

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Glen Gainer for Congress

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2014 To: M M / D D / Y Y Y Y 04 / 23 / 2014

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	13446.00	226816.63
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	13446.00	226816.63
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	24402.69	80808.58
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	24402.69	80808.58
8. Cash on Hand at Close of Reporting Period (from Line 27)	156008.05	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	10000.00	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Glen Gainer for Congress

Report Covering the Period: From: / / To: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	12800.00	200973.18
(ii) Unitemized.....	646.00	9193.45
(iii) TOTAL of contributions from individuals ▶	13446.00	210166.63
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	16650.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	13446.00	226816.63
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	10000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	10000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	13446.00	236816.63

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	24402.69	80808.58
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. 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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	24402.69	80808.58

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	166964.74
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	13446.00
25. SUBTOTAL (add Line 23 and Line 24).....	180410.74
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	24402.69
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	156008.05

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 19
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glen Gainer for Congress

A. Full Name (Last, First, Middle Initial)
Cheryl Baxter

Mailing Address 37 Hamilton Ave

City State Zip Code
Wheeling WV 26003-6659

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

Name of Employer Occupation
N/A Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 04 / 2014

Transaction ID : VN927CM2CY0

Amount of Each Receipt this Period
750.00

* In-Kind: Event Catering

B. Full Name (Last, First, Middle Initial)
Donald Brackman

Mailing Address PO Box 355

City State Zip Code
Nineveh IN 46164-0355

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

Name of Employer Occupation
NW3C management

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 02 / 2014

Transaction ID : VN927CK6Z29

Amount of Each Receipt this Period
500.00

* Earmarked Contribution: See Below

C. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address PO Box 382110

City State Zip Code
Cambridge MA 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4196.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 06 / 2014

Transaction ID : VN927CK6Z29E

Amount of Each Receipt this Period
500.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 19
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glen Gainer for Congress

A. Full Name (Last, First, Middle Initial)
Brenda Kay Brum

Mailing Address 1717 20th St

City Parkersburg State WV Zip Code 26101-3509

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

Name of Employer Retired Occupation Teacher

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 20 / 2014

Transaction ID : VN927CM1G21

Amount of Each Receipt this Period
 300.00

B. Full Name (Last, First, Middle Initial)
Lori Caldwell

Mailing Address 102 Centre Court Rd

City Charleston State WV Zip Code 25314-2386

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

Name of Employer EMC Corporation Occupation Senior Account Executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 20 / 2014

Transaction ID : VN927CM1G13

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Carrie J. Chambers

Mailing Address 5118 Beechtree Cir

City Cross Lanes State WV Zip Code 25313-1245

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

Name of Employer West Virginia State Auditor's Office Occupation Secretary

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 07 / 2014

Transaction ID : VN927CJW2J6

Amount of Each Receipt this Period
 250.00

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

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

1050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 19
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glen Gainer for Congress

A. Full Name (Last, First, Middle Initial)
Brian Glasser

Mailing Address 209 Capitol St

City Charleston State WV Zip Code 25301-2205

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

Name of Employer Bailey & Glasser Occupation Partner Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 07 / 2014

Transaction ID : VN927CJW304

Amount of Each Receipt this Period
 2600.00

B. Full Name (Last, First, Middle Initial)
Stanley M. Hostler Esq.

Mailing Address PO Box 4076

City Charleston State WV Zip Code 25364-4076

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

Name of Employer NOT EMPLOYED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 20 / 2014

Transaction ID : VN927CM1G55

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
Law Office of Larry George

Mailing Address 10 Hale St Ste 205

City Charleston State WV Zip Code 25301-2830

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 01 / 2014

Transaction ID : VN927CM2AG5

Amount of Each Receipt this Period
 500.00

PARTNERSHIP--partners below if itemized

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

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

4100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 19
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glen Gainer for Congress

A. Full Name (Last, First, Middle Initial)
Larry George

Mailing Address 10 Hale St
Ste 205

City Charleston State WV Zip Code 25301-2830

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

Name of Employer Lays Office of Larry W George PLLC Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 01 / 2014

Transaction ID : VN927CM2AY6

Amount of Each Receipt this Period
500.00

[MEMO ITEM]
*

B. Full Name (Last, First, Middle Initial)
Shirley Love

Mailing Address PO Box 601

City Oak Hill State WV Zip Code 25901-0601

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 20 / 2014

Transaction ID : VN927CM1G63

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Steve Love

Mailing Address 142 Leslie Pl

City Scott Depot State WV Zip Code 25560-8902

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

Name of Employer Information Requested Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 20 / 2014

Transaction ID : VN927CM1G47

Amount of Each Receipt this Period
500.00

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 19
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glen Gainer for Congress

A. Full Name (Last, First, Middle Initial)
Butch Pennington

Mailing Address 1354 Edwin Miller Blvd

City Martinsburg State WV Zip Code 25404-3704

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

Name of Employer Self-Employed Occupation Buss. owner

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 01 / 2014

Transaction ID : VN927CK6Z37

Amount of Each Receipt this Period
1000.00

* Earmarked Contribution: See Below

B. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238-2110

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4196.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 06 / 2014

Transaction ID : VN927CK6Z37E

Amount of Each Receipt this Period
1000.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Jacob M. Robinson Esq

Mailing Address 1140 Main St Ste 3

City Wheeling State WV Zip Code 26003-2742

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

Name of Employer Robinson Law Offices Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 20 / 2014

Transaction ID : VN927CM1G88

Amount of Each Receipt this Period
500.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 19
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glen Gainer for Congress

A. Full Name (Last, First, Middle Initial)
Raymond Smith

Mailing Address 303 Church St

City State Zip Code
Paden City WV 26159-1625

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

Name of Employer Occupation Information Requested
Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 20 / 2014

Transaction ID : VN927CM1G70

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Gerald T Wedemeyer

Mailing Address 811 Lawman Ave

City State Zip Code
Bridgeport WV 26330-1222

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

Name of Employer Occupation Information Requested
United Hospital Center Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 07 / 2014

Transaction ID : VN927CJW2X0

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Bill Weiss

Mailing Address 33 Fairmor Dr

City State Zip Code
Morgantown WV 26501-3845

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

Name of Employer Occupation Information Requested
N/A Not Employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2350.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 17 / 2014

Transaction ID : VN927CM1EB8

Amount of Each Receipt this Period
2350.00

* Earmarked Contribution: See Below

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

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

3850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 19
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Glen Gainer for Congress

A. Full Name (Last, First, Middle Initial)
ActBlue

Mailing Address **PO Box 382110**

City **Cambridge** State **MA** Zip Code **02238-2110**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4196.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 20 / 2014

Transaction ID : VN927CM1EB8E

Amount of Each Receipt this Period
2350.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Todd S. Wiseman

Mailing Address **1510 Grand Central Ave**

City **Vienna** State **WV** Zip Code **26105-1057**

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

Name of Employer Occupation
Wiseman Law Firm, PLLC Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
04 / 07 / 2014

Transaction ID : VN927CJW2Y8

Amount of Each Receipt this Period
250.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y

Amount of Each Receipt this Period

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

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

250.00

12800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 12 OF 19	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Glen Gainer for Congress

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 04 / 08 / 2014
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 518.71 Transaction ID : VN82Z9S1K16
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
Candidate Name	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 60.24 Transaction ID : VN82Z9S1K58
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
Candidate Name	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address PO Box 382110		Amount of Each Disbursement this Period 10.71 Transaction ID : VN82Z9S1K74
City Cambridge	State MA	
Zip Code 02238-2110	Purpose of Disbursement Credit Card Processing Fee	Category/ Type
Candidate Name	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	589.66
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 19		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Glen Gainer for Congress

Full Name (Last, First, Middle Initial) A. Cheryl Baxter		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 37 Hamilton Ave		Amount of Each Disbursement this Period 750.00 Transaction ID : VN927CM2CY01
City Wheeling	State WV	
Zip Code 26003-6659	Purpose of Disbursement Event Catering	* In-Kind Received
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Dream Catcher Creative, LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014
Mailing Address PO Box 5		Amount of Each Disbursement this Period 500.00 Transaction ID : VN82Z9S1K40
City Charleston	State WV	
Zip Code 25321-0005	Purpose of Disbursement Office Rent	* In-Kind Received
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. New Partners Consulting, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2014
Mailing Address 1250 I St NW Ste 200		Amount of Each Disbursement this Period 7980.00 Transaction ID : VN82Z9S1K32
City Washington	State DC	
Zip Code 20005-5977	Purpose of Disbursement Consultant - Fundraising	* In-Kind Received
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	9230.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 19	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Glen Gainer for Congress

Full Name (Last, First, Middle Initial) A. Next Level Partners, LLC		Date of Disbursement M M / D D / Y Y Y Y 04 / 04 / 2014
Mailing Address 410 1st St SE		Amount of Each Disbursement this Period 2750.00
City Washington	State DC	
Zip Code 20003-1819	Purpose of Disbursement Consultant - Compliance	Transaction ID : VN82Z9S1K08
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 2313.26
City Rochester	State NY	
Zip Code 14625-2396	Purpose of Disbursement Payroll	Transaction ID : VN82Z9S1JR5
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Michael Edwards		Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2014
Mailing Address 2106 Kanawha Blvd E 205		Amount of Each Disbursement this Period 2313.26
City Charleston	State WV	
Zip Code 25311-2264	Purpose of Disbursement Payroll	Transaction ID : VN82Z9S1K82
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] *
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5063.26
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 19
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
Glen Gainer for Congress

Full Name (Last, First, Middle Initial) A. Paychex		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 1273.52
City Rochester	State NY	
Zip Code 14625-2396	Purpose of Disbursement Payroll - Taxes	Transaction ID : VN82Z9S1JT1
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 52.70
City Rochester	State NY	
Zip Code 14625-2396	Purpose of Disbursement Payroll - Invoice	Transaction ID : VN82Z9S1JV9
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Paychex		Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014
Mailing Address 911 Panorama Trl S		Amount of Each Disbursement this Period 2313.27
City Rochester	State NY	
Zip Code 14625-2396	Purpose of Disbursement Payroll	Transaction ID : VN82Z9S1JS3
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3639.49
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 19			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Glen Gainer for Congress

Full Name (Last, First, Middle Initial) A. Michael Edwards			Date of Disbursement M M / D D / Y Y Y Y 04 / 15 / 2014		
Mailing Address 2106 Kanawha Blvd E 205			Amount of Each Disbursement this Period 2313.27		
City Charleston	State WV	Zip Code 25311-2264	Transaction ID : VN82Z9S1K99		
Purpose of Disbursement Payroll		Category/ Type	[MEMO ITEM] *		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Paychex			Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014		
Mailing Address 911 Panorama Trl S			Amount of Each Disbursement this Period 1234.41		
City Rochester	State NY	Zip Code 14625-2396	Transaction ID : VN82Z9S1JW7		
Purpose of Disbursement Payroll - Taxes		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) c. Paychex			Date of Disbursement M M / D D / Y Y Y Y 04 / 16 / 2014		
Mailing Address 911 Panorama Trl S			Amount of Each Disbursement this Period 52.70		
City Rochester	State NY	Zip Code 14625-2396	Transaction ID : VN82Z9S1JX5		
Purpose of Disbursement Payroll - Invoice		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	1287.11
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 17 OF 19	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Glen Gainer for Congress

Full Name (Last, First, Middle Initial) A. Plante & Associates, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address PO Box 285		Amount of Each Disbursement this Period 4250.00 Transaction ID : VN82Z9S1JY3
City Pinch	State WV Zip Code 25156-0285	
Purpose of Disbursement Consultant - Fundraising	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. United Parcel Service		Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2014
Mailing Address 55 Glenlake Pkwy		Amount of Each Disbursement this Period 136.31 Transaction ID : VN82Z9S1JZ0
City Atlanta	State GA Zip Code 30328-3474	
Purpose of Disbursement Shipping	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. United Parcel Service		Date of Disbursement M M / D D / Y Y Y Y 04 / 09 / 2014
Mailing Address 55 Glenlake Pkwy		Amount of Each Disbursement this Period 147.47 Transaction ID : VN82Z9S1K24
City Atlanta	State GA Zip Code 30328-3474	
Purpose of Disbursement Shipping	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4533.78
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 OF 19	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Glen Gainer for Congress

Full Name (Last, First, Middle Initial) A. United Parcel Service		Date of Disbursement M M / D D / Y Y Y Y 04 / 23 / 2014
Mailing Address 55 Glenlake Pkwy		Amount of Each Disbursement this Period 59.39
City Atlanta State GA Zip Code 30328-3474	Purpose of Disbursement Shipping	
Candidate Name	Category/Type	Transaction ID : VN82Z9S1K66
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	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) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	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:		

SUBTOTAL of Disbursements This Page (optional).....	59.39
TOTAL This Period (last page this line number only).....	24402.69

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Glen Gainer for Congress** Transaction ID : **VN927CJYQ13L**

LOAN SOURCE Full Name (Last, First, Middle Initial) Glen B. Gainer III	[PERSONAL FUNDS]	Election: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1516 Washington Ave		
City Parkersburg	State WV	ZIP Code 26101-3514

Original Amount of Loan 10000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 10000.00
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TERMS

Date Incurred M 03 / D 31 / Y 2014	Date Due M / D / Y 12/31/2014	Interest Rate none % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional).....	▶	10000.00
TOTALS This Period (last page in this line only).....	▶	10000.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.