



**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

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

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		18880.78
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	2717.12									
(c) Total Receipts (from Line 19) .....	11393.00	122552.04								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	14110.12	141432.82								
7. Total Disbursements (from Line 31) .....	6032.27	133354.97								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	8077.85	8077.85								
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) .....	39927.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name

West Virginia Republican Party, Inc.

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	0

D	D
3	1

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	5405.00	72005.26
(ii) Unitemized .....	3988.00	40294.78
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	9393.00	112300.04
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	2000.00	9452.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	11393.00	121752.04
12. Transfers From Affiliated/Other Party Committees .....	0.00	800.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	11393.00	122552.04
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	11393.00	122552.04

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<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.....	6032.27	133354.97
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	6032.27	133354.97
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))..	6032.27	133354.97
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6032.27	133354.97

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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) .....	11393.00	121752.04
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	11393.00	121752.04
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	6032.27	133354.97
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	6032.27	133354.97

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

**A.** Full Name (Last, First, Middle Initial)  
Mr. Jackson L. Smith

Mailing Address P.O. Box 457

City State Zip Code  
Lost Creek WV 26385-0457

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

Name of Employer Self Occupation N/a

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
415.00

Date of Receipt  
MM / DD / YYYY  
10 / 01 / 2009

**Transaction ID:** A7FAE0368B33B428A9F4

Amount of Each Receipt this Period  
25.00

WVGOP

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

Mailing Address 105 Newcomer Road

City State Zip Code  
Charleston WV 25309-8544

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1035.00

Date of Receipt  
MM / DD / YYYY  
10 / 01 / 2009

**Transaction ID:** AB59750D295674F459EF

Amount of Each Receipt this Period  
50.00

WVGOP

**C.** Full Name (Last, First, Middle Initial)  
Rosanne Shupe

Mailing Address PO Box 279

City State Zip Code  
Maxwelton WV 24957-0279

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

Name of Employer N/a Occupation Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
MM / DD / YYYY  
10 / 01 / 2009

**Transaction ID:** AD78BA882F94B45CBAA0

Amount of Each Receipt this Period  
25.00

WVGOP

**SUBTOTAL** of Receipts This Page (optional) ..... ► **100.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 27

(check only one)

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

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

**A.**

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

Mailing Address 87 Gihon Meadows Drive, Apt. 126

City Parkersburg State WV Zip Code 26101-7716

FEC ID number of contributing federal political committee. C

Name of Employer UPS Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1180.00

Date of Receipt 10 / 01 / 2009

**Transaction ID:** A5D581D1190B2403BA0B

Amount of Each Receipt this Period 25.00

WVGOP

**B.**

Full Name (Last, First, Middle Initial)  
Max W Grove

Mailing Address 522 River Road

City Belington State WV Zip Code 26250-9403

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation N/a

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt 10 / 01 / 2009

**Transaction ID:** AB68D02DA678F468AA6D

Amount of Each Receipt this Period 10.00

WVGOP

**C.**

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

Mailing Address 441 High Street

City Jane Lew State WV Zip Code 26378-7948

FEC ID number of contributing federal political committee. C

Name of Employer Retired Occupation Dance Teacher

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 01 / 2009

**Transaction ID:** AD50C9068FC004D0B8A4

Amount of Each Receipt this Period 25.00

WVGOP

**SUBTOTAL** of Receipts This Page (optional) ..... 60.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 8 / 27</span>
	(check only one)
<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"/>	<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) Jonathan Ryan Miller		Date of Receipt MM / DD / YYYY 10 / 01 / 2009		
	Mailing Address 134 Whitman Lane		<b>Transaction ID:</b> A80770C6AD1DE4E0C8B5		
	City Inwood	State WV	Zip Code 25428-4087	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C		WVGOP		
	Name of Employer Lincoln Mortgage, LLC	Occupation Mortgage Broker		Aggregate Year-to-Date 210.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>B.</b>	Full Name (Last, First, Middle Initial) Craig P Blair		Date of Receipt MM / DD / YYYY 10 / 01 / 2009		
	Mailing Address 47 Wasser Drive		<b>Transaction ID:</b> A860D5B0A3DD94C92B69		
	City Martinsburg	State WV	Zip Code 25403-0885	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C		WVGOP		
	Name of Employer Sunset Water, Inc.	Occupation self		Aggregate Year-to-Date 2225.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>C.</b>	Full Name (Last, First, Middle Initial) Dr. Douglas E. McKinney		Date of Receipt MM / DD / YYYY 10 / 08 / 2009		
	Mailing Address 636 Rivendell Drive		<b>Transaction ID:</b> A427B9F18F2814A7FAC0		
	City Bridgeport	State WV	Zip Code 26330-1358	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C		WVGOP		
	Name of Employer Va Medical Center	Occupation M.D.		Aggregate Year-to-Date 7385.94	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼					

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	130.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 27
	<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)  
Mr. Lewis H Rexroad

Mailing Address 87 Gihon Meadows Drive, Apt. 126

City Parkersburg State WV Zip Code 26101-7716

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

Name of Employer UPS Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1305.00

Date of Receipt 10 / 09 / 2009

**Transaction ID:** A1E7BE078800344BC826

Amount of Each Receipt this Period 125.00

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

Mailing Address 600 55th. St.

City Vienna State WV Zip Code 26105-3218

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

Name of Employer Information Requested Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1125.00

Date of Receipt 10 / 13 / 2009

**Transaction ID:** AD1C50ACB4E6B42F5B28

Amount of Each Receipt this Period 100.00

**C.** Full Name (Last, First, Middle Initial)  
Hon. Carol D. Miller

Mailing Address 1316 12th. St.

City Huntington State WV Zip Code 25701-4015

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

Name of Employer State of WV Occupation Delegate

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt 10 / 14 / 2009

**Transaction ID:** AB28F4508EB22470A85E

Amount of Each Receipt this Period 50.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 275.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 27
	<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)  
Dr. Michael Stewart

Mailing Address 49 Juniper Dr.

City State Zip Code  
Bridgeport WV 26330-9343

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

Name of Employer Self Occupation  
Self Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

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

**Transaction ID:** ACF147F58E06B489BAAD

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Samuel N. Kusic

Mailing Address 3900 Main Street

City State Zip Code  
Weirton WV 26062-5314

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

Name of Employer Self Occupation  
Self Physician

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

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

**Transaction ID:** ABEA316E41AEA410CB44

Amount of Each Receipt this Period  
1000.00

**C.**

Full Name (Last, First, Middle Initial)  
Eric Frankovitch

Mailing Address 1366 Lick Run Rd.

City State Zip Code  
Weirton WV 26062-5512

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

Name of Employer Self Occupation  
Self Attorney

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

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

**Transaction ID:** A114993D4156D48C48F5

Amount of Each Receipt this Period  
1000.00

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

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 27
	<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) Barbara H Tuckwiller		Date of Receipt
	Mailing Address 2245 Lew Suphur Pike		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Lewisburg	WV	24901
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A28BC929973AA4FA8AB0
Name of Employer Self		Occupation	Amount of Each Receipt this Period
		Farmer/vitner	<input type="text"/>
Receipt For:		Aggregate Year-to-Date ▼	600.00
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text"/>	
<input type="checkbox"/> Other (specify) ▼		1200.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Eleanor W. Herkness		Date of Receipt
	Mailing Address P.O. Box 511		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Lewisburg	WV	24901-0511
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A287959F4D46E40DDAB9
Name of Employer Retired		Occupation	Amount of Each Receipt this Period
		Retired	<input type="text"/>
Receipt For:		Aggregate Year-to-Date ▼	500.00
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text"/>	
<input type="checkbox"/> Other (specify) ▼		3500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Deborah M. Fischer		Date of Receipt
	Mailing Address 640 Rivendell Dr.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Bridgeport	WV	26330-1358
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> A2F464519199D4FEF9D0
Name of Employer Information Requested		Occupation	Amount of Each Receipt this Period
		Information Requested	<input type="text"/>
Receipt For:		Aggregate Year-to-Date ▼	500.00
<input type="checkbox"/> Primary <input type="checkbox"/> General		<input type="text"/>	
<input type="checkbox"/> Other (specify) ▼		500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/>	1600.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 27  
(check only one)

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

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

**A.**

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

Mailing Address P.O. Box 1210

City State Zip Code  
Gilbert WV 25621-1210

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

Name of Employer Occupation  
International Industries Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

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

**Transaction ID:** ABA1881D47202463E9FC

Amount of Each Receipt this Period  
500.00

**B.**

Full Name (Last, First, Middle Initial)  
Catherine T McKinney

Mailing Address 636 Rivendell Drive

City State Zip Code  
Bridgeport WV 26330-1358

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

Name of Employer Occupation  
None Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 3 0 / 2 0 0 9

**Transaction ID:** A77695ED736554890840

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
Jonathan Ryan Miller

Mailing Address 134 Whitman Lane

City State Zip Code  
Inwood WV 25428-4087

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

Name of Employer Occupation  
Lincoln Mortgage, LLC Mortgage Broker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 3 0 / 2 0 0 9

**Transaction ID:** A0CB74DB35B014AE4B78

Amount of Each Receipt this Period  
10.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **760.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 27  
(check only one)

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

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

**A.**

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

Mailing Address 47 Wasser Drive

City State Zip Code  
Martinsburg WV 25403-0885

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

Name of Employer Occupation  
Sunset Water, Inc. self

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2245.00

Date of Receipt  
MM / DD / YYYY  
10 / 30 / 2009

**Transaction ID:** A8319EBB44B6340E68B3

Amount of Each Receipt this Period  
20.00

**B.**

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

Mailing Address 238 Bartow Drive

City State Zip Code  
Barboursville WV 25504-1126

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

Name of Employer Occupation  
Cabell Huntington Hospital CRNA

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
MM / DD / YYYY  
10 / 30 / 2009

**Transaction ID:** AEAB1DACC72D34C2EA40

Amount of Each Receipt this Period  
50.00

**C.**

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

Mailing Address 87 Gihon Meadows Drive, Apt. 126

City State Zip Code  
Parkersburg WV 26101-7716

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

Name of Employer Occupation  
UPS Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1330.00

Date of Receipt  
MM / DD / YYYY  
10 / 30 / 2009

**Transaction ID:** A0E669FF7682D4641B34

Amount of Each Receipt this Period  
25.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 95.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 27
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Rosanne Shupe		Date of Receipt
	Mailing Address PO Box 279		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Maxwelton	WV	24957-0279
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer N/a		Occupation Retired	<b>Transaction ID:</b> AED57739FD8B5427E876
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="375.00"/>	<input type="text" value="25.00"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Jackson L. Smith		Date of Receipt
	Mailing Address P.O. Box 457		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Lost Creek	WV	26385-0457
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Self		Occupation N/a	<b>Transaction ID:</b> ABB504789F0254107818
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="440.00"/>	<input type="text" value="25.00"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) Melody L. Potter		Date of Receipt
	Mailing Address 105 Newcomer Road		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Charleston	WV	25309-8544
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Tri-Star Coal Sales Company, Inc.		Occupation Owner	<b>Transaction ID:</b> A618C23FB8643413DBF9
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1085.00"/>	<input type="text" value="50.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="100.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 / 27
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Max W Grove		Date of Receipt MM / DD / YYYY 10 / 30 / 2009		
	Mailing Address 522 River Road		<b>Transaction ID:</b> ABA1CB67E28704459B26		
	City Belington	State WV	Zip Code 26250-9403	Amount of Each Receipt this Period 10.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired	Occupation N/a			
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) Ms. Maxine G. Olson		Date of Receipt MM / DD / YYYY 10 / 30 / 2009		
	Mailing Address 441 High Street		<b>Transaction ID:</b> A2A9E9E79BBE7474BA56		
	City Jane Lew	State WV	Zip Code 26378-7948	Amount of Each Receipt this Period 25.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Retired	Occupation Dance Teacher			
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 375.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	35.00
<b>TOTAL</b> This Period (last page this line number only) .....	5405.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 16 / 27	
	(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"/> 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 ▼  
2000.00

Date of Receipt  

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

Transaction ID: A8084A1D45B924175AEC

Amount of Each Receipt this Period  
2000.00

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

# 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 17 / 27

<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.

<b>A.</b> Full Name (Last, First, Middle Initial) Troy A. Berman <hr/> Mailing Address 11 Greenbrier St <hr/> City Charleston State WV Zip Code 25311-2112 <hr/> Purpose of Disbursement Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> BBE7ED235310F4312BB9 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 9
	Amount of Each Disbursement this Period 1666.67
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Troy A. Berman <hr/> Mailing Address 11 Greenbrier St <hr/> City Charleston State WV Zip Code 25311-2112 <hr/> Purpose of Disbursement Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> BCACD7B41208846D7887 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 9
	Amount of Each Disbursement this Period 378.50
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) USPS <hr/> Mailing Address 1002 Lee Street East <hr/> City Charleston State WV Zip Code 25301 <hr/> Purpose of Disbursement Non-Profit Permit fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> B40090C3D29EB4479920 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 0 8 / 2 0 0 9
	Amount of Each Disbursement this Period 370.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

2415.17

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 18 / 27

<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.

<p><b>A.</b> Full Name (Last, First, Middle Initial) Constant Contact</p> <p>Mailing Address 1601 Trapelo Road, Suite 329</p> <p>City Waltham State MA Zip Code 02451</p> <p>Purpose of Disbursement Email Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B3D47BA0A8DA841B69B7</p> <p>Date of Disbursement 10 / 14 / 2009</p> <p>Amount of Each Disbursement this Period 85.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Troy A. Berman</p> <p>Mailing Address 11 Greenbrier St</p> <p>City Charleston State WV Zip Code 25311-2112</p> <p>Purpose of Disbursement Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B737A61E2F1384BF08BA</p> <p>Date of Disbursement 10 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 1666.67</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Constant Contact</p> <p>Mailing Address 1601 Trapelo Road, Suite 329</p> <p>City Waltham State MA Zip Code 02451</p> <p>Purpose of Disbursement email marketing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B2C380457A211466AA0A</p> <p>Date of Disbursement 10 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 459.00</p>

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

2210.67

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

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

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

FOR LINE NUMBER: (check only one)

PAGE 19 / 27

<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.

<p><b>A.</b> Full Name (Last, First, Middle Initial) Unemployment Compensation Division / Wor</p> <p>Mailing Address Post Office Box 106</p> <p>City Charlesotn State WV Zip Code 25321</p> <p>Purpose of Disbursement Workforce WV</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BA2F55A4F252D4C24BAD</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="158.36"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) USPS</p> <p>Mailing Address 1002 Lee Street East</p> <p>City Charleston State WV Zip Code 25301</p> <p>Purpose of Disbursement Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BFF16A210910A4E0DBCE</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="176.00"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) USPS</p> <p>Mailing Address 1002 Lee Street East</p> <p>City Charleston State WV Zip Code 25301</p> <p>Purpose of Disbursement Business mailing Permit</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B210800829A584C3C8F2</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="185.00"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="519.36"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></p>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 27

<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.

<p><b>A.</b> Full Name (Last, First, Middle Initial) USPS</p> <p>Mailing Address 1002 Lee Street East</p> <p>City Charleston State WV Zip Code 25301</p> <p>Purpose of Disbursement Fee - Qualified Business Reply Mail Permit</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> BA6B22D40CF0A41BAAE7</p> <p>Date of Disbursement 10 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 585.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Aristotle International</p> <p>Mailing Address 205 Pennsylvania Ave</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement credit card fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B5A42EFAC7F0647F9A1C</p> <p>Date of Disbursement 10 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 45.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Aristotle International</p> <p>Mailing Address 205 Pennsylvania Ave</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement credit card processing fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> B02678F4EE1FC4E21BA5</p> <p>Date of Disbursement 10 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 122.57</p>

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

752.57

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

5897.77

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 21 / 27
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

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

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

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

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

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

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

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

1) <b>SUBTOTALS</b> This Period This Page (optional).....	5096.94
2) <b>TOTALS</b> This Period (last page this line number only).....	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	
4) <b>ADD 2) and 3)</b> 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 22 / 27
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

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

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

Outstanding Balance Beginning This Period 369.85	<b>Transaction ID:</b> D0E587ECFD6C840AE9DC	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 369.85

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

Outstanding Balance Beginning This Period 1030.95	<b>Transaction ID:</b> D88348031D76B4F6E893	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1030.95

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

Outstanding Balance Beginning This Period 337.62	<b>Transaction ID:</b> D4EF771A3F5514EDD9BD	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 337.62

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

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
 10

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

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

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

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

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

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

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

<b>1) SUBTOTALS</b> This Period This Page (optional).....	▶	7545.35
<b>2) TOTALS</b> This Period (last page this line number only).....	▶	
<b>3) TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
<b>4) ADD 2) and 3)</b> 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 24 / 27
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

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

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

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

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

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

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

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

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	4577.78
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> 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 25 / 27
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

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

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

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

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

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

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

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

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

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

FOR LINE NUMBER: (check only one)

9  
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NAME OF COMMITTEE (In Full)  
West Virginia Republican Party, Inc.

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

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

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

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

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

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

1) <b>SUBTOTALS</b> This Period This Page (optional).....	▶	6236.95
2) <b>TOTALS</b> This Period (last page this line number only).....	▶	
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....	▶	
4) <b>ADD 2) and 3)</b> 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 27 / 27
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

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

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

Outstanding Balance Beginning This Period 428.32	<b>Transaction ID:</b> D24FCCC3C7843427C8F7	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 428.32

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

Outstanding Balance Beginning This Period 8653.10	<b>Transaction ID:</b> D5F118EE3E608403BB7E	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 8653.10

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

Outstanding Balance Beginning This Period 4214.56	<b>Transaction ID:</b> DD7A1B8D4F58A4BE3ACB	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 4214.56

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