

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 5019 MacCorkle Avenue SW  
 Check if different than previously reported. (ACC)  
South Charleston WV 25309

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

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

5. Covering Period 08 01 2006 through 08 31 2006

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 Theresa Waxman

Signature of Treasurer Electronically Filed by Theresa Waxman Date 06 25 2007

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

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

Report Covering the Period: From: 

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		4976.44
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	4565.94									
(c) Total Receipts (from Line 19) .....	21383.99	97478.99								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	25949.93	102455.43								
7. Total Disbursements (from Line 31) .....	19060.13	95565.63								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	6889.80	6889.80								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

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

Report Covering the Period: From: 

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	6

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	4945.00	55991.00
(i) Itemized (use Schedule A) .....	6438.99	21337.99
(ii) Unitemized .....	11383.99	77328.99
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	500.00
(b) Political Party Committees .....	10000.00	19650.00
(c) Other Political Committees (such as PACs) .....	21383.99	97478.99
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
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 Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	21383.99	97478.99
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	21383.99	97478.99

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	19060.13	95565.63
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	19060.13	95565.63
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	19060.13	95565.63
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	19060.13	95565.63

**DETAILED SUMMARY PAGE**  
of Disbursements

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) .....	21383.99	97478.99
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	21383.99	97478.99
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	19060.13	95565.63
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	19060.13	95565.63

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 246 Ridgeway Drive

City State Zip Code  
Bridgeport WV 26330

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
08 / 08 / 2006

Transaction ID: SA11A1.5418

Amount of Each Receipt this Period  
250.00

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

Mailing Address 1825 Locust Ave

City State Zip Code  
Fairmont WV 26554

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

Name of Employer Self Occupation Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
08 / 15 / 2006

Transaction ID: SA11A1.5420

Amount of Each Receipt this Period  
1000.00

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

Mailing Address 993 Gas Valley Road

City State Zip Code  
New Cumberland WV 26047

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

Name of Employer Retired Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt  
MM / DD / YYYY  
08 / 01 / 2006

Transaction ID: SA11A1.5312

Amount of Each Receipt this Period  
240.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1490.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. Betty Ireland</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 07 / 2006	
Mailing Address 948 Ridgemont Rd		<b>Transaction ID: SA11A1.5406</b>	
City Charleston	State WV	Zip Code 25314	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer State of West Virginia	Occupation Secretary of State		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>B. Joseph Long</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 01 / 2006	
Mailing Address 85 Flat Top Lake Rd		<b>Transaction ID: SA11A1.5313</b>	
City Ghent	State WV	Zip Code 25843	Amount of Each Receipt this Period 240.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 596.00		

Full Name (Last, First, Middle Initial) <b>C. Robert Luchetti</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 29 / 2006	
Mailing Address Pleasant Cove Farm Rd 2 Box 419		<b>Transaction ID: SA11A1.5440</b>	
City Triadelphia	State WV	Zip Code 26059	Amount of Each Receipt this Period 135.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self	Occupation Farmer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1375.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

<b>A.</b> Full Name (Last, First, Middle Initial) LB Lyon		Date of Receipt M M / D D / Y Y Y Y 08 / 07 / 2006	
Mailing Address 114 Center St		<b>Transaction ID:</b> SA11A1.5408	
City Madison	State WV	Amount of Each Receipt this Period 240.00	
Zip Code 25130		FEC ID number of contributing federal political committee. C	
Name of Employer Lyon Company	Occupation Owner	Aggregate Year-to-Date ▼ 280.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>B.</b> Full Name (Last, First, Middle Initial) Rick Modesitt		Date of Receipt M M / D D / Y Y Y Y 08 / 01 / 2006	
Mailing Address PO Box 2206		<b>Transaction ID:</b> SA11A1.5368	
City Parkersburg	State WV	Amount of Each Receipt this Period 40.00	
Zip Code 26102		FEC ID number of contributing federal political committee. C	
Name of Employer Wood County	Occupation Commissioner	Aggregate Year-to-Date ▼ 310.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>C.</b> Full Name (Last, First, Middle Initial) Scott D. Reed		Date of Receipt M M / D D / Y Y Y Y 08 / 31 / 2006	
Mailing Address 1 Damian Rd		<b>Transaction ID:</b> SA11A1.5491	
City Wheeling	State WV	Amount of Each Receipt this Period 240.00	
Zip Code 26003		FEC ID number of contributing federal political committee. C	
Name of Employer EPS Industries	Occupation Vice President	Aggregate Year-to-Date ▼ 412.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		In-kind - Offide & Mailing Supplies	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	520.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A.</b> Marshall W Robinson		Date of Receipt M M / D D / Y Y Y Y Y 08 / 01 / 2006	
Mailing Address 118883 Widen Ridge Road		<b>Transaction ID:</b> SA11A1.5381	
City State Zip Code Clay WV 25043	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Allegheny Surveys	Occupation Owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2105.00		

Full Name (Last, First, Middle Initial) <b>B.</b> William B Snyder		Date of Receipt M M / D D / Y Y Y Y Y 08 / 01 / 2006	
Mailing Address PO Box 829		<b>Transaction ID:</b> SA11A1.5314	
City State Zip Code Lewisburg WV 24901	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer RBS Inc	Occupation Vice President Engineering		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1042.00		

Full Name (Last, First, Middle Initial) <b>C.</b> Lynn Staton		Date of Receipt M M / D D / Y Y Y Y Y 08 / 01 / 2006	
Mailing Address 368 Jaguar Drive		<b>Transaction ID:</b> SA11A1.5389	
City State Zip Code Inwood WV 25428	Amount of Each Receipt this Period 80.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Homemaker	Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1120.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 22
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A.</b> Lynn Staton		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 4 / 2 0 0 6
Mailing Address 368 Jaguar Drive		Transaction ID: SA11A1.5429
City State Zip Code Inwood WV 25428	Amount of Each Receipt this Period 120.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Homemaker	Occupation Homemaker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Ronald Stone		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6
Mailing Address 149 Waterside Cir		Transaction ID: SA11A1.5320
City State Zip Code Winfield WV 25213	Amount of Each Receipt this Period 80.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1080.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ronald Stone		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 6
Mailing Address 149 Waterside Cir		Transaction ID: SA11A1.5391
City State Zip Code Winfield WV 25213	Amount of Each Receipt this Period 40.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Retired	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1120.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	240.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 11 / 22	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

**A.** Full Name (Last, First, Middle Initial)  
John R Williams

Mailing Address 7 Azalea Court

City State Zip Code  
Wheeling WV 26003

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

Name of Employer Retired Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 08 / 29 / 2006

Transaction ID: SA11A1.5457

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	4945.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 / 22
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

**A.** Full Name (Last, First, Middle Initial)  
Shelley Moore Capito for Congress

Mailing Address PO Box 11519

City State Zip Code  
Charleston WV 25339

FEC ID number of contributing federal political committee. **C** C00347849

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
08 / 22 / 2006

**Transaction ID:** SA11C.5424

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
The Commonwealth PAC

Mailing Address 45 School St, Fl 2

City State Zip Code  
Boston MA 02108

FEC ID number of contributing federal political committee. **C** C00403022

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
08 / 08 / 2006

**Transaction ID:** SA11C.5416

Amount of Each Receipt this Period  
5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	10000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	10000.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 22

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

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

Full Name (Last, First, Middle Initial) <b>A. American Electric Power</b>		<b>Transaction ID:</b> SB21B.5464
Mailing Address PO Box 24413		Date of Disbursement MM / DD / YYYY 08 / 19 / 2006
City Canton	State OH	Zip Code 44701
Purpose of Disbursement HQ- Electric Bill	Amount of Each Disbursement this Period 157.16	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Michael Ankrom</b>		<b>Transaction ID:</b> SB21B.5490
Mailing Address 231 Clemms Rd		Date of Disbursement MM / DD / YYYY 08 / 01 / 2006
City Huntington	State WV	Zip Code 25705
Purpose of Disbursement Consultant-computer work	Amount of Each Disbursement this Period 1000.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Michael Ankrom</b>		<b>Transaction ID:</b> SB21B.5465
Mailing Address 231 Clemms Rd		Date of Disbursement MM / DD / YYYY 08 / 15 / 2006
City Huntington	State WV	Zip Code 25705
Purpose of Disbursement Consulting- computer work	Amount of Each Disbursement this Period 1000.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>2157.16</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

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

Full Name (Last, First, Middle Initial) <b>A. Michael Ankrom</b>		<b>Transaction ID: SB21B.5472</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 6	
Mailing Address 231 Clemms Rd		Amount of Each Disbursement this Period 400.00	
City Huntington	State WV	Zip Code 25705	Category/ Type
Purpose of Disbursement Per diem		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>B. Michael Ankrom</b>		<b>Transaction ID: SB21B.5485</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6	
Mailing Address 231 Clemms Rd		Amount of Each Disbursement this Period 1000.00	
City Huntington	State WV	Zip Code 25705	Category/ Type
Purpose of Disbursement Consulting-computer work		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) <b>C. Charter Communication</b>		<b>Transaction ID: SB21B.5467</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 5 / 2 0 0 6	
Mailing Address 135 Lasalle D 8063		Amount of Each Disbursement this Period 320.12	
City Chicago	State IL	Zip Code 60674	Category/ Type
Purpose of Disbursement HQ- Cable & Internet Service		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1720.12
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Erie Insurance</b>		<b>Transaction ID:</b> SB21B.5478	
Mailing Address 100 Erie Insurance Place		Date of Disbursement MM / DD / YYYY 08 / 19 / 2006	
City Erie	State PA	Zip Code 16530	Amount of Each Disbursement this Period 382.00
Purpose of Disbursement HQ- Insurance		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. ExxonMobil</b>		<b>Transaction ID:</b> SB21B.5477	
Mailing Address PO Box 4597		Date of Disbursement MM / DD / YYYY 08 / 19 / 2006	
City Carol Stream	State IL	Zip Code 60197	Amount of Each Disbursement this Period 398.67
Purpose of Disbursement Automobile Gas Bill		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Fibernet</b>		<b>Transaction ID:</b> SB21B.5466	
Mailing Address PO Box 2021		Date of Disbursement MM / DD / YYYY 08 / 05 / 2006	
City Mechanicsburg	State PA	Zip Code 17055	Amount of Each Disbursement this Period 936.30
Purpose of Disbursement HQ- Phone Bill		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1716.97</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Anne McCuskey</b>		<b>Transaction ID: SB21B.5469</b> Date of Disbursement 08 / 09 / 2006	
Mailing Address 10 Abney Circle		Amount of Each Disbursement this Period 4870.12	
City Charleston State WV Zip Code 25314	Purpose of Disbursement Summer Meeting Rental Hall & Bills Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Suddenlink</b>		<b>Transaction ID: SB21B.5469.0</b> Date of Disbursement 07 / 31 / 2006	
Mailing Address P.O. Box 742529		Amount of Each Disbursement this Period 160.06	
City Cincinnati, State OH Zip Code 45274	Purpose of Disbursement Reimburse for HQ Cable Bill Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. Charleston Marriott Town Center</b>		<b>Transaction ID: SB21B.5469.1</b> Date of Disbursement 07 / 26 / 2006	
Mailing Address 200 Lee Street		Amount of Each Disbursement this Period 3824.62	
City Charleston State WV Zip Code 25301	Purpose of Disbursement Banquet charges-Summer Conference Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4870.12
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER: (check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Charleston Marriott Town Center</b>		Transaction ID: SB21B.5469.2 Date of Disbursement MM / DD / YYYY 08 / 01 / 2006	
Mailing Address 200 Lee Street		Amount of Each Disbursement this Period 730.38	
City Charleston State WV Zip Code 25301	Purpose of Disbursement Lodging for Summer Conference Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>B. Anne McCuskey</b>		Transaction ID: SB21B.5469.3 Date of Disbursement MM / DD / YYYY 08 / 09 / 2006	
Mailing Address 10 Abney Circle		Amount of Each Disbursement this Period 155.06	
City Charleston State WV Zip Code 25314	Purpose of Disbursement overpayment error Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. Anne McCuskey</b>		Transaction ID: SB21B.6396 Date of Disbursement MM / DD / YYYY 08 / 30 / 2006	
Mailing Address 10 Abney Circle		Amount of Each Disbursement this Period 38.99	
City Charleston State WV Zip Code 25314	Purpose of Disbursement In-kind - UPS expenses to be reimbursed Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	38.99
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Anne McCuskey</b>		<b>Transaction ID: SB21B.5484</b> Date of Disbursement 08 / 31 / 2006	
Mailing Address 10 Abney Circle		Amount of Each Disbursement this Period 1851.99	
City Charleston State WV Zip Code 25314	Purpose of Disbursement Office Supplies, Travel Expenses	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

Full Name (Last, First, Middle Initial) <b>B. U.S.Post Office</b>		<b>Transaction ID: SB21B.5484.0</b> Date of Disbursement 07 / 31 / 2006	
Mailing Address Dunbar Main P.O.		Amount of Each Disbursement this Period 66.00	
City Dunbar State WV Zip Code 25064	Purpose of Disbursement P.O. Box Rental	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

[MEMO ITEM]

Full Name (Last, First, Middle Initial) <b>C. OfficeMax</b>		<b>Transaction ID: SB21B.5484.3</b> Date of Disbursement 07 / 27 / 2006	
Mailing Address 228 RLH Blvd		Amount of Each Disbursement this Period 84.80	
City Charleston State WV Zip Code 25309	Purpose of Disbursement Printing	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Candidate Name	

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

1851.99

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Charleston Marriott Town Center</b>		<b>Transaction ID:</b> SB21B.5484.4 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 9 / 2 0 0 6
Mailing Address 200 Lee Street		Amount of Each Disbursement this Period 212.94
City Charleston State WV Zip Code 25301	[MEMO ITEM]	
Purpose of Disbursement Summer Conference Expenses Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. Travelosity</b>		<b>Transaction ID:</b> SB21B.5484.7 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 3 1 / 2 0 0 6
Mailing Address 11603 Cross Winds Way Ste 125		Amount of Each Disbursement this Period 1269.20
City San Antonio State TX Zip Code 78233	[MEMO ITEM]	
Purpose of Disbursement airfare Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Mountaineer Gas</b>		<b>Transaction ID:</b> SB21B.5474 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 6
Mailing Address PO Box 362		Amount of Each Disbursement this Period 31.27
City Charleston State WV Zip Code 25322	[MEMO ITEM]	
Purpose of Disbursement HQ- Gas Bill Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	31.27
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Scott D. Reed</b>		<b>Transaction ID: SB21B.5492</b> Date of Disbursement 08 / 31 / 2006	
Mailing Address 1 Damian Rd		Amount of Each Disbursement this Period 240.00	
City Wheeling	State WV	Zip Code 26003	
Purpose of Disbursement In-kind - Offide & Mailing Supplies		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		State: District:	

Full Name (Last, First, Middle Initial) <b>B. Marti Riggall</b>		<b>Transaction ID: SB21B.5470</b> Date of Disbursement 08 / 19 / 2006	
Mailing Address 838 Carroll Road		Amount of Each Disbursement this Period 3500.00	
City Charleston	State WV	Zip Code 25314	
Purpose of Disbursement Fundraising Consulting		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		State: District:	

Full Name (Last, First, Middle Initial) <b>C. Marti Riggall</b>		<b>Transaction ID: SB21B.5486</b> Date of Disbursement 08 / 31 / 2006	
Mailing Address 838 Carroll Road		Amount of Each Disbursement this Period 1000.00	
City Charleston	State WV	Zip Code 25314	
Purpose of Disbursement Fundraising Consulting		Category/ Type	
Candidate Name		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4740.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. Stratford Springs</b>		<b>Transaction ID:</b> SB21B.5487 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 6
Mailing Address 355 Oglebay Drive		Amount of Each Disbursement this Period 532.35
City Wheeling	State WV Zip Code 26003	
Purpose of Disbursement Brkfst Event-Fundraiser for Party Exp		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. West Virginia American Water</b>		<b>Transaction ID:</b> SB21B.5473 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 6
Mailing Address PO Box 70824		Amount of Each Disbursement this Period 38.19
City Charlotte	State NC Zip Code 28272	
Purpose of Disbursement HQ- Water Bill		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. West Virginia Republican State Executive Committee</b>		<b>Transaction ID:</b> SB21B.5482 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 2 4 / 2 0 0 6
Mailing Address 5019 MacCorkle Ave SW		Amount of Each Disbursement this Period 400.00
City South Charleston	State WV Zip Code 25303	
Purpose of Disbursement Transfer		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	970.54
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial)

**A. Words & Music**

Mailing Address 355 Oglebay Drive

City Wheeling State WV Zip Code 26003

Purpose of Disbursement  
Supplies for Fundraiser for Party Exp

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.5480

Date of Disbursement

08 / 24 / 2006

Amount of Each Disbursement this Period

806.00

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

806.00

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

18903.16