West Virginians for Life, Inc.		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 04 / 08 / 2016	
Mailing Address 25 Canyon Rd			Amount 1.29	
City Morgantown	State WV	Zip Code 26508	Transaction ID : SE.6682	
Purpose of Expenditure Printing	Category/Type 		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Name of Federal Candidate EVAN H JENKINS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>03</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WV</u>	
Calendar Year-To-Date Per Election for Office Sought 0.00			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Mary Anne Buchanan

[Electronically Filed]

Date

04 / 28 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 19 OF 38
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y		

Full Name of Payee West Virginians for Life, Inc.		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 04 / 08 / 2016	
Mailing Address 25 Canyon Rd			Amount 1.67	
City Morgantown	State WV	Zip Code 26508	Transaction ID : SE.6683	
Purpose of Expenditure Printing	Category/ Type		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Name of Federal Candidate DAVID B MCKINLEY		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> President <input type="checkbox"/> Senate	District: <u>01</u> State: <u>WV</u>
Calendar Year-To-Date Per Election for Office Sought		0.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee West Virginians for Life, Inc.		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 04 / 12 / 2016	
Mailing Address 25 Canyon Rd			Amount 1.07	
City Morgantown	State WV	Zip Code 26508	Transaction ID : SE.6697	
Purpose of Expenditure Postage and Printing	Category/ Type		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate	District: _____ State: _____
Calendar Year-To-Date Per Election for Office Sought		0.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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Mary Anne Buchanan

[Electronically Filed]

Date

04 / 28 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 20 OF 38
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00157537 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name of Payee West Virginians for Life, Inc.		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY <div style="display: flex; justify-content: space-around;"><div>04</div><div>12</div><div>2016</div></div>	
Mailing Address 25 Canyon Rd		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.53</div>		
City Morgantown	State WV	Zip Code 26508	Transaction ID : SE.6698	
Purpose of Expenditure Postage and Printing	Category/Type		Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate HARVEY D. PEYTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WV</u>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee West Virginians for Life, Inc.		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY <div style="display: flex; justify-content: space-around;"><div>04</div><div>12</div><div>2016</div></div>	
Mailing Address 25 Canyon Rd		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.53</div>		
City Morgantown	State WV	Zip Code 26508	Transaction ID : SE.6699	
Purpose of Expenditure Printing	Category/Type		Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate EVAN H JENKINS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>03</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WV</u>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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Mary Anne Buchanan

[Electronically Filed]

Date

 MM / DD / YYYY
 04 / 28 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 21 OF 38
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00157537 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y		

Full Name of Payee West Virginians for Life, Inc.		<input checked="" type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 04 / 12 / 2016 </div>
Mailing Address 25 Canyon Rd		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.54</div>
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.6700 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>	
Purpose of Expenditure Printing	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	
Name of Federal Candidate ALEXANDER XAVIER MOONEY		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>		Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WV</u>
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►

Full Name of Payee West Virginians for Life, Inc.		<input checked="" type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 04 / 12 / 2016 </div>
Mailing Address 25 Canyon Rd		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.64</div>
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.6701 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div>	
Purpose of Expenditure Printing	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>		Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ►

(a) SUBTOTAL of Itemized Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures..... ►	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
[Electronically Filed]

Date

04 / 28 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 22 OF 38
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y		

Full Name of Payee West Virginians for Life, Inc.		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 12 / 2016
Mailing Address 25 Canyon Rd			Amount 0.64
City Morgantown	State WV	Zip Code 26508	Transaction ID : SE.6702
Purpose of Expenditure Printing	Category/Type 		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Name of Federal Candidate DAVID B MCKINLEY		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WV</u>
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee West Virginians for Life, Inc.		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 04 / 14 / 2016
Mailing Address 25 Canyon Rd			Amount 0.01
City Morgantown	State WV	Zip Code 26508	Transaction ID : SE.6703
Purpose of Expenditure Printing & Printing	Category/Type 		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
04 / 28 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 23 OF 38
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00157537 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY		

Full Name of Payee West Virginians for Life, Inc.		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 14 / 2016	
Mailing Address 25 Canyon Rd		Amount 0.02		
City Morgantown	State WV	Zip Code 26508	Transaction ID : SE.6704	
Purpose of Expenditure Printing & Printing	Category/Type 		Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate HARVEY D. PEYTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV	
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee West Virginians for Life, Inc.		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 14 / 2016	
Mailing Address 25 Canyon Rd		Amount 0.02		
City Morgantown	State WV	Zip Code 26508	Transaction ID : SE.6705	
Purpose of Expenditure Postage and Printing	Category/Type 		Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate ALEXANDER XAVIER MOONEY		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV	
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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Mary Anne Buchanan

[Electronically Filed]

Date

MM / DD / YYYY
 04 / 28 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 24 OF 38
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00157537 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY		

Full Name of Payee West Virginians for Life, Inc.		<input checked="" type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 04 / 15 / 2016 </div>
Mailing Address 25 Canyon Rd		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.39 </div>
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.6706 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY </div>	
Purpose of Expenditure Postage and Printing	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	
Name of Federal Candidate ALEXANDER XAVIER MOONEY		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>		Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WV</u> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee West Virginians for Life, Inc.		<input checked="" type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY 04 / 15 / 2016 </div>
Mailing Address 25 Canyon Rd		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.39 </div>
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.6707 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> MM / DD / YYYY </div>	
Purpose of Expenditure Postage and Printing	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>	
Name of Federal Candidate HARVEY D. PEYTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>		Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WV</u> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

[Electronically Filed]

Date

MM / DD / YYYY
 04 / 28 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 25 OF 38
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00157537	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y			
Full Name of Payee West Virginians for Life, Inc.		<input checked="" type="checkbox"/> Memo Item	
Mailing Address 25 Canyon Rd		Date of Public Distribution/Dissemination 04 / 15 / 2016	
City Morgantown	State WV	Zip Code 26508	Amount 0.84
Purpose of Expenditure Postage and Printing		Category/ Type 	Transaction ID : SE.6708 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Name of Federal Candidate EVAN H JENKINS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>03</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WV</u>
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
Full Name of Payee West Virginians for Life, Inc.		<input checked="" type="checkbox"/> Memo Item	
Mailing Address 25 Canyon Rd		Date of Public Distribution/Dissemination 04 / 15 / 2016	
City Morgantown	State WV	Zip Code 26508	Amount 0.41
Purpose of Expenditure Postage and Printing		Category/ Type 	Transaction ID : SE.6709 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y
Name of Federal Candidate DAVID B MCKINLEY		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WV</u>
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures.....▶		0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶			
(c) TOTAL Independent Expenditures.....▶			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Mary Anne Buchanan		[Electronically Filed]	
Signature		Date 04 / 28 / 2016	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 26 OF 38
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00157537 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name of Payee West Virginians for Life, Inc.		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY <div style="display: flex; justify-content: space-around;"><div>04</div><div>15</div><div>2016</div></div>	
Mailing Address 25 Canyon Rd		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1.65</div>		
City Morgantown	State WV	Zip Code 26508	Transaction ID : SE.6710	
Purpose of Expenditure Postage and Printing	Category/Type		Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee West Virginians for Life, Inc.		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY <div style="display: flex; justify-content: space-around;"><div>04</div><div>15</div><div>2016</div></div>	
Mailing Address 25 Canyon Rd		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.75</div>		
City Morgantown	State WV	Zip Code 26508	Transaction ID : SE.6711	
Purpose of Expenditure Printing	Category/Type		Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate HARVEY D. PEYTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WV</u>	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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Mary Anne Buchanan
[Electronically Filed]

Date

 MM / DD / YYYY

04

28

2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 27 OF 38
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00157537 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYYYY		

Full Name of Payee West Virginians for Life, Inc.		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">04</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block;">15</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block;">2016</div>	
Mailing Address 25 Canyon Rd		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.75</div>		
City Morgantown	State WV	Zip Code 26508	Transaction ID : SE.6712	
Purpose of Expenditure Printing	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block;">DD</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block;">YYYYYY</div>	
Name of Federal Candidate ALEXANDER XAVIER MOONEY		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WV</u>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
		<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>		

Full Name of Payee West Virginians for Life, Inc.		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">04</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block;">15</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block;">2016</div>	
Mailing Address 25 Canyon Rd		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.74</div>		
City Morgantown	State WV	Zip Code 26508	Transaction ID : SE.6713	
Purpose of Expenditure Printing	Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>		Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">MM</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block;">DD</div> / <div style="border: 1px solid black; padding: 2px; display: inline-block;">YYYYYY</div>	
Name of Federal Candidate DAVID B MCKINLEY		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WV</u>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
		<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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Mary Anne Buchanan
[Electronically Filed]

Date

04

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 /

2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 28 OF 38
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00157537 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name of Payee West Virginians for Life, Inc.		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY <div style="display: flex; justify-content: space-around;"><div>04</div><div>15</div><div>2016</div></div>	
Mailing Address 25 Canyon Rd		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.25</div>		
City Morgantown	State WV	Zip Code 26508	Transaction ID : SE.6714	
Purpose of Expenditure Printing	Category/Type		Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate EVAN H JENKINS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee West Virginians for Life, Inc.		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY <div style="display: flex; justify-content: space-around;"><div>04</div><div>15</div><div>2016</div></div>	
Mailing Address 25 Canyon Rd		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1.71</div>		
City Morgantown	State WV	Zip Code 26508	Transaction ID : SE.6715	
Purpose of Expenditure Printing	Category/Type		Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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Mary Anne Buchanan

[Electronically Filed]

Date

 MM / DD / YYYY
 04 / 28 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 29 OF 38
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00157537 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY		

Full Name of Payee West Virginians for Life, Inc.		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 18 / 2016	
Mailing Address 25 Canyon Rd		Amount 1.23		
City Morgantown	State WV	Zip Code 26508	Transaction ID : SE.6716	
Purpose of Expenditure Printing	Category/Type 		Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought		0.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee West Virginians for Life, Inc.		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 18 / 2016	
Mailing Address 25 Canyon Rd		Amount 0.90		
City Morgantown	State WV	Zip Code 26508	Transaction ID : SE.6718	
Purpose of Expenditure Printing	Category/Type 		Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate EVAN H JENKINS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>03</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WV</u>	
Calendar Year-To-Date Per Election for Office Sought		0.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

[Electronically Filed]

Date

MM / DD / YYYY
 04 / 28 / 2016

Signature

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: flex; align-items: center;"> C C00157537 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: flex; justify-content: space-around; width: 100%;"> <div style="border: 1px solid black; padding: 2px; text-align: center;">M M /</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">D D /</div> <div style="border: 1px solid black; padding: 2px; text-align: center;">Y Y Y Y</div> </div>	

Full Name of Payee West Virginians for Life, Inc.		<input checked="" type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>04 / 18 / 2016</div> </div>	
Mailing Address 25 Canyon Rd				Amount <div> <div>_____</div> <div>0.23</div> </div>	
City Morgantown	State WV	Zip Code 26508	Transaction ID : SE.6719 Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> <div></div> </div>		
Purpose of Expenditure Printing		Category/ Type			
Name of Federal Candidate HARVEY D. PEYTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> President	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate	District: <u>02</u> State: <u>WV</u>
Calendar Year-To-Date Per Election for Office Sought		<div> <div>_____</div> <div>0.00</div> </div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee West Virginians for Life, Inc.		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 18 / 2016	
Mailing Address 25 Canyon Rd			Amount 0.08	
City Morgantown	State WV	Zip Code 26508	Transaction ID : SE.6721	
Purpose of Expenditure Printing	Category/ Type		Date of Disbursement or Obligation MM / DD / YYYY	
Name of Federal Candidate DAVID B MCKINLEY	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> President	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate	District: 01 State: WV
Calendar Year-To-Date Per Election for Office Sought	0.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	<div style="text-align: right; margin-bottom: 5px;">0.00</div> <div style="display: flex; justify-content: space-between; border-top: 1px solid black; border-bottom: 1px solid black; height: 20px;"> </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	<div style="display: flex; justify-content: space-between; border-top: 1px solid black; border-bottom: 1px solid black; height: 20px;"> </div>
(c) TOTAL Independent Expenditures.....	▶	<div style="display: flex; justify-content: space-between; border-top: 1px solid black; border-bottom: 1px solid black; height: 20px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

[Electronically Filed]

Date _____

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 31 OF 38
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00157537</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>			
Full Name of Payee West Virginians for Life, Inc.		<input checked="" type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div> 0.23	
Mailing Address 25 Canyon Rd		Transaction ID : SE.6722 Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>	
City Morgantown		State WV	
Zip Code 26508		Category/ Type <div style="border-bottom: 1px solid black; width: 100px;"></div>	
Purpose of Expenditure Printing		Name of Federal Candidate ALEXANDER XAVIER MOONEY	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 0.00		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WV</u>	
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
Full Name of Payee West Virginians for Life, Inc.		<input checked="" type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div> 0.62	
Mailing Address 25 Canyon Rd		Transaction ID : SE.6723 Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>	
City Morgantown		State WV	
Zip Code 26508		Category/ Type <div style="border-bottom: 1px solid black; width: 100px;"></div>	
Purpose of Expenditure Postage and Printing		Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 0.00		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____	
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		<div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div> 0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶		<div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div>	
(c) TOTAL Independent Expenditures..... ▶		<div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <i>Mary Anne Buchanan</i>		Date <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> [Electronically Filed]	

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 32 OF 38
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00157537 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; margin: 0 5px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; margin: 0 5px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; margin: 0 5px;"></div>		

Full Name of Payee West Virginians for Life, Inc.		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; margin: 0 5px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; margin: 0 5px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; margin: 0 5px;"></div>	
Mailing Address 25 Canyon Rd		Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px; margin: 0 5px;"></div> 0.62		
City Morgantown	State WV	Zip Code 26508	Transaction ID : SE.6724	
Purpose of Expenditure Postage and Printing	Category/Type <div style="display: inline-block; border-bottom: 1px solid black; width: 60px; margin: 0 5px;"></div>		Date of Disbursement or Obligation MM / DD / YYYY <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; margin: 0 5px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; margin: 0 5px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; margin: 0 5px;"></div>	
Name of Federal Candidate HARVEY D. PEYTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WV</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px; margin: 0 5px;"></div> 0.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee West Virginians for Life, Inc.		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; margin: 0 5px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; margin: 0 5px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; margin: 0 5px;"></div>	
Mailing Address 25 Canyon Rd		Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px; margin: 0 5px;"></div> 0.61		
City Morgantown	State WV	Zip Code 26508	Transaction ID : SE.6725	
Purpose of Expenditure Postage and Printing	Category/Type <div style="display: inline-block; border-bottom: 1px solid black; width: 60px; margin: 0 5px;"></div>		Date of Disbursement or Obligation MM / DD / YYYY <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; margin: 0 5px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; margin: 0 5px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; margin: 0 5px;"></div>	
Name of Federal Candidate ALEXANDER XAVIER MOONEY		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WV</u>	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px; margin: 0 5px;"></div> 0.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="display: inline-block; border-bottom: 1px solid black; width: 150px; margin: 0 5px;"></div> 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="display: inline-block; border-bottom: 1px solid black; width: 150px; margin: 0 5px;"></div>
(c) TOTAL Independent Expenditures..... ▶	<div style="display: inline-block; border-bottom: 1px solid black; width: 150px; margin: 0 5px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

[Electronically Filed]

Date

 MM / DD / YYYY
 / /

Signature

Full Name of Payee West Virginians for Life, Inc.		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>04 / 29 / 2016</div> </div>	
Mailing Address 25 Canyon Rd			Amount <div> <div>Amount</div> <div>12.78</div> </div>	
City Morgantown	State WV	Zip Code 26508	Transaction ID : SE.6749 Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> <div></div> </div>	
Purpose of Expenditure Printing Labels		Category/ Type		
Name of Federal Candidate DAVID B MCKINLEY		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought		<div> <div>Year-To-Date</div> <div>0.00</div> </div>	District: <u>01</u> State: <u>WV</u> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	▶	
(c) TOTAL Independent Expenditures.....	▶	

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 34 OF 38
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y		

Full Name of Payee West Virginians for Life, Inc.		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 04 / 29 / 2016	
Mailing Address 25 Canyon Rd			Amount 15.94	
City Morgantown	State WV	Zip Code 26508	Transaction ID : SE.6750	
Purpose of Expenditure Printing Labels	Category/ Type		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Name of Federal Candidate ALEXANDER XAVIER MOONEY		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WV</u>	
Calendar Year-To-Date Per Election for Office Sought		0.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee West Virginians for Life, Inc.		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 04 / 29 / 2016	
Mailing Address 25 Canyon Rd			Amount 15.94	
City Morgantown	State WV	Zip Code 26508	Transaction ID : SE.6751	
Purpose of Expenditure Printing Labels	Category/ Type		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Name of Federal Candidate HARVEY D. PEYTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WV</u>	
Calendar Year-To-Date Per Election for Office Sought		0.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

[Electronically Filed]

Date

04 / 28 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 35 OF 38
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00157537</div>	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>			
Full Name of Payee West Virginians for Life, Inc.		<input checked="" type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 04 / 29 / 2016	
Mailing Address 25 Canyon Rd		Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div> 10.67	
City Morgantown	State WV	Zip Code 26508	Transaction ID : SE.6752 Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>
Purpose of Expenditure Printing Labels		Category/ Type <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div>	
Name of Federal Candidate EVAN H JENKINS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>03</u> <input type="checkbox"/> President State: <u>WV</u>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ <div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div> 0.00	
Full Name of Payee West Virginians for Life, Inc.		<input checked="" type="checkbox"/> Memo Item Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 04 / 29 / 2016	
Mailing Address 25 Canyon Rd		Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div> 12.79	
City Morgantown	State WV	Zip Code 26508	Transaction ID : SE.6753 Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>
Purpose of Expenditure Printing Labels		Category/ Type <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div>	
Name of Federal Candidate MIKE MANYPENNY		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>01</u> <input type="checkbox"/> President State: <u>WV</u>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ <div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div> 0.00	
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶		<div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div> 0.00	
(b) SUBTOTAL of Unitemized Independent Expenditures ▶		<div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div>	
(c) TOTAL Independent Expenditures..... ▶		<div style="display: inline-block; border-bottom: 1px solid black; width: 200px;"></div>	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature <i>Mary Anne Buchanan</i>		Date <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> 04 / 28 / 2016	
[Electronically Filed]			

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 36 OF 38
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full)

WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

FEC IDENTIFICATION NUMBER ▼

C C00157537

Check if ☐ 24-hour report ☐ 48-hour report ☐ New report ☐ Amends report filed on

M M M / D D D / Y Y Y Y Y Y

Full Name of Payee

West Virginians for Life, Inc.

☒ Memo Item

Date of Public Distribution/Dissemination

M M M / D D D / Y Y Y Y Y Y
04 29 2016

Mailing Address

25 Canyon Rd

Amount

City

Morgantown

State

WV

Zip Code

26508

Purpose of Expenditure

Printing Labels

Category/
Type

15.95

Transaction ID : SE.6754

Date of Disbursement or Obligation

M M M / D D D / Y Y Y Y Y Y

Name of Federal Candidate

MARK ALLEN HUNT

☐ Support☒ Oppose

Office Sought:

☒ House

District: 02

☐ President☐ Senate

State: WV

Calendar Year-To-Date
Per Election for Office Sought

0.00

Disbursement For: ☒ Primary ☐ General
2016☐ Other (specify) ▶

Full Name of Payee

West Virginians for Life, Inc State PAC Fund

☒ Memo Item

Date of Public Distribution/Dissemination

M M M / D D D / Y Y Y Y Y Y
04 18 2016

Mailing Address

25 Canyon Rd

Amount

City

Morgantown

State

WV

Zip Code

26508

Purpose of Expenditure

Postage and Printing

Category/
Type

0.34

Transaction ID : SE.6735

Date of Disbursement or Obligation

M M M / D D D / Y Y Y Y Y Y

Name of Federal Candidate

DAVID B MCKINLEY

☒ Support☐ Oppose

Office Sought:

☒ House

District: 01

☐ President☐ Senate

State: WV

Calendar Year-To-Date
Per Election for Office Sought

0.00

Disbursement For: ☒ Primary ☐ General
2016☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

0.00

(b) SUBTOTAL of Unitemized Independent Expenditures ▶

(c) TOTAL Independent Expenditures..... ▶

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
04 28 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 37 OF 38
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE		FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y		

Full Name of Payee West Virginians for Life, Inc State PAC Fund		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 04 / 18 / 2016	
Mailing Address 25 Canyon Rd			Amount 1.40	
City Morgantown	State WV	Zip Code 26508	Transaction ID : SE.6736	
Purpose of Expenditure Postage and Printing		Category/Type 	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Name of Federal Candidate EVAN H JENKINS		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>03</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WV</u>	
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee West Virginians for Life, Inc State PAC Fund		<input checked="" type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination 04 / 18 / 2016	
Mailing Address 25 Canyon Rd			Amount 0.22	
City Morgantown	State WV	Zip Code 26508	Transaction ID : SE.6740	
Purpose of Expenditure Postage		Category/Type 	Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Name of Federal Candidate HARVEY D. PEYTON		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WV</u>	
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Mary Anne Buchanan

[Electronically Filed]

Date

04 / 28 / 2016

Signature

