

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

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

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	1	1

	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>1</td><td>1</td></tr></table>	Y	Y	Y	Y	2	0	1	1		83662.01
Y	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period	83662.01									
(c) Total Receipts (from Line 19)	779.76	779.76								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	84441.77	84441.77								
7. Total Disbursements (from Line 31)	16740.95	16740.95								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	67700.82	67700.82								
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)	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

FEC Form 3X (Rev. 06/2004)

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

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	1	1

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)	400.61	400.61
(ii) Unitemized	379.15	379.15
(iii) TOTAL (add Lines 11(a)(i) and (ii)	779.76	779.76
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	779.76	779.76
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	779.76	779.76
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	779.76	779.76

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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.....	7740.95	7740.95
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	7740.95	7740.95
22. Transfers to Affiliated/Other Party Committees.....	9000.00	9000.00
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))..	16740.95	16740.95
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	16740.95	16740.95

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)	779.76	779.76
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	779.76	779.76
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	7740.95	7740.95
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	7740.95	7740.95

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 6 / 20	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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) Ms. Donna L. Gosney		Date of Receipt																					
Mailing Address 326 1st St., W		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	9		2	0	1	1
M	M	/	D	D	/	Y	Y	Y	Y														
0	1		2	9		2	0	1	1														
City	State	Zip Code	Transaction ID: ACA6DD0F6E6F4426381E																				
Madison	WV	25130-1015																					
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period																					
C		400.61																					
Name of Employer Information Requested		Occupation Information Requested																					
Receipt For:		Aggregate Year-to-Date ▼																					
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		400.61																					
In-kind:unreimbursed RNC mtg expenses																							

SUBTOTAL of Receipts This Page (optional)	▶	400.61
TOTAL This Period (last page this line number only)	▶	400.61

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

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

FOR LINE NUMBER: (check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Ms. Donna L. Gosney</p> <p>Mailing Address 326 1st St., W</p> <p>City Madison State WV Zip Code 25130-1015</p> <p>Purpose of Disbursement In-kind:unreimbursed RNC mtg expenses</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: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BCA6DD0F6E6F4426381E</p> <p>Date of Disbursement 01 / 29 / 2011</p> <p>Amount of Each Disbursement this Period 400.61</p>
<p>B. Full Name (Last, First, Middle Initial) Riggs Corporation</p> <p>Mailing Address 205 Capitol Street</p> <p>City Charleston State WV Zip Code 25301</p> <p>Purpose of Disbursement January 2011 rent payment</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>Transaction ID: B94CD57A4EB0841BAA17</p> <p>Date of Disbursement 01 / 08 / 2011</p> <p>Amount of Each Disbursement this Period 1400.00</p>
<p>C. Full Name (Last, First, Middle Initial) Mountaineer Gas</p> <p>Mailing Address PO Box 362</p> <p>City Charleston State WV Zip Code 25322</p> <p>Purpose of Disbursement utilities</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>Transaction ID: B0716BB3D3C614496BAA</p> <p>Date of Disbursement 01 / 10 / 2011</p> <p>Amount of Each Disbursement this Period 243.14</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2043.75

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)

<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>A. Full Name (Last, First, Middle Initial) Suddenlink</p> <p>Mailing Address P.O. Box 742529</p> <p>City Cincinnati, State OH Zip Code 45274</p> <p>Purpose of Disbursement utilities</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B11B9CD7E36BD44D28FD</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="228.89"/></p>
<p>B. Full Name (Last, First, Middle Initial) Erie Insurance</p> <p>Mailing Address 100 Erie Insurance Place</p> <p>City Erie State PA Zip Code 16530</p> <p>Purpose of Disbursement workers comp policy</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: BC81BE226406E4277AAE</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="73.08"/></p>
<p>C. Full Name (Last, First, Middle Initial) Erie Insurance</p> <p>Mailing Address 100 Erie Insurance Place</p> <p>City Erie State PA Zip Code 16530</p> <p>Purpose of Disbursement HQ Renter's Insurance Premium</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: B4E17646F5D06442AB32</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="217.71"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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)

<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.

A. Full Name (Last, First, Middle Initial) United States Treasury <hr/> Mailing Address Internal Revenue Service <hr/> City Ogden State UT Zip Code 84201-0039 <hr/> Purpose of Disbursement federal payroll taxes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BF07276F8AC5746679E9 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 8 / 2 0 1 1
	Amount of Each Disbursement this Period 183.13
	Category/Type
	Category/Type
B. Full Name (Last, First, Middle Initial) United States Treasury <hr/> Mailing Address Internal Revenue Service <hr/> City Ogden State UT Zip Code 84201-0039 <hr/> Purpose of Disbursement federal payroll taxes Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B88F7481C2AB14877908 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 8 / 2 0 1 1
	Amount of Each Disbursement this Period 466.52
	Category/Type
	Category/Type
C. Full Name (Last, First, Middle Initial) Political Media, Inc. <hr/> Mailing Address 406 First St SE 3rd Floor <hr/> City Washington State DC Zip Code 20003 <hr/> Purpose of Disbursement communications Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B402488F7EE44487CA45 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 8 / 2 0 1 1
	Amount of Each Disbursement this Period 2000.00
	Category/Type
	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	2649.65
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)

<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>A. Full Name (Last, First, Middle Initial) Unemployment Compensation Division</p> <p>Mailing Address P.O. Box 106</p> <p>City Charlesotn State WV Zip Code 25321</p> <p>Purpose of Disbursement quarterly unemployment contribution - Victory</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>Transaction ID: B5B707D990204472ABBE</p> <p>Date of Disbursement 01 / 27 / 2011</p> <p>Amount of Each Disbursement this Period 272.25</p>
<p>B. Full Name (Last, First, Middle Initial) Unemployment Compensation Division</p> <p>Mailing Address P.O. Box 106</p> <p>City Charlesotn State WV Zip Code 25321</p> <p>Purpose of Disbursement quarterly unemployment contribution</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>Transaction ID: BA0E14A4005714CA9BB7</p> <p>Date of Disbursement 01 / 27 / 2011</p> <p>Amount of Each Disbursement this Period 115.64</p>
<p>C. Full Name (Last, First, Middle Initial) Balance Clothing Company</p> <p>Mailing Address 728 Crescent Road</p> <p>City Charleston State WV Zip Code 25302</p> <p>Purpose of Disbursement vinyl signs for HQ</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>Transaction ID: B1C8733C50BD24703B9B</p> <p>Date of Disbursement 01 / 29 / 2011</p> <p>Amount of Each Disbursement this Period 310.00</p>

SUBTOTAL of Disbursements This Page (optional)	697.89
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)

<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.

A.	Full Name (Last, First, Middle Initial) Suddenlink	Transaction ID: B64E0789247AB451DA69
	Mailing Address P.O. Box 742529	Date of Disbursement 01 / 29 / 2011
	City Cincinnati, State OH Zip Code 45274	Amount of Each Disbursement this Period 281.02
	Purpose of Disbursement utilities 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:	Category/Type
B.	Full Name (Last, First, Middle Initial) United States Treasury	Transaction ID: B1479E804EC4543678CB
	Mailing Address Internal Revenue Service	Date of Disbursement 01 / 31 / 2011
	City Ogden State UT Zip Code 84201-0039	Amount of Each Disbursement this Period 104.00
	Purpose of Disbursement federal payroll taxes 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:	Category/Type
C.	Full Name (Last, First, Middle Initial) United States Treasury	Transaction ID: B1FF96D86F5D24ECA9FD
	Mailing Address Internal Revenue Service	Date of Disbursement 01 / 31 / 2011
	City Ogden State UT Zip Code 84201-0039	Amount of Each Disbursement this Period 34.27
	Purpose of Disbursement federal payroll taxes 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:	Category/Type

SUBTOTAL of Disbursements This Page (optional)	419.29
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 13 / 20

<input type="checkbox"/> 21b	<input checked="" 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.

A.

Full Name (Last, First, Middle Initial)
National Republican Senatorial Committee

Mailing Address 425 2nd Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
transfer of funds

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B1DFBA3ED06B74D0BBA9

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	8		2	0	1	1

Amount of Each Disbursement this Period

9000.00

SUBTOTAL of Disbursements This Page (optional) ►

9000.00

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

9000.00

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.

A. 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 <input type="text" value="1057.45"/>		Transaction ID: DC3068D8514F8455BB69	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1057.45"/>	

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 <input type="text" value="1639.49"/>		Transaction ID: D869D6D1194434CB9B41	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1639.49"/>	

C. 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 <input type="text" value="2400.00"/>		Transaction ID: D25462FEAC2224BFE9E5	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="2400.00"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="5096.94"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

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.

A. 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	Transaction ID: D0E587ECFD6C840AE9DC	
369.85		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	369.85

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	Transaction ID: D88348031D76B4F6E893	
1030.95		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	1030.95

C. 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	Transaction ID: D4EF771A3F5514EDD9BD	
337.62		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	0.00	337.62

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 16 / 20
	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.

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Bjw Printing & Office Supplies	Nature of Debt (Purpose): Interest
Mailing Address 3100 Robert Byrd Drive	
City State ZIP Code Beckley WV 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. Full Name (Last, First, Middle Initial) of Debtor or Creditor Time Warner Cable	Nature of Debt (Purpose): Victory Field Office cable bill from 4/05
Mailing Address P.O Box 580485	
City State ZIP Code Charlotte NC 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

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

1) SUBTOTALS This Period This Page (optional).....	7545.35
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

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

A. 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 <input type="text" value="872.87"/>		Transaction ID: D8F0AC59401D741A28E3	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="872.87"/>	

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 <input type="text" value="1744.90"/>		Transaction ID: D3B3C0EDD479D432D978	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1744.90"/>	

C. 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 <input type="text" value="1960.01"/>		Transaction ID: D0C9639D782124A75ADA	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1960.01"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="4577.78"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 18 / 20
	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.

A. 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	Transaction ID: D316A8B6DC2754ADFBC9	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1.95

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	Transaction ID: D9D2104C1A2E94DB3940	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 927.31

C. 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	Transaction ID: DB43F53E3F16E430DB25	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 506.32

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

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

A. 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		Transaction ID: DD238924E343448EC960	
5411.86			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	5411.86	

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		Transaction ID: D8DB931917DAA4E53924	
135.77			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	135.77	

C. 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		Transaction ID: DC7D28A2143CB4F51AB5	
689.32			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	689.32	

1) SUBTOTALS This Period This Page (optional).....	▶	6236.95
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

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

A. 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		Transaction ID: D24FCCC3C7843427C8F7	
428.32			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	428.32	

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		Transaction ID: D5F118EE3E608403BB7E	
8653.10			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	8653.10	

C. 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		Transaction ID: DD7A1B8D4F58A4BE3ACB	
4214.56			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	4214.56	

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