

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

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

WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

ADDRESS (number and street)

25 Canyon Road

Check if different  
than previously  
reported. (ACC)

MORGANTOWN

WV

26508

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00157537

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report(Q1)July 15  
Quarterly Report(Q2)October 15  
Quarterly Report(Q3)January 31  
Quarterly Report(YE)July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day  
**PRE-Election**  
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

in the  
State of(d) 30-Day  
**Post -Election**  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

in the  
State of

5. Covering Period

10

14

2010

through

11

22

2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Marla Mercer

Signature of Treasurer

Electronically Filed by Marla Mercer

Date

12

02

2010

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

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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Write or Type Committee Name

WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

M M  
1 0D D  
1 4Y Y Y Y  
2 0 1 0

To:

M M  
1 1D D  
2 2Y Y Y Y  
2 0 1 0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2010</span>		36.87
(b) Cash on Hand at Beginning of Reporting Period .....	559.42	
(c) Total Receipts (from Line 19) .....	2862.22	11402.22
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	3421.64	11439.09
7. Total Disbursements (from Line 31) .....	3385.46	11402.91
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	36.18	36.18
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	81.70	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	2380.52	

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

### For further information contact:

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

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

# DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

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) .....	1000.00	3500.00
(ii) Unitemized .....	462.22	597.22
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	1462.22	4097.22
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	1400.00	4700.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	2862.22	8797.22
12. Transfers From Affiliated/Other Party Committees .....	0.00	2605.00
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)) .....	2862.22	11402.22
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	2862.22	11402.22

## DETAILED SUMMARY PAGE

of Disbursements

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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.....	0.00	0.00	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	0.00	0.00	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00	
24. Independent Expenditure (use Schedule E) .....	3385.46	11402.91	
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))..	3385.46	11402.91	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3385.46	11402.91	

**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) .....	2862.22	8797.22
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2862.22	8797.22
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 80

(check only one)

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

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 VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

Dr. Jeffrey B Jackson

Mailing Address 355 Stout St

City

Bridgeport

State

WV

Zip Code

26330

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Mtn. St. Medical Specialt-  
iesOccupation  
Doctor

Receipt For:

☐ Primary
 ☐ General
 ☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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

Transaction ID: SA11AI.5571

Amount of Each Receipt this Period

1000.00

Donation

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

1000.00

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

1000.00

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

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

FOR LINE NUMBER: PAGE 7 / 80

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

West Virginians for Life, Inc. State PAC Fund

Mailing Address 25 Canyon Rd.

City

Morgantown

State

WV

Zip Code

26508

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

3630.00

Date of Receipt

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

Transaction ID: SA11C.5563

Amount of Each Receipt this Period

1400.00

Transfer Funds Owed

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

1400.00

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

1400.00

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/>	9
<input type="checkbox"/>	10

NAME OF COMMITTEE (In Full)

WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
West Virginians for Life, Inc. State PAC Fund

Nature of Debt (Purpose):  
Postage

Mailing Address 25 Canyon Rd.

City	State	ZIP Code
Morgantown	WV	26508

Outstanding Balance Beginning This Period

81.70

Transaction ID: SD9.4817

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

81.70

1) **SUBTOTALS** This Period This Page (optional)..... ▶

81.70

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

81.70

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) ▶

81.70



**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 9 / 80

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Karen A CrossNature of Debt (Purpose):  
Delivery of Endorsement  
Pieces

Mailing Address 1327 Riddle Ave #8

City State ZIP Code  
Morgantown WV 26505

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.5538

Amount Incurred This Period

57.46

Payment This Period

57.46

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Eastern Kentucky BroadcastingNature of Debt (Purpose):  
Radio Ad

Mailing Address 1240 Radio Dr

City State ZIP Code  
Pikeville KY 41501

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.5524

Amount Incurred This Period

175.00

Payment This Period

175.00

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Fairmont PrintingNature of Debt (Purpose):  
Printing

Mailing Address PO Box 2000

City State ZIP Code  
Fairmont WV 26555

Outstanding Balance Beginning This Period

880.92

Transaction ID: SD10.5208

Amount Incurred This Period

0.00

Payment This Period

200.00

Outstanding Balance at Close of This Period

680.92

1) **SUBTOTALS** This Period This Page (optional).....

680.92

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 10 / 80

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Hampshire ReviewNature of Debt (Purpose):  
Political Ad

Mailing Address PO Box 1036

City	State	ZIP Code
Romney	WV	26757

Outstanding Balance Beginning This Period

86.20

Transaction ID: SD10.5259

Amount Incurred This Period

0.00

Payment This Period

86.20

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
PostmasterNature of Debt (Purpose):  
Postage

Mailing Address

City	State	ZIP Code
Morgantown	WV	26505

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.5508

Amount Incurred This Period

550.00

Payment This Period

550.00

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Southern CommunicationsNature of Debt (Purpose):  
Radio Ad

Mailing Address 306 S Kanawha St

City	State	ZIP Code
Beckley	WV	25801

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.5514

Amount Incurred This Period

440.00

Payment This Period

440.00

Outstanding Balance at Close of This Period

0.00

**1) SUBTOTALS** This Period This Page (optional).....

0.00

**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)

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FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
WAMNNature of Debt (Purpose):  
Radio Ad

Mailing Address 4415 Blueprints Rd

City State ZIP Code  
Bluefield WV 24701

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.5535

Amount Incurred This Period

150.00

Payment This Period

150.00

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
WCWVNature of Debt (Purpose):  
Radio Ad

Mailing Address 713 Main St

City State ZIP Code  
Summersville WV 26651

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.5521

Amount Incurred This Period

100.00

Payment This Period

100.00

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
West Virginians for Life, IncNature of Debt (Purpose):  
Postage

Mailing Address 25 Canyon Rd.

City State ZIP Code  
Morgantown WV 26508

Outstanding Balance Beginning This Period

35.73

Transaction ID: SD10.4840

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

35.73

**1) SUBTOTALS** This Period This Page (optional).....

35.73

**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 12 / 80

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 West Virginians for Life, Inc

 Nature of Debt (Purpose):  
 Printing & Postage

Mailing Address 25 Canyon Rd.

City	State	ZIP Code
Morgantown	WV	26508

Outstanding Balance Beginning This Period

0.47

Transaction ID: SD10.5196

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

0.47

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 West Virginians for Life, Inc

 Nature of Debt (Purpose):  
 Print and Postage

Mailing Address 25 Canyon Rd.

City	State	ZIP Code
Morgantown	WV	26508

Outstanding Balance Beginning This Period

0.47

Transaction ID: SD10.5198

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

0.47

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 West Virginians for Life, Inc

 Nature of Debt (Purpose):  
 Print and Postage

Mailing Address 25 Canyon Rd.

City	State	ZIP Code
Morgantown	WV	26508

Outstanding Balance Beginning This Period

0.47

Transaction ID: SD10.5199

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

0.47

1) **SUBTOTALS** This Period This Page (optional).....

1.41

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)  
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numbered line)

PAGE 13 / 80

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 West Virginians for Life, Inc

 Nature of Debt (Purpose):  
 Print and Mail

Mailing Address 25 Canyon Rd.

City	State	ZIP Code
Morgantown	WV	26508

Outstanding Balance Beginning This Period

0.47

Transaction ID: SD10.5197

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

0.47

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 West Virginians for Life, Inc

 Nature of Debt (Purpose):  
 Print and Postage

Mailing Address 25 Canyon Rd.

City	State	ZIP Code
Morgantown	WV	26508

Outstanding Balance Beginning This Period

0.47

Transaction ID: SD10.5219

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

0.47

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 West Virginians for Life, Inc

 Nature of Debt (Purpose):  
 Print and Postage

Mailing Address 25 Canyon Rd.

City	State	ZIP Code
Morgantown	WV	26508

Outstanding Balance Beginning This Period

0.94

Transaction ID: SD10.5220

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

0.94

1) **SUBTOTALS** This Period This Page (optional).....

1.88

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 14 / 80

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 West Virginians for Life, Inc

 Nature of Debt (Purpose):  
 Printing

Mailing Address 25 Canyon Rd.

City	State	ZIP Code
Morgantown	WV	26508

Outstanding Balance Beginning This Period

325.48

Transaction ID: SD10.5172

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

325.48

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 West Virginians for Life, Inc

 Nature of Debt (Purpose):  
 Printing Labels

Mailing Address 25 Canyon Rd.

City	State	ZIP Code
Morgantown	WV	26508

Outstanding Balance Beginning This Period

424.24

Transaction ID: SD10.5184

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

424.24

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 West Virginians for Life, Inc

 Nature of Debt (Purpose):  
 Postage

Mailing Address 25 Canyon Rd.

City	State	ZIP Code
Morgantown	WV	26508

Outstanding Balance Beginning This Period

3.92

Transaction ID: SD10.5190

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3.92

1) **SUBTOTALS** This Period This Page (optional).....

753.64

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 15 / 80

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
West Virginians for Life, IncNature of Debt (Purpose):  
Postage

Mailing Address 25 Canyon Rd.

City State ZIP Code  
Morgantown WV 26508

Outstanding Balance Beginning This Period

21.68

Transaction ID: SD10.5233

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

21.68

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
West Virginians for Life, IncNature of Debt (Purpose):  
Postage

Mailing Address 25 Canyon Rd.

City State ZIP Code  
Morgantown WV 26508

Outstanding Balance Beginning This Period

24.56

Transaction ID: SD10.5235

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

24.56

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
West Virginians for Life, IncNature of Debt (Purpose):  
Postage

Mailing Address 25 Canyon Rd.

City State ZIP Code  
Morgantown WV 26508

Outstanding Balance Beginning This Period

57.32

Transaction ID: SD10.5236

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

57.32

**1) SUBTOTALS** This Period This Page (optional).....

103.56

**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)

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FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
West Virginians for Life, IncNature of Debt (Purpose):  
Postage

Mailing Address 25 Canyon Rd.

City State ZIP Code  
Morgantown WV 26508

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.5376

Amount Incurred This Period

2.85

Payment This Period

0.00

Outstanding Balance at Close of This Period

2.85

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
West Virginians for Life, IncNature of Debt (Purpose):  
Postage

Mailing Address 25 Canyon Rd.

City State ZIP Code  
Morgantown WV 26508

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.5377

Amount Incurred This Period

3.40

Payment This Period

0.00

Outstanding Balance at Close of This Period

3.40

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
West Virginians for Life, IncNature of Debt (Purpose):  
Printing

Mailing Address 25 Canyon Rd.

City State ZIP Code  
Morgantown WV 26508

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.5359

Amount Incurred This Period

3.44

Payment This Period

0.00

Outstanding Balance at Close of This Period

3.44

**1) SUBTOTALS** This Period This Page (optional).....

9.69

**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)

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FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 West Virginians for Life, Inc

 Nature of Debt (Purpose):  
 Postage

Mailing Address 25 Canyon Rd.

City	State	ZIP Code
Morgantown	WV	26508

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.5360

Amount Incurred This Period

6.59

Payment This Period

0.00

Outstanding Balance at Close of This Period

6.59

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 West Virginians for Life, Inc

 Nature of Debt (Purpose):  
 Delivery of Mailing

Mailing Address 25 Canyon Rd.

City	State	ZIP Code
Morgantown	WV	26508

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.5405

Amount Incurred This Period

42.76

Payment This Period

0.00

Outstanding Balance at Close of This Period

42.76

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 West Virginians for Life, Inc

 Nature of Debt (Purpose):  
 Delivery of Mailing

Mailing Address 25 Canyon Rd.

City	State	ZIP Code
Morgantown	WV	26508

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.5450

Amount Incurred This Period

35.85

Payment This Period

0.00

Outstanding Balance at Close of This Period

35.85

1) **SUBTOTALS** This Period This Page (optional).....

85.20

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)

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FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
West Virginians for Life, IncNature of Debt (Purpose):  
Delivery of Mailing (fuel)

Mailing Address 25 Canyon Rd.

City State ZIP Code  
Morgantown WV 26508

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.5413

Amount Incurred This Period

17.91

Payment This Period

0.00

Outstanding Balance at Close of This Period

17.91

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
West Virginians for Life, IncNature of Debt (Purpose):  
Delivery of Mailing (fuel)

Mailing Address 25 Canyon Rd.

City State ZIP Code  
Morgantown WV 26508

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.5419

Amount Incurred This Period

5.67

Payment This Period

0.00

Outstanding Balance at Close of This Period

5.67

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
West Virginians for Life, IncNature of Debt (Purpose):  
Printing

Mailing Address 25 Canyon Rd.

City State ZIP Code  
Morgantown WV 26508

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.5497

Amount Incurred This Period

4.40

Payment This Period

0.00

Outstanding Balance at Close of This Period

4.40

**1) SUBTOTALS** This Period This Page (optional).....

27.98

**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)

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FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 West Virginians for Life, Inc

 Nature of Debt (Purpose):  
 Delivery of Mailings (fuel)

Mailing Address 25 Canyon Rd.

City	State	ZIP Code
Morgantown	WV	26508

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.5427

Amount Incurred This Period

14.40

Payment This Period

0.00

Outstanding Balance at Close of This Period

14.40

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 West Virginians for Life, Inc

 Nature of Debt (Purpose):  
 Delivery of Mailing (fuel)

Mailing Address 25 Canyon Rd.

City	State	ZIP Code
Morgantown	WV	26508

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.5434

Amount Incurred This Period

22.23

Payment This Period

0.00

Outstanding Balance at Close of This Period

22.23

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
 West Virginians for Life, Inc

 Nature of Debt (Purpose):  
 Delivery of Mailing

Mailing Address 25 Canyon Rd.

City	State	ZIP Code
Morgantown	WV	26508

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.5442

Amount Incurred This Period

35.65

Payment This Period

0.00

Outstanding Balance at Close of This Period

35.65

1) **SUBTOTALS** This Period This Page (optional).....

72.28

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)

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FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
West Virginians for Life, Inc. State PAC FundNature of Debt (Purpose):  
Postage

Mailing Address 25 Canyon Rd.

City State ZIP Code  
Morgantown WV 26508

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.5395

Amount Incurred This Period

137.85

Payment This Period

137.85

Outstanding Balance at Close of This Period

0.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
West Virginians for Life, Inc. State PAC FundNature of Debt (Purpose):  
Postage

Mailing Address 25 Canyon Rd.

City State ZIP Code  
Morgantown WV 26508

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.5398

Amount Incurred This Period

405.57

Payment This Period

405.57

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
West Virginians for Life, Inc. State PAC FundNature of Debt (Purpose):  
Postage

Mailing Address 25 Canyon Rd.

City State ZIP Code  
Morgantown WV 26508

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.5464

Amount Incurred This Period

603.75

Payment This Period

396.05

Outstanding Balance at Close of This Period

207.70

1) **SUBTOTALS** This Period This Page (optional).....

207.70

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)

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FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
West Virginians for Life, Inc. State PAC FundNature of Debt (Purpose):  
Postage

Mailing Address 25 Canyon Rd.

City State ZIP Code  
Morgantown WV 26508

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.5624

Amount Incurred This Period

400.53

Payment This Period

0.00

Outstanding Balance at Close of This Period

400.53

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
West Virginians for Life, Inc. State PAC FundNature of Debt (Purpose):  
Postage

Mailing Address 25 Canyon Rd.

City State ZIP Code  
Morgantown WV 26508

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.5456

Amount Incurred This Period

460.53

Payment This Period

460.53

Outstanding Balance at Close of This Period

0.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
WVKM FMNature of Debt (Purpose):  
Radio Ad

Mailing Address PO Box 68

City State ZIP Code  
Matewan WV 25678

Outstanding Balance Beginning This Period

0.00

Transaction ID: SD10.5509

Amount Incurred This Period

226.80

Payment This Period

226.80

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional).....

400.53

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

2380.52

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)

2380.52

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE		FEC IDENTIFICATION NUMBER <b>C</b> C00157537	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Karen A Cross		Date MM / DD / YYYY 11 / 12 / 2010	
Mailing Address 1327 Riddle Ave #8		Amount 14.36	
City State Zip Code Morgantown WV 26505		Transaction ID: SE.5543	
Purpose of Expenditure Delivery of Endorsement Pieces		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: John Raese		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 475.89		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Special-General 2010	
Full Name (Last, First, Middle, Initial) of Payee Karen A Cross		Date MM / DD / YYYY 11 / 12 / 2010	
Mailing Address 1327 Riddle Ave #8		Amount 14.36	
City State Zip Code Morgantown WV 26505		Transaction ID: SE.5544	
Purpose of Expenditure Delivery of Endorsement Pieces		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Joseph Manchin, III		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 490.25		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Special-General 2010	
(a) SUBTOTAL of Itemized Independent Expenditures .....		28.72	
(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.			
Marla Mercer Signature		Date MM / DD / YYYY 12 / 02 / 2010	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE		<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00157537         </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Karen A Cross		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 1 2</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 1 0</div> </div>	
Mailing Address 1327 Riddle Ave #8		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">14.37</div>	
City State Zip Code Morgantown WV 26505		<b>Transaction ID:</b> SE.5545	
Purpose of Expenditure Delivery of Endorsement Pieces		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Nick Rahall		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1133.93</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010	
Full Name (Last, First, Middle, Initial) of Payee Karen A Cross		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 1 2</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 1 0</div> </div>	
Mailing Address 1327 Riddle Ave #8		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">14.37</div>	
City State Zip Code Morgantown WV 26505		<b>Transaction ID:</b> SE.5546	
Purpose of Expenditure Delivery of Endorsement Pieces		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Elliott Maynard		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1148.30</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010	
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px;">28.74</div>	
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....		<div style="border: 1px solid black; height: 20px;"></div>	
<b>(c) TOTAL</b> Independent Expenditures .....		<div style="border: 1px solid black; height: 20px;"></div>	
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.			
Marla Mercer Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D 0 2</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 1 0</div> </div>	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE		<b>FEC IDENTIFICATION NUMBER</b> <div style="border: 1px solid black; padding: 2px;">C C00157537</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Eastern Kentucky Broadcasting		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 9</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 1 0</div> </div>	
Mailing Address 1240 Radio Dr		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">87.50</div>	
<div style="display: flex; justify-content: space-between;"> <div>City Pikeville</div> <div>State KY</div> <div>Zip Code 41501</div> </div>		<b>Transaction ID:</b> SE.5533	
Purpose of Expenditure Radio Ad		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Elliott Maynard		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">882.06</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010	
Full Name (Last, First, Middle, Initial) of Payee Eastern Kentucky Broadcasting		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 9</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 1 0</div> </div>	
Mailing Address 1240 Radio Dr		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">87.50</div>	
<div style="display: flex; justify-content: space-between;"> <div>City Pikeville</div> <div>State KY</div> <div>Zip Code 41501</div> </div>		<b>Transaction ID:</b> SE.5534	
Purpose of Expenditure Radio Ad		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Nick Rahall		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">969.56</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010	
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px;">175.00</div>	
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....		<div style="border: 1px solid black; height: 20px;"></div>	
<b>(c) TOTAL</b> Independent Expenditures .....		<div style="border: 1px solid black; height: 20px;"></div>	
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.			
Marla Mercer Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D 0 2</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 1 0</div> </div>	



# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE		FEC IDENTIFICATION NUMBER <b>C</b> C00157537	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Fairmont Printing		Date M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 1 0	
Mailing Address PO Box 2000		Amount 200.00	
City State Zip Code Fairmont WV 26555		Transaction ID: SE.5622	
Purpose of Expenditure Printing		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: John Raese		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1327.24		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Special-General 2010	
Full Name (Last, First, Middle, Initial) of Payee Hampshire Review		Date M M / D D / Y Y Y Y 1 1 / 1 2 / 2 0 1 0	
Mailing Address PO Box 1036		Amount 28.73	
City State Zip Code Romney WV 26757		Transaction ID: SE.5504	
Purpose of Expenditure Political Ad		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: John Raese		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 432.80		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Special-General 2010	
(a) SUBTOTAL of Itemized Independent Expenditures .....		228.73	
(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.			
Marla Mercer Signature		Date M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 1 0	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE		FEC IDENTIFICATION NUMBER <b>C</b> C00157537	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Hampshire Review		Date MM / DD / YYYY 11 / 12 / 2010	
Mailing Address PO Box 1036		Amount 28.73	
City Romney State WV Zip Code 26757		Transaction ID: SE.5506	
Purpose of Expenditure Political Ad		Office Sought: <input checked="" type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Joseph Manchin, III		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 461.53		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Special-General 2010	
Full Name (Last, First, Middle, Initial) of Payee Hampshire Review		Date MM / DD / YYYY 11 / 12 / 2010	
Mailing Address PO Box 1036		Amount 28.74	
City Romney State WV Zip Code 26757		Transaction ID: SE.5554	
Purpose of Expenditure Political Ad		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Shelley Capito		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 155.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010	
(a) SUBTOTAL of Itemized Independent Expenditures .....		57.47	
(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.			
Marla Mercer Signature		Date MM / DD / YYYY 12 / 02 / 2010	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE		FEC IDENTIFICATION NUMBER <b>C</b> C00157537	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Postmaster		Date M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0	
Mailing Address		Amount 202.04	
City State Zip Code Morgantown WV 26505		Transaction ID: SE.5557	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Joseph Manchin, III		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Special-General 2010	
202.04			
Full Name (Last, First, Middle, Initial) of Payee Postmaster		Date M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0	
Mailing Address		Amount 202.03	
City State Zip Code Morgantown WV 26505		Transaction ID: SE.5558	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: John Raese		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Special-General 2010	
404.07			
(a) SUBTOTAL of Itemized Independent Expenditures .....		404.07	
(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.			
Marla Mercer Signature		Date M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 1 0	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM-ITTEE		FEC IDENTIFICATION NUMBER <b>C</b> C00157537	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Postmaster		Date M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0	
Mailing Address		Amount 19.25	
City State Zip Code Morgantown WV 26505		Transaction ID: SE.5559	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Elliott Maynard		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 27.76		2010	
Full Name (Last, First, Middle, Initial) of Payee Postmaster		Date M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0	
Mailing Address		Amount 126.68	
City State Zip Code Morgantown WV 26505		Transaction ID: SE.5560	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> Presidential	
Category/Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Shelley Capito		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 126.68		2010	
(a) SUBTOTAL of Itemized Independent Expenditures .....		145.93	
(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.			
Marla Mercer Signature		Date M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 1 0	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE		<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00157537         </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Southern Communications		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 9</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 1 0</div> </div>	
Mailing Address 306 S Kanawha St		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">220.00</div>	
<div style="display: flex; justify-content: space-between;"> <div>City Beckley</div> <div>State WV</div> <div>Zip Code 25801</div> </div>		<b>Transaction ID:</b> SE.5515	
Purpose of Expenditure Radio Ad		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Elliott Maynard		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">247.76</div>			

  

Full Name (Last, First, Middle, Initial) of Payee Southern Communications		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 9</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 1 0</div> </div>	
Mailing Address 306 S Kanawha St		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">220.00</div>	
<div style="display: flex; justify-content: space-between;"> <div>City Beckley</div> <div>State WV</div> <div>Zip Code 25801</div> </div>		<b>Transaction ID:</b> SE.5516	
Purpose of Expenditure Radio Ad		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Nick Rahall		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010	
<div style="border: 1px solid black; padding: 2px; display: inline-block;">467.76</div>			

  

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">440.00</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>
<b>(c) TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; height: 20px; width: 100%;"></div>

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.

Marla Mercer \_\_\_\_\_

Signature

Date

M M  
1 2

D D  
0 2

Y Y Y Y  
2 0 1 0

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE		FEC IDENTIFICATION NUMBER <b>C</b> C00157537	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee WAMN		Date MM / DD / YYYY 10 / 29 / 2010	
Mailing Address 4415 Blueprints Rd		Amount 75.00	
City State Zip Code Bluefield WV 24701		Transaction ID: SE.5536	
Purpose of Expenditure Radio Ad		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Elliott Maynard		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1044.56		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010	
Full Name (Last, First, Middle, Initial) of Payee WAMN		Date MM / DD / YYYY 10 / 29 / 2010	
Mailing Address 4415 Blueprints Rd		Amount 75.00	
City State Zip Code Bluefield WV 24701		Transaction ID: SE.5537	
Purpose of Expenditure Radio Ad		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Nick Rahall		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1119.56		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010	
(a) SUBTOTAL of Itemized Independent Expenditures .....		150.00	
(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.			
Marla Mercer Signature		Date MM / DD / YYYY 12 / 02 / 2010	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE		FEC IDENTIFICATION NUMBER <b>C</b> C00157537	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee WCWV		Date MM / DD / YYYY 10 / 29 / 2010	
Mailing Address 713 Main St		Amount 50.00	
City State Zip Code Summersville WV 26651		Transaction ID: SE.5522	
Purpose of Expenditure Radio Ad		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Elliott Maynard		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 517.76		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010	
Full Name (Last, First, Middle, Initial) of Payee WCWV		Date MM / DD / YYYY 10 / 29 / 2010	
Mailing Address 713 Main St		Amount 50.00	
City State Zip Code Summersville WV 26651		Transaction ID: SE.5523	
Purpose of Expenditure Radio Ad		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Nick Rahall		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 567.76		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010	
(a) SUBTOTAL of Itemized Independent Expenditures .....		100.00	
(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.			
Marla Mercer Signature		Date MM / DD / YYYY 12 / 02 / 2010	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE		FEC IDENTIFICATION NUMBER <b>C</b> C00157537	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 0.95	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5378	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John Raese		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Special-General 2010 <b>[MEMO ITEM]</b>	
Calendar Year-To-Date Per Election for Office Sought 0.00			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date M M / D D / Y Y Y Y 1 0 / 1 4 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 0.95	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5379	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Joseph Manchin, III		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Special-General 2010 <b>[MEMO ITEM]</b>	
Calendar Year-To-Date Per Election for Office Sought 0.00			
(a) SUBTOTAL of Itemized Independent Expenditures .....		0.00	
(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.			
Marla Mercer Signature		Date M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 1 0	



# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE		FEC IDENTIFICATION NUMBER <b>C</b> C00157537	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date MM / DD / YYYY 10 / 14 / 2010	
Mailing Address 25 Canyon Rd.		Amount 0.95	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5385	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> Presidential	
Category/Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Shelley Capito		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 0.00		2010 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date MM / DD / YYYY 10 / 15 / 2010	
Mailing Address 25 Canyon Rd.		Amount 0.85	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5386	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John Raese		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Special-General	
Calendar Year-To-Date Per Election for Office Sought 0.00		2010 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures .....		0.00	
(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.			
Marla Mercer Signature		Date MM / DD / YYYY 12 / 02 / 2010	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE		FEC IDENTIFICATION NUMBER <b>C</b> C00157537	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 0.85	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5387	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Joseph Manchin, III		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Special-General 2010 <b>[MEMO ITEM]</b>	
Calendar Year-To-Date Per Election for Office Sought 0.00			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 0.85	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5388	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Michael Oliverio		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010 <b>[MEMO ITEM]</b>	
Calendar Year-To-Date Per Election for Office Sought 0.00			
(a) SUBTOTAL of Itemized Independent Expenditures .....		0.00	
(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.			
Marla Mercer Signature		Date M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 1 0	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE		<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00157537         </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 1 5</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 1 0</div> </div>	
Mailing Address 25 Canyon Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">0.85</div>	
City State Zip Code Morgantown WV 26508		<b>Transaction ID:</b> SE.5389	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: David McKinley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010 <b>[MEMO ITEM]</b>	
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 1 8</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 1 0</div> </div>	
Mailing Address 25 Canyon Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">0.86</div>	
City State Zip Code Morgantown WV 26508		<b>Transaction ID:</b> SE.5361	
Purpose of Expenditure Printing		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: John Raese		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : <u>Special-General</u> 2010 <b>[MEMO ITEM]</b>	
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>	
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....			
<b>(c) TOTAL</b> 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.			
Marla Mercer Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D D 0 2</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 1 0</div> </div>	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE		FEC IDENTIFICATION NUMBER <b>C</b> C00157537	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date MM / DD / YYYY 10 / 18 / 2010	
Mailing Address 25 Canyon Rd.		Amount 0.87	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5363	
Purpose of Expenditure Printing		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Joseph Manchin, III		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Special-General 2010 <b>[MEMO ITEM]</b>	
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date MM / DD / YYYY 10 / 18 / 2010	
Mailing Address 25 Canyon Rd.		Amount 0.84	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5364	
Purpose of Expenditure Printing		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Michael Oliverio		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010 <b>[MEMO ITEM]</b>	
(a) SUBTOTAL of Itemized Independent Expenditures .....		0.00	
(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.			
Marla Mercer Signature		Date MM / DD / YYYY 12 / 02 / 2010	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE		<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00157537         </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 18</div> <div style="border: 1px solid black; padding: 2px;">Y 2010</div> </div>	
Mailing Address 25 Canyon Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">0.83</div>	
City State Zip Code Morgantown WV 26508		<b>Transaction ID:</b> SE.5365	
Purpose of Expenditure Printing		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: David McKinley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010 <b>[MEMO ITEM]</b>	
<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 18</div> <div style="border: 1px solid black; padding: 2px;">Y 2010</div> </div>	
Mailing Address 25 Canyon Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">0.02</div>	
City State Zip Code Morgantown WV 26508		<b>Transaction ID:</b> SE.5366	
Purpose of Expenditure Printing		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Elliott Maynard		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010 <b>[MEMO ITEM]</b>	
<div style="border: 1px solid black; padding: 2px; text-align: right;">8.51</div>			
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>	
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
<b>(c) TOTAL</b> Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
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.			
Marla Mercer Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 12</div> <div style="border: 1px solid black; padding: 2px;">D 02</div> <div style="border: 1px solid black; padding: 2px;">Y 2010</div> </div>	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE		<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00157537         </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 18</div> <div style="border: 1px solid black; padding: 2px;">Y 2010</div> </div>	
Mailing Address 25 Canyon Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">0.02</div>	
City State Zip Code Morgantown WV 26508		<b>Transaction ID:</b> SE.5367	
Purpose of Expenditure Printing		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Nick Rahall		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010 <b>[MEMO ITEM]</b>	
<div style="border: 1px solid black; padding: 2px; text-align: right;">8.51</div>			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 10</div> <div style="border: 1px solid black; padding: 2px;">D 18</div> <div style="border: 1px solid black; padding: 2px;">Y 2010</div> </div>	
Mailing Address 25 Canyon Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1.64</div>	
City State Zip Code Morgantown WV 26508		<b>Transaction ID:</b> SE.5368	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: John Raese		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : <u>Special-General</u> 2010 <b>[MEMO ITEM]</b>	
<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>			
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>	
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
<b>(c) TOTAL</b> Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
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.			
Marla Mercer Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 12</div> <div style="border: 1px solid black; padding: 2px;">D 02</div> <div style="border: 1px solid black; padding: 2px;">Y 2010</div> </div>	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE		FEC IDENTIFICATION NUMBER <b>C</b> C00157537	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 1.64	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5370	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Joseph Manchin, III		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Special-General 2010 <b>[MEMO ITEM]</b>	
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 0.54	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5371	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Michael Oliverio		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010 <b>[MEMO ITEM]</b>	
(a) SUBTOTAL of Itemized Independent Expenditures .....		0.00	
(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.			
Marla Mercer Signature		Date M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 1 0	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE		<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00157537         </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 1 8</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 1 0</div> </div>	
Mailing Address 25 Canyon Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1.11</div>	
City State Zip Code Morgantown WV 26508		<b>Transaction ID:</b> SE.5373	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Elliott Maynard		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010 <b>[MEMO ITEM]</b>	
<div style="border: 1px solid black; padding: 2px; text-align: right;">8.51</div>			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 1 8</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 1 0</div> </div>	
Mailing Address 25 Canyon Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1.11</div>	
City State Zip Code Morgantown WV 26508		<b>Transaction ID:</b> SE.5374	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Nick Rahall		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010 <b>[MEMO ITEM]</b>	
<div style="border: 1px solid black; padding: 2px; text-align: right;">8.51</div>			
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....		<div style="border: 1px solid black; height: 20px;"></div>	
<b>(c) TOTAL</b> Independent Expenditures .....		<div style="border: 1px solid black; height: 20px;"></div>	
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.			
Marla Mercer Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D D 0 2</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 1 0</div> </div>	



# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE		<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px;"> <b>C</b> C00157537         </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 1 8</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 1 0</div> </div>	
Mailing Address 25 Canyon Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">0.55</div>	
City State Zip Code Morgantown WV 26508		<b>Transaction ID:</b> SE.5383	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/ Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: David McKinley		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div> <div style="text-align: right;"><b>[MEMO ITEM]</b></div>	
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 2</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 1 0</div> </div>	
Mailing Address 25 Canyon Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">9.52</div>	
City State Zip Code Morgantown WV 26508		<b>Transaction ID:</b> SE.5406	
Purpose of Expenditure Delivery of Mailing		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/ Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John Raese		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : <u>Special-General</u>	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div> <div style="text-align: right;"><b>[MEMO ITEM]</b></div>	
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
<b>(c) TOTAL</b> Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
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.			
Marla Mercer Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D D 0 2</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 1 0</div> </div>	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM-ITTEE		FEC IDENTIFICATION NUMBER <b>C</b> C00157537	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 9.52	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5407	
Purpose of Expenditure Delivery of Mailing		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Joseph Manchin, III		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Special-General 2010 <b>[MEMO ITEM]</b>	
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 6.66	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5408	
Purpose of Expenditure Delivery of Mailing		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Michael Oliverio		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010 <b>[MEMO ITEM]</b>	
(a) SUBTOTAL of Itemized Independent Expenditures .....		0.00	
(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.			
Marla Mercer Signature		Date M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 1 0	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE		<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00157537         </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 2</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 1 0</div> </div>	
Mailing Address 25 Canyon Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">6.67</div>	
City State Zip Code Morgantown WV 26508		<b>Transaction ID:</b> SE.5409	
Purpose of Expenditure Delivery of Mailing		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: David McKinley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010 <b>[MEMO ITEM]</b>	
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 2</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 1 0</div> </div>	
Mailing Address 25 Canyon Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">6.67</div>	
City State Zip Code Morgantown WV 26508		<b>Transaction ID:</b> SE.5410	
Purpose of Expenditure Delivery of Mailing		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Shelley Capito		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010 <b>[MEMO ITEM]</b>	
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>	
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....			
<b>(c) TOTAL</b> 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.			
Marla Mercer Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D D 0 2</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 1 0</div> </div>	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE		FEC IDENTIFICATION NUMBER <b>C</b> C00157537	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 1.86	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5411	
Purpose of Expenditure Delivery of Mailing		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Elliott Maynard		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 8.51		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : 2010 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 1.86	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5412	
Purpose of Expenditure Delivery of Mailing		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Nick Rahall		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 8.51		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : 2010 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures .....		0.00	
(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.			
Marla Mercer Signature		Date M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 1 0	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE		<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00157537         </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 2</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 1 0</div> </div>	
Mailing Address 25 Canyon Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">9.44</div>	
City State Zip Code Morgantown WV 26508		<b>Transaction ID:</b> SE.5451	
Purpose of Expenditure Delivery of Mailing		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: John Raese		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : <u>Special-General</u> 2010 <b>[MEMO ITEM]</b>	
<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 2</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 1 0</div> </div>	
Mailing Address 25 Canyon Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">9.44</div>	
City State Zip Code Morgantown WV 26508		<b>Transaction ID:</b> SE.5452	
Purpose of Expenditure Delivery of Mailing		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Joseph Manchin, III		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : <u>Special-General</u> 2010 <b>[MEMO ITEM]</b>	
<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>			
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>	
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
<b>(c) TOTAL</b> Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
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.			
Marla Mercer Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D D 0 2</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 1 0</div> </div>	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE		<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00157537         </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 2</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 1 0</div> </div>	
Mailing Address 25 Canyon Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5.72</div>	
City State Zip Code Morgantown WV 26508		<b>Transaction ID:</b> SE.5453	
Purpose of Expenditure Delivery of Mailing		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Shelley Capito		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010 <b>[MEMO ITEM]</b>	
<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 2</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 1 0</div> </div>	
Mailing Address 25 Canyon Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">5.63</div>	
City State Zip Code Morgantown WV 26508		<b>Transaction ID:</b> SE.5454	
Purpose of Expenditure Delivery of Mailing		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Elliott Maynard		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010 <b>[MEMO ITEM]</b>	
<div style="border: 1px solid black; padding: 2px; text-align: right;">8.51</div>			
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>	
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
<b>(c) TOTAL</b> Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
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.			
Marla Mercer Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D 0 2</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 1 0</div> </div>	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00157537	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 5.62	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5455	
Purpose of Expenditure Delivery of Mailing		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Nick Rahall		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 8.51		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010 <b>[MEMO ITEM]</b>	
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 4.73	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5414	
Purpose of Expenditure Delivery of Mailings (fuel)		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: John Raese		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 404.07		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Special-General 2010 <b>[MEMO ITEM]</b>	
(a) SUBTOTAL of Itemized Independent Expenditures .....		0.00	
(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.			
Marla Mercer Signature		Date M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 1 0	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE		FEC IDENTIFICATION NUMBER <b>C</b> C00157537	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 4.72	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5415	
Purpose of Expenditure Delivery of Mailings (fuel)		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Joseph Manchin, III		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 404.07		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Special-General 2010 <b>[MEMO ITEM]</b>	
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 2.81	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5416	
Purpose of Expenditure Delivery of Mailings (fuel)		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Elliott Maynard		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 27.76		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010 <b>[MEMO ITEM]</b>	
(a) SUBTOTAL of Itemized Independent Expenditures .....		0.00	
(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.			
Marla Mercer Signature		Date M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 1 0	



# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE		<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00157537         </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 5</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 1 0</div> </div>	
Mailing Address 25 Canyon Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2.80</div>	
City State Zip Code Morgantown WV 26508		<b>Transaction ID:</b> SE.5417	
Purpose of Expenditure Delivery of Mailings (fuel)		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Nick Rahall		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010 <b>[MEMO ITEM]</b>	
<div style="border: 1px solid black; padding: 2px; text-align: right;">27.76</div>			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 5</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 1 0</div> </div>	
Mailing Address 25 Canyon Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2.85</div>	
City State Zip Code Morgantown WV 26508		<b>Transaction ID:</b> SE.5418	
Purpose of Expenditure Delivery of Mailings (fuel)		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Shelley Capito		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010 <b>[MEMO ITEM]</b>	
<div style="border: 1px solid black; padding: 2px; text-align: right;">126.68</div>			
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
<b>(c) TOTAL</b> Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
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.			
Marla Mercer Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D 0 2</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 1 0</div> </div>	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM-ITTEE		FEC IDENTIFICATION NUMBER <b>C</b> C00157537	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 1.25	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5420	
Purpose of Expenditure Delivery of Mailings (fuel)		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: John Raese		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 404.07		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Special-General 2010 <b>[MEMO ITEM]</b>	
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 1.25	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5421	
Purpose of Expenditure Delivery of Mailings (fuel)		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Joseph Manchin, III		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 404.07		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Special-General 2010 <b>[MEMO ITEM]</b>	
(a) SUBTOTAL of Itemized Independent Expenditures .....		0.00	
(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.			
Marla Mercer Signature		Date M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 1 0	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM-ITTEE		FEC IDENTIFICATION NUMBER <b>C</b> C00157537	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 0.89	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5422	
Purpose of Expenditure Delivery of Mailings (fuel)		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Michael Oliverio		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010 <b>[MEMO ITEM]</b>	
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 0.88	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5423	
Purpose of Expenditure Delivery of Mailings (fuel)		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: David McKinley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010 <b>[MEMO ITEM]</b>	
(a) SUBTOTAL of Itemized Independent Expenditures .....		0.00	
(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.			
Marla Mercer Signature		Date M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 1 0	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00157537	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 0.89	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5424	
Purpose of Expenditure Delivery of Mailings (fuel)		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Shelley Capito		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126.68		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010 <b>[MEMO ITEM]</b>	
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 0.25	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5425	
Purpose of Expenditure Delivery of Mailings (fuel)		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Elliott Maynard		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 27.76		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010 <b>[MEMO ITEM]</b>	
(a) SUBTOTAL of Itemized Independent Expenditures .....		0.00	
(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.			
Marla Mercer Signature		Date M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 1 0	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE		<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00157537         </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 5</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 1 0</div> </div>	
Mailing Address 25 Canyon Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">0.26</div>	
City State Zip Code Morgantown WV 26508		<b>Transaction ID:</b> SE.5426	
Purpose of Expenditure Delivery of Mailings (fuel)		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Nick Rahall		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010 <b>[MEMO ITEM]</b>	
<div style="border: 1px solid black; padding: 2px; text-align: right;">27.76</div>			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 5</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 1 0</div> </div>	
Mailing Address 25 Canyon Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1.10</div>	
City State Zip Code Morgantown WV 26508		<b>Transaction ID:</b> SE.5498	
Purpose of Expenditure Printing		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: John Raese		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : <u>Special-General</u> 2010 <b>[MEMO ITEM]</b>	
<div style="border: 1px solid black; padding: 2px; text-align: right;">404.07</div>			
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>	
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
<b>(c) TOTAL</b> Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>	
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.			
Marla Mercer Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D D 0 2</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 1 0</div> </div>	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE		<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00157537         </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 5</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 1 0</div> </div>	
Mailing Address 25 Canyon Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1.10</div>	
City State Zip Code Morgantown WV 26508		<b>Transaction ID:</b> SE.5499	
Purpose of Expenditure Printing		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Joseph Manchin, III		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Special-General 2010 <b>[MEMO ITEM]</b>	
<div style="border: 1px solid black; padding: 2px; text-align: right;">404.07</div>			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 5</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 1 0</div> </div>	
Mailing Address 25 Canyon Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1.10</div>	
City State Zip Code Morgantown WV 26508		<b>Transaction ID:</b> SE.5501	
Purpose of Expenditure Printing		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Elliott Maynard		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010 <b>[MEMO ITEM]</b>	
<div style="border: 1px solid black; padding: 2px; text-align: right;">27.76</div>			
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>	
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
<b>(c) TOTAL</b> Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
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.			
Marla Mercer Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D 0 2</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 1 0</div> </div>	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE		<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00157537         </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 5</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 1 0</div> </div>	
Mailing Address 25 Canyon Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1.10</div>	
City State Zip Code Morgantown WV 26508		<b>Transaction ID:</b> SE.5502	
Purpose of Expenditure Printing		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Nick Rahall		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010 <b>[MEMO ITEM]</b>	
<div style="border: 1px solid black; padding: 2px; text-align: right;">27.76</div>			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 6</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 1 0</div> </div>	
Mailing Address 25 Canyon Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">3.39</div>	
City State Zip Code Morgantown WV 26508		<b>Transaction ID:</b> SE.5428	
Purpose of Expenditure Delivery of Mailing (fuel)		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: John Raese		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : <u>Special-General</u> 2010 <b>[MEMO ITEM]</b>	
<div style="border: 1px solid black; padding: 2px; text-align: right;">404.07</div>			
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
<b>(c) TOTAL</b> Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
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.			
Marla Mercer Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D D 0 2</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 1 0</div> </div>	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE		FEC IDENTIFICATION NUMBER <b>C</b> C00157537	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 3.39	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5429	
Purpose of Expenditure Delivery of Mailing (fuel)		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Joseph Manchin, III		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 404.07		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Special-General 2010 <b>[MEMO ITEM]</b>	
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 2.54	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5430	
Purpose of Expenditure Delivery of Mailing (fuel)		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Michael Oliverio		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010 <b>[MEMO ITEM]</b>	
(a) SUBTOTAL of Itemized Independent Expenditures .....		0.00	
(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.			
Marla Mercer Signature		Date M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 1 0	



# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM-ITTEE		FEC IDENTIFICATION NUMBER <b>C</b> C00157537	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date MM / DD / YYYY 10 / 26 / 2010	
Mailing Address 25 Canyon Rd.		Amount 2.54	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5431	
Purpose of Expenditure Delivery of Mailing (fuel)		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: David McKinley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : 2010 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date MM / DD / YYYY 10 / 26 / 2010	
Mailing Address 25 Canyon Rd.		Amount 2.54	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5432	
Purpose of Expenditure Delivery of Mailing (fuel)		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Shelley Capito		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126.68		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : 2010 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures .....		0.00	
(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.			
Marla Mercer Signature		Date MM / DD / YYYY 12 / 02 / 2010	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE		<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00157537         </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 6</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 1 0</div> </div>	
Mailing Address 25 Canyon Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">4.63</div>	
City State Zip Code Morgantown WV 26508		<b>Transaction ID:</b> SE.5435	
Purpose of Expenditure Delivery of Mailing (fuel)		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: John Raese		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Special-General 2010 <b>[MEMO ITEM]</b>	
<div style="border: 1px solid black; padding: 2px; text-align: right;">404.07</div>			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 6</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 1 0</div> </div>	
Mailing Address 25 Canyon Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">4.63</div>	
City State Zip Code Morgantown WV 26508		<b>Transaction ID:</b> SE.5436	
Purpose of Expenditure Delivery of Mailing (fuel)		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Joseph Manchin, III		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Special-General 2010 <b>[MEMO ITEM]</b>	
<div style="border: 1px solid black; padding: 2px; text-align: right;">404.07</div>			
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....		<div style="border: 1px solid black; height: 20px;"></div>	
<b>(c) TOTAL</b> Independent Expenditures .....		<div style="border: 1px solid black; height: 20px;"></div>	
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.			
Marla Mercer Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D D 0 2</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 1 0</div> </div>	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM-ITTEE		FEC IDENTIFICATION NUMBER <b>C</b> C00157537	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 4.63	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5437	
Purpose of Expenditure Delivery of Mailing (fuel)		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Elliott Maynard		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 27.76		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : 2010 <b>[MEMO ITEM]</b>	
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 4.63	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5438	
Purpose of Expenditure Delivery of Mailing (fuel)		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Nick Rahall		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 27.76		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : 2010 <b>[MEMO ITEM]</b>	
(a) SUBTOTAL of Itemized Independent Expenditures .....		0.00	
(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.			
Marla Mercer Signature		Date M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 1 0	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE		<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00157537         </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 6</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 1 0</div> </div>	
Mailing Address 25 Canyon Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1.85</div>	
City State Zip Code Morgantown WV 26508		<b>Transaction ID:</b> SE.5439	
Purpose of Expenditure Delivery of Mailing (fuel)		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Shelley Capito		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010 <b>[MEMO ITEM]</b>	
<div style="border: 1px solid black; padding: 2px; text-align: right;">126.68</div>			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 6</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 1 0</div> </div>	
Mailing Address 25 Canyon Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">0.93</div>	
City State Zip Code Morgantown WV 26508		<b>Transaction ID:</b> SE.5440	
Purpose of Expenditure Delivery of Mailing (fuel)		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: David McKinley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010 <b>[MEMO ITEM]</b>	
<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>			
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>	
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>	
<b>(c) TOTAL</b> Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>	
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.			
Marla Mercer Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D D 0 2</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 1 0</div> </div>	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE		<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00157537         </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 6</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 1 0</div> </div>	
Mailing Address 25 Canyon Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">0.93</div>	
City State Zip Code Morgantown WV 26508		<b>Transaction ID:</b> SE.5441	
Purpose of Expenditure Delivery of Mailing (fuel)		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Michael Oliverio		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010 <b>[MEMO ITEM]</b>	
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D D 2 6</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 1 0</div> </div>	
Mailing Address 25 Canyon Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">7.44</div>	
City State Zip Code Morgantown WV 26508		<b>Transaction ID:</b> SE.5443	
Purpose of Expenditure Delivery of Mailing		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: John Raese		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">404.07</div>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : <u>Special-General</u> 2010 <b>[MEMO ITEM]</b>	
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
<b>(c) TOTAL</b> Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
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.			
Marla Mercer Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D D 0 2</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y 2 0 1 0</div> </div>	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE		FEC IDENTIFICATION NUMBER <b>C</b> C00157537	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 7.44	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5444	
Purpose of Expenditure Delivery of Mailing		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Joseph Manchin, III		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 404.07		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Special-General 2010 <b>[MEMO ITEM]</b>	
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 7.44	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5445	
Purpose of Expenditure Delivery of Mailing		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Elliott Maynard		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 27.76		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010 <b>[MEMO ITEM]</b>	
(a) SUBTOTAL of Itemized Independent Expenditures .....		0.00	
(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.			
Marla Mercer Signature		Date M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 1 0	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00157537	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 7.43	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5446	
Purpose of Expenditure Delivery of Mailing		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Nick Rahall		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 27.76		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 2.94	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5447	
Purpose of Expenditure Delivery of Mailing		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Shelley Capito		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 126.68		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures .....		0.00	
(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.			
Marla Mercer Signature		Date M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 1 0	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM-ITTEE		FEC IDENTIFICATION NUMBER <b>C</b> C00157537	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 1.48	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5448	
Purpose of Expenditure Delivery of Mailing		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Michael Oliverio		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010 <b>[MEMO ITEM]</b>	
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc		Date M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 1.48	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5449	
Purpose of Expenditure Delivery of Mailing		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: David McKinley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010 <b>[MEMO ITEM]</b>	
(a) SUBTOTAL of Itemized Independent Expenditures .....		0.00	
(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.			
Marla Mercer Signature		Date M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 1 0	



# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE		FEC IDENTIFICATION NUMBER <b>C</b> C00157537	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc. State PAC Fund		Date M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 94.31	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5618	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: David McKinley		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2010 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc. State PAC Fund		Date M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 69.21	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5619	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> Presidential	
Category/Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Shelley Capito		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2010 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures .....		0.00	
(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.			
Marla Mercer Signature		Date M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 1 0	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE		FEC IDENTIFICATION NUMBER <b>C</b> C00157537	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc. State PAC Fund		Date M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 22.09	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5620	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Elliott Maynard		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 27.76		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : 2010 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc. State PAC Fund		Date M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 22.09	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5621	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Nick Rahall		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 27.76		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : 2010 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures .....		0.00	
(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.			
Marla Mercer Signature		Date M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 1 0	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM-ITTEE		FEC IDENTIFICATION NUMBER <b>C</b> C00157537	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc. State PAC Fund		Date M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 96.09	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5625	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John Raese		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Special-General 2010 <b>[MEMO ITEM]</b>	
Calendar Year-To-Date Per Election for Office Sought 404.07			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc. State PAC Fund		Date M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 96.09	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5626	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Joseph Manchin, III		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Special-General 2010 <b>[MEMO ITEM]</b>	
Calendar Year-To-Date Per Election for Office Sought 404.07			
(a) SUBTOTAL of Itemized Independent Expenditures .....		0.00	
(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.			
Marla Mercer Signature		Date M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 1 0	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE		<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00157537         </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc. State PAC Fund		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 5</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 1 0</div> </div>	
Mailing Address 25 Canyon Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">96.10</div>	
City State Zip Code Mrogantown WV 26508		<b>Transaction ID:</b> SE.5627	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Elliott Maynard		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010 <b>[MEMO ITEM]</b>	
<div style="border: 1px solid black; padding: 2px; text-align: right;">27.76</div>			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc. State PAC Fund		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 5</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 1 0</div> </div>	
Mailing Address 25 Canyon Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">96.10</div>	
City State Zip Code Mrogantown WV 26508		<b>Transaction ID:</b> SE.5628	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Nick Rahall		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010 <b>[MEMO ITEM]</b>	
<div style="border: 1px solid black; padding: 2px; text-align: right;">27.76</div>			
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px;">0.00</div>	
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....		<div style="border: 1px solid black; height: 20px;"></div>	
<b>(c) TOTAL</b> Independent Expenditures .....		<div style="border: 1px solid black; height: 20px;"></div>	
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.			
Marla Mercer Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D 0 2</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 1 0</div> </div>	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM-ITTEE		FEC IDENTIFICATION NUMBER <b>C</b> C00157537	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc. State PAC Fund		Date M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 11.71	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5629	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> Presidential	
Category/Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Shelley Capito		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 126.68		2010 [MEMO ITEM]	
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc. State PAC Fund		Date M M / D D / Y Y Y Y 1 0 / 2 5 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 2.22	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5631	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: David McKinley		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 0.00		2010 [MEMO ITEM]	
(a) SUBTOTAL of Itemized Independent Expenditures .....		0.00	
(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.			
Marla Mercer Signature		Date M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 1 0	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE		<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00157537         </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc. State PAC Fund		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 0</div> <div style="border: 1px solid black; padding: 2px;">D 2 5</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 1 0</div> </div>	
Mailing Address 25 Canyon Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2.22</div>	
City State Zip Code Mrogantown WV 26508		<b>Transaction ID:</b> SE.5632	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Michael Oliverio		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010 <b>[MEMO ITEM]</b>	
<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc. State PAC Fund		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 1</div> <div style="border: 1px solid black; padding: 2px;">D 1 9</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 1 0</div> </div>	
Mailing Address 25 Canyon Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">59.30</div>	
City State Zip Code Mrogantown WV 26508		<b>Transaction ID:</b> SE.5581	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Elliott Maynard		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010	
<div style="border: 1px solid black; padding: 2px; text-align: right;">1207.60</div>			
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; text-align: right;">59.30</div>	
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
<b>(c) TOTAL</b> Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
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.			
Marla Mercer Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 1 2</div> <div style="border: 1px solid black; padding: 2px;">D 0 2</div> <div style="border: 1px solid black; padding: 2px;">Y 2 0 1 0</div> </div>	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE		<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00157537         </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc. State PAC Fund		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 11</div> <div style="border: 1px solid black; padding: 2px;">D 19</div> <div style="border: 1px solid black; padding: 2px;">Y 2010</div> </div>	
Mailing Address 25 Canyon Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">78.55</div>	
City State Zip Code Mrogantown WV 26508		<b>Transaction ID:</b> SE.5582	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Nick Rahall		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010	
<div style="border: 1px solid black; padding: 2px; text-align: right;">1286.15</div>			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc. State PAC Fund		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 11</div> <div style="border: 1px solid black; padding: 2px;">D 19</div> <div style="border: 1px solid black; padding: 2px;">Y 2010</div> </div>	
Mailing Address 25 Canyon Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">89.31</div>	
City State Zip Code Mrogantown WV 26508		<b>Transaction ID:</b> SE.5583	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Joseph Manchin, III		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : <u>Special-General</u> 2010	
<div style="border: 1px solid black; padding: 2px; text-align: right;">579.56</div>			
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; text-align: right;">167.86</div>	
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
<b>(c) TOTAL</b> Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
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.			
Marla Mercer Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 12</div> <div style="border: 1px solid black; padding: 2px;">D 02</div> <div style="border: 1px solid black; padding: 2px;">Y 2010</div> </div>	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE		FEC IDENTIFICATION NUMBER <b>C</b> C00157537	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc. State PAC Fund		Date M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 89.32	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5584	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John Raese		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Special-General 2010	
Calendar Year-To-Date Per Election for Office Sought 668.88			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc. State PAC Fund		Date M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 84.83	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5585	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Michael Oliverio		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010	
Calendar Year-To-Date Per Election for Office Sought 84.83			
(a) SUBTOTAL of Itemized Independent Expenditures .....		174.15	
(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.			
Marla Mercer Signature		Date M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 1 0	



# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00157537	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc. State PAC Fund		Date M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 84.83	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5586	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/ Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: David McKinley		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2010	
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc. State PAC Fund		Date M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 57.28	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5587	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> Presidential	
Category/ Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Shelley Capito		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2010	
(a) SUBTOTAL of Itemized Independent Expenditures .....		142.11	
(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.			
Marla Mercer Signature		Date M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 1 0	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00157537	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc. State PAC Fund		Date M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 99.15	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5600	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/ Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: John Raese		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Special-General 2010	
Calendar Year-To-Date Per Election for Office Sought 768.03			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc. State PAC Fund		Date M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 99.15	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5601	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Category/ Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Joseph Manchin, III		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : Special-General 2010	
Calendar Year-To-Date Per Election for Office Sought 867.18			
(a) SUBTOTAL of Itemized Independent Expenditures .....		198.30	
(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.			
Marla Mercer Signature		Date M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 1 0	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM-ITTEE		FEC IDENTIFICATION NUMBER <b>C</b> C00157537	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc. State PAC Fund		Date MM / DD / YYYY 11 / 19 / 2010	
Mailing Address 25 Canyon Rd.		Amount 58.10	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5602	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Michael Oliverio		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 227.76		2010	
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc. State PAC Fund		Date MM / DD / YYYY 11 / 19 / 2010	
Mailing Address 25 Canyon Rd.		Amount 58.10	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5603	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: David McKinley		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 285.86		2010	
(a) SUBTOTAL of Itemized Independent Expenditures .....		116.20	
(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.			
Marla Mercer Signature		Date MM / DD / YYYY 12 / 02 / 2010	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE		FEC IDENTIFICATION NUMBER <b>C</b> C00157537	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc. State PAC Fund		Date M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 30.86	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5604	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/ Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Elliott Maynard		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2010	
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc. State PAC Fund		Date M M / D D / Y Y Y Y 1 1 / 1 9 / 2 0 1 0	
Mailing Address 25 Canyon Rd.		Amount 30.86	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5605	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/ Type		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Nick Rahall		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		2010	
(a) SUBTOTAL of Itemized Independent Expenditures .....		61.72	
(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.			
Marla Mercer Signature		Date M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 1 0	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE		<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00157537         </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc. State PAC Fund		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 11</div> <div style="border: 1px solid black; padding: 2px;">D 19</div> <div style="border: 1px solid black; padding: 2px;">Y 2010</div> </div>	
Mailing Address 25 Canyon Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">84.31</div>	
City State Zip Code Mrogantown WV 26508		<b>Transaction ID:</b> SE.5606	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Shelley Capito		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010	
<div style="border: 1px solid black; padding: 2px; text-align: right;">297.01</div>			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc. State PAC Fund		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 11</div> <div style="border: 1px solid black; padding: 2px;">D 19</div> <div style="border: 1px solid black; padding: 2px;">Y 2010</div> </div>	
Mailing Address 25 Canyon Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">130.03</div>	
City State Zip Code Mrogantown WV 26508		<b>Transaction ID:</b> SE.5614	
Purpose of Expenditure Postage		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: John Raese		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : <u>Special-General</u> 2010	
<div style="border: 1px solid black; padding: 2px; text-align: right;">997.21</div>			
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; text-align: right;">214.34</div>	
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
<b>(c) TOTAL</b> Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
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.			
Marla Mercer Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 12</div> <div style="border: 1px solid black; padding: 2px;">D 02</div> <div style="border: 1px solid black; padding: 2px;">Y 2010</div> </div>	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE		<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00157537         </div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc. State PAC Fund		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 11</div> <div style="border: 1px solid black; padding: 2px;">D 19</div> <div style="border: 1px solid black; padding: 2px;">Y 2010</div> </div>	
Mailing Address 25 Canyon Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">130.03</div>	
City State Zip Code Mrogantown WV 26508		<b>Transaction ID:</b> SE.5615	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Joseph Manchin, III		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) : <u>Special-General</u> 2010	
<div style="border: 1px solid black; padding: 2px; text-align: right;">1127.24</div>			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc. State PAC Fund		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 11</div> <div style="border: 1px solid black; padding: 2px;">D 19</div> <div style="border: 1px solid black; padding: 2px;">Y 2010</div> </div>	
Mailing Address 25 Canyon Rd.		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">115.15</div>	
City State Zip Code Mrogantown WV 26508		<b>Transaction ID:</b> SE.5616	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: <u>01</u> <input type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: Michael Oliverio		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010	
<div style="border: 1px solid black; padding: 2px; text-align: right;">401.01</div>			
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; text-align: right;">245.18</div>	
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
<b>(c) TOTAL</b> Independent Expenditures .....		<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>	
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.			
Marla Mercer Signature		Date <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M 12</div> <div style="border: 1px solid black; padding: 2px;">D 02</div> <div style="border: 1px solid black; padding: 2px;">Y 2010</div> </div>	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE		FEC IDENTIFICATION NUMBER <b>C</b> C00157537	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee West Virginians for Life, Inc. State PAC Fund		Date MM / DD / YYYY 11 / 19 / 2010	
Mailing Address 25 Canyon Rd.		Amount 20.84	
City State Zip Code Morgantown WV 26508		Transaction ID: SE.5617	
Purpose of Expenditure Postage		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> Presidential	
Category/Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: David McKinley		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 421.85		2010	
Full Name (Last, First, Middle, Initial) of Payee WVKM FM		Date MM / DD / YYYY 10 / 29 / 2010	
Mailing Address PO Box 68		Amount 113.40	
City State Zip Code Matewan WV 25678		Transaction ID: SE.5531	
Purpose of Expenditure Radio Ad		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> Presidential	
Category/Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Elliott Maynard		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 681.16		2010	
(a) SUBTOTAL of Itemized Independent Expenditures .....		134.24	
(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.			
Marla Mercer Signature		Date MM / DD / YYYY 12 / 02 / 2010	

# **SCHEDULE E (FEC Form 3X)** **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE			<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"><b>C</b> C00157537</div>	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice				
Full Name (Last, First, Middle, Initial) of Payee WVKM FM			Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 1 0</div> <div><small>D D</small> 2 9</div> <div><small>Y Y Y Y</small> 2 0 1 0</div> </div>	
Mailing Address PO Box 68			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: right;">113.40</div>	
<div style="display: flex; justify-content: space-between;"> <div>City Matewan</div> <div>State WV</div> <div>Zip Code 25678</div> </div>			<b>Transaction ID:</b> SE.5532	
Purpose of Expenditure Radio Ad			Office Sought: <input checked="" type="checkbox"/> House      State: WV <input type="checkbox"/> Senate      District: 03 <input type="checkbox"/> Presidential	
Category/ Type			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Nick Rahall			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; display: inline-block; text-align: right;">794.56</div> 2010	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">113.40</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">3385.46</div>
<p>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.</p>	
Marla Mercer _____ Signature	Date <div style="display: flex; justify-content: space-between;"> <div><small>M M</small> 1 2</div> <div><small>D D</small> 0 2</div> <div><small>Y Y Y Y</small> 2 0 1 0</div> </div>