

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 11
 FOR SE OF FORM 24/48

| | | | |
|--|--|---|--|
| NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE | | FEC IDENTIFICATION NUMBER ▼ C C00157537 | |
| Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on | | MM / DD / YYYY 05 / 10 / 2016 | |

| | | | |
|--|--------------------|--|--|
| Full Name of Payee Katrina S Bragg | | Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 02 / 2016 | |
| Mailing Address PO Box 2638 | | Amount 45.91 | |
| City Westover | State WV | Zip Code 26502 | Transaction ID : SE.6806 |
| Purpose of Expenditure Prepare Mailing | Category/Type | | Date of Disbursement or Obligation MM / DD / YYYY |
| Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: WV | |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |

| | | | |
|--|--------------------|--|--|
| Full Name of Payee Katrina S Bragg | | Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 02 / 2016 | |
| Mailing Address PO Box 2638 | | Amount 21.66 | |
| City Westover | State WV | Zip Code 26502 | Transaction ID : SE.6807 |
| Purpose of Expenditure Deliver Mailings | Category/Type | | Date of Disbursement or Obligation MM / DD / YYYY |
| Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: WV | |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |

| | |
|--|--------------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | 67.57 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | |
| (c) TOTAL Independent Expenditures..... ▶ | |

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

Mary Anne Buchanan
[Electronically Filed]

Date

 MM / DD / YYYY
07 / 05 / 2016

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 2 OF 11
FOR SE OF FORM 24/48NAME OF COMMITTEE (In Full)
WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

FEC IDENTIFICATION NUMBER ▼

C C00157537Check if ☒ 24-hour report ☐ 48-hour report ☐ New report ☒ Amends report filed onM M M / D D D / Y Y Y Y Y Y
05 / 10 / 2016Full Name of Payee
Creative Designs

Mailing Address 24 Hillview Est

City State Zip Code
Morgantown WV 26501Purpose of Expenditure
Design Mailing PieceCategory/
Type

Date of Public Distribution/Dissemination

M M M / D D D / Y Y Y Y Y Y
05 / 02 / 2016

Amount

11.67

Transaction ID : SE.6785

Date of Disbursement or Obligation

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

Name of Federal Candidate

RAFAEL EDWARD 'TED' CRUZ

☒ Support
☐ OpposeOffice Sought: ☐ House District: _____
☒ President ☐ Senate State: WVCalendar Year-To-Date
Per Election for Office Sought

0.00

Disbursement For: ☒ Primary ☐ General
2016 ☐ Other (specify) ▶Full Name of Payee
Creative Designs

Mailing Address 24 Hillview Est

City State Zip Code
Morgantown WV 26501Purpose of Expenditure
Endorsements to WebpageCategory/
Type

Date of Public Distribution/Dissemination

M M M / D D D / Y Y Y Y Y Y
04 / 27 / 2016

Amount

5.18

Transaction ID : SE.6790

Date of Disbursement or Obligation

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

Name of Federal Candidate

RAFAEL EDWARD 'TED' CRUZ

☒ Support
☐ OpposeOffice Sought: ☐ House District: _____
☒ President ☐ Senate State: WVCalendar Year-To-Date
Per Election for Office Sought

0.00

Disbursement For: ☒ Primary ☐ General
2016 ☐ Other (specify) ▶(a) **SUBTOTAL** of Itemized Independent Expenditures..... ▶

16.85

(b) **SUBTOTAL** of Unitemized Independent Expenditures ▶(c) **TOTAL** Independent Expenditures..... ▶

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

Mary Anne Buchanan

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Date

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07 / 05 / 2016

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24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 3 OF 11
FOR SE OF FORM 24/48

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| NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE | | FEC IDENTIFICATION NUMBER ▼ C C00157537 | |
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| | | | | | |
|--|--------------------|--|---|--|--|
| Full Name of Payee Creative Designs | | | Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 28 / 2016 | | |
| Mailing Address 24 Hillview Est | | | Amount 35.64 | | |
| City Morgantown | State WV | Zip Code 26501 | Transaction ID : SE.6793 | | |
| Purpose of Expenditure Design Online Newsletter | | Category/Type | Date of Disbursement or Obligation MM / DD / YYYY | | |
| Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: WV | | |
| Calendar Year-To-Date Per Election for Office Sought | | 0.00 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ | | |

| | | | | | |
|--|--------------------|--|---|--|--|
| Full Name of Payee Creative Designs | | | Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 02 / 2016 | | |
| Mailing Address 24 Hillview Est | | | Amount 4.30 | | |
| City Morgantown | State WV | Zip Code 26501 | Transaction ID : SE.6857 | | |
| Purpose of Expenditure Design Postcard | | Category/Type | Date of Disbursement or Obligation MM / DD / YYYY | | |
| Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: WV | | |
| Calendar Year-To-Date Per Election for Office Sought | | 0.00 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ | | |

| | |
|---|--------------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | 39.94 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | |
| (c) TOTAL Independent Expenditures..... ▶ | |

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

Mary Anne Buchanan

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24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 4 OF 11
FOR SE OF FORM 24/48

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| NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE | | FEC IDENTIFICATION NUMBER ▼ C C00157537 |
| Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on | | MM / DD / YYYY 05 / 10 / 2016 |

| | | |
|---|-------------------|---|
| Full Name of Payee Fairmont Printing | | Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 02 / 2016 |
| Mailing Address PO Box 2000 | | Amount 462.56 |
| City Fairmont | State WV | Zip Code 26555 |
| Purpose of Expenditure Print Postcards | Category/ Type | Transaction ID : SE.6803 Date of Disbursement or Obligation MM / DD / YYYY |
| Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: WV |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ |

| | | |
|---|-------------------|---|
| Full Name of Payee Katherine D Hoag | | Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 02 / 2016 |
| Mailing Address 775 Fairmont Rd | | Amount 52.07 |
| City Morgantown | State WV | Zip Code 26501 |
| Purpose of Expenditure Deliver Mailings | Category/ Type | Transaction ID : SE.6808 Date of Disbursement or Obligation MM / DD / YYYY |
| Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: WV |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ |

| | |
|---|--------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | 514.63 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | |
| (c) TOTAL Independent Expenditures..... ▶ | |

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

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24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
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| NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE | | FEC IDENTIFICATION NUMBER ▼ C C00157537 | |
| Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on | | MM / DD / YYYY 05 / 10 / 2016 | |

| | | | |
|---|-------------------|---|--------------------------|
| Full Name of Payee Mineral Daily News Tribune | | Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 28 / 2016 | |
| Mailing Address 21 Shamrock Dr | | Amount 5.00 | |
| City Keyser | State WV | Zip Code 26726 | Transaction ID : SE.6796 |
| Purpose of Expenditure Ad | Category/ Type | Date of Disbursement or Obligation MM / DD / YYYY | |
| Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ | | <input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: WV | |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ | |

| | | | |
|---|-------------------|---|--------------------------|
| Full Name of Payee Mineral Daily News Tribune | | Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 30 / 2016 | |
| Mailing Address 21 Shamrock Dr | | Amount 74.10 | |
| City Keyser | State WV | Zip Code 26726 | Transaction ID : SE.6798 |
| Purpose of Expenditure Ad | Category/ Type | Date of Disbursement or Obligation MM / DD / YYYY | |
| Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ | | <input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: WV | |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ | |

| | |
|---|-------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | 79.10 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | |
| (c) TOTAL Independent Expenditures..... ▶ | |

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07 / 05 / 2016

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(Schedule E)

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| NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE | | FEC IDENTIFICATION NUMBER ▼ C C00157537 | |
| Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on | | <div style="display: flex; justify-content: space-around;"> <div>MM / DD / YYYY 05 / 10 / 2016</div> </div> | |

| | | | |
|---|---------------|---|--------------------------|
| Full Name of Payee Postmaster | | Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 02 / 2016 | |
| Mailing Address 300 Postal Plaza | | Amount 1376.04 | |
| City Morgantown | State WV | Zip Code 26505 | Transaction ID : SE.6802 |
| Purpose of Expenditure Postage | Category/Type | Date of Disbursement or Obligation MM / DD / YYYY | |
| Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: WV | |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ | |

| | | | |
|---|---------------|---|--------------------------|
| Full Name of Payee Postmaster | | Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 26 / 2016 | |
| Mailing Address 1902 El Jazid St. | | Amount 275.89 | |
| City Dellslow | State WV | Zip Code 26531 | Transaction ID : SE.6810 |
| Purpose of Expenditure Postage | Category/Type | Date of Disbursement or Obligation MM / DD / YYYY | |
| Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: WV | |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ | |

| | |
|---|---------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | 1651.93 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | |
| (c) TOTAL Independent Expenditures..... ▶ | |

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

Mary Anne Buchanan

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Date

 MM / DD / YYYY
 07 / 05 / 2016

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 7 OF 11
FOR SE OF FORM 24/48

| | | |
|--|--|---|
| NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE | | FEC IDENTIFICATION NUMBER ▼ C C00157537 |
| Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on | | MM / DD / YYYY 05 / 10 / 2016 |

| | | |
|---|-------------------|--|
| Full Name of Payee West Virginians for Life, Inc. | | Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 02 / 2016 |
| Mailing Address 25 Canyon Rd | | Amount 185.93 |
| City Morgantown | State WV | Zip Code 26508 |
| Purpose of Expenditure Print Labels | Category/ Type | Transaction ID : SE.6784 Date of Disbursement or Obligation MM / DD / YYYY |
| Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ | | <input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WV</u> |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ |

| | | |
|---|-------------------|--|
| Full Name of Payee West Virginians for Life, Inc. | | Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 22 / 2016 |
| Mailing Address 25 Canyon Rd | | Amount 0.02 |
| City Morgantown | State WV | Zip Code 26508 |
| Purpose of Expenditure Printing and Postage | Category/ Type | Transaction ID : SE.6786 Date of Disbursement or Obligation MM / DD / YYYY |
| Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ | | <input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WV</u> |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ |

| | |
|--|--------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | 185.95 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | |
| (c) TOTAL Independent Expenditures..... ▶ | |

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Mary Anne Buchanan

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Date

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07 / 05 / 2016

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 8 OF 11
FOR SE OF FORM 24/48

| | | | |
|--|--|---|--|
| NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE | | FEC IDENTIFICATION NUMBER ▼ C C00157537 | |
| Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on | | MM / DD / YYYY 05 / 10 / 2016 | |

| | | | |
|--|--------------------|--|---------------------------------|
| Full Name of Payee West Virginians for Life, Inc. | | Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 25 / 2016 | |
| Mailing Address 25 Canyon Rd | | Amount 0.01 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.6787 |
| Purpose of Expenditure Printing | Category/Type | Date of Disbursement or Obligation MM / DD / YYYY | |
| Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ | | <input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: WV | |
| Calendar Year-To-Date Per Election for Office Sought 0.00 | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ | |

| | | | |
|--|--------------------|--|---------------------------------|
| Full Name of Payee West Virginians for Life, Inc. | | Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 26 / 2016 | |
| Mailing Address 25 Canyon Rd | | Amount 0.16 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.6788 |
| Purpose of Expenditure Printing | Category/Type | Date of Disbursement or Obligation MM / DD / YYYY | |
| Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ | | <input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: WV | |
| Calendar Year-To-Date Per Election for Office Sought 0.00 | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ | |

| | |
|---|-------------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | 0.17 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | |
| (c) TOTAL Independent Expenditures..... ▶ | |

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Mary Anne Buchanan

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24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
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| NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE | | FEC IDENTIFICATION NUMBER ▼ C C00157537 | |
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| | | | |
|---|-------------------|---|--------------------------|
| Full Name of Payee West Virginians for Life, Inc. | | Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 27 / 2016 | |
| Mailing Address 25 Canyon Rd | | Amount 0.02 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.6791 |
| Purpose of Expenditure Printing and Postage | Category/ Type | Date of Disbursement or Obligation MM / DD / YYYY | |
| Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ | | <input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: WV | |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ | |

| | | | |
|---|-------------------|---|--------------------------|
| Full Name of Payee West Virginians for Life, Inc. | | Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 28 / 2016 | |
| Mailing Address 25 Canyon Rd | | Amount 2.13 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.6792 |
| Purpose of Expenditure Printing | Category/ Type | Date of Disbursement or Obligation MM / DD / YYYY | |
| Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ | | <input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: WV | |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ | |

| | |
|---|------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | 2.15 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | |
| (c) TOTAL Independent Expenditures..... ▶ | |

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| | | | |
|--|--------------------|--|---------------------------------|
| Full Name of Payee West Virginians for Life, Inc. | | Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 29 / 2016 | |
| Mailing Address 25 Canyon Rd | | Amount 0.06 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.6797 |
| Purpose of Expenditure Printing and Postage | Category/Type | Date of Disbursement or Obligation MM / DD / YYYY | |
| Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ | | <input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: WV | |
| Calendar Year-To-Date Per Election for Office Sought 0.00 | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |

| | | | |
|--|--------------------|--|---------------------------------|
| Full Name of Payee West Virginians for Life, Inc. | | Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 02 / 2016 | |
| Mailing Address 25 Canyon Rd | | Amount 0.18 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.6799 |
| Purpose of Expenditure Postage | Category/Type | Date of Disbursement or Obligation MM / DD / YYYY | |
| Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ | | <input checked="" type="checkbox"/> Support Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> Oppose <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: WV | |
| Calendar Year-To-Date Per Election for Office Sought 0.00 | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____ | |

| | |
|---|-------------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | 0.24 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | |
| (c) TOTAL Independent Expenditures..... ▶ | |

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

Mary Anne Buchanan

[Electronically Filed]

Date

MM / DD / YYYY
07 / 05 / 2016

Signature

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 11 OF 11
FOR SE OF FORM 24/48

| | | |
|--|--|---|
| NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE | | FEC IDENTIFICATION NUMBER ▼ C C00157537 |
| Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input checked="" type="checkbox"/> Amends report filed on | | MM / DD / YYYY 05 / 10 / 2016 |

| | | |
|--|--------------------|---|
| Full Name of Payee West Virginians for Life, Inc. | | Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 02 / 2016 |
| Mailing Address 25 Canyon Rd | | Amount 4.70 |
| City Morgantown | State WV | Zip Code 26508 |
| Purpose of Expenditure Printing and Postage | Category/Type | Transaction ID : SE.6800 Date of Disbursement or Obligation MM / DD / YYYY |
| Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ | | Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: WV |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ |
| | | 0.00 |

| | | |
|--|--------------------|---|
| Full Name of Payee West Virginians for Life, Inc. | | Date of Public Distribution/Dissemination MM / DD / YYYY 04 / 26 / 2016 |
| Mailing Address 25 Canyon Rd | | Amount 113.73 |
| City Morgantown | State WV | Zip Code 26508 |
| Purpose of Expenditure Printing | Category/Type | Transaction ID : SE.6812 Date of Disbursement or Obligation MM / DD / YYYY |
| Name of Federal Candidate RAFAEL EDWARD 'TED' CRUZ | | Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: WV |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ |
| | | 0.00 |

| | |
|--|----------------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | 118.43 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | |
| (c) TOTAL Independent Expenditures..... ▶ | 2676.96 |

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

Mary Anne Buchanan

[Electronically Filed]

Date

MM / DD / YYYY
07 / 05 / 2016

Signature