

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

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

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 ▲

C C00157537

3. IS THIS
REPORT☐NEW
(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
Year-End 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)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

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 Mary Anne Buchanan

Signature of Treasurer

Mary Anne Buchanan

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

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)

Page 2

Write or Type Committee Name

WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

 M M / D D / Y Y Y Y
 07 / 01 / 2014

To:

 M M / D D / Y Y Y Y
 09 / 30 / 2014

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand January 1, 2014 | | 12.12 |
| (b) Cash on Hand at Beginning of Reporting Period..... | 131.35 | |
| (c) Total Receipts (from Line 19) | 0.00 | 2260.00 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | 131.35 | 2272.12 |
| 7. Total Disbursements (from Line 31) | 0.00 | 2140.77 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 131.35 | 131.35 |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | 3561.28 | |



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)

Page 3

Write or Type Committee Name

WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

M M / D D / Y Y Y Y
07 01 2014

To:

M M / D D / Y Y Y Y
09 30 2014
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).....

0.00

500.00

(ii) Unitemized

0.00

1760.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

0.00

2260.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

0.00

2260.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (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))..... ▶

0.00

2260.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

0.00

2260.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated 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 Expenditures (use Schedule E) | 0.00 | 2140.77 |
| 25. Coordinated Party Expenditures (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) Allocated 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)) .. | 0.00 | 2140.77 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 0.00 | 2140.77 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| 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) | 0.00 | 2260.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 0.00 | 2260.00 |
| 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 D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 6 OF 78

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

Fairmont PrintingNature of Debt (Purpose):
Printing

Mailing Address PO Box 2000

City State

Zip Code

Fairmont

WV

26555

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.5368

Amount Incurred This Period

897.96

Payment This Period

0.00

Outstanding Balance at Close of This Period

897.96

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

West Virginians for Life, Inc.Nature of Debt (Purpose):
Print Labels

Mailing Address 25 Canyon Rd

City State

Zip Code

Morgantown

WV

26508

Outstanding Balance Beginning This Period

180.84

Transaction ID : SD10.4827

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

180.84

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

7.37

Transaction ID : SD10.4846

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7.37

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

1086.17

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 7 OF 78

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 and Printing

Mailing Address 25 Canyon Rd

City State

Zip Code

Morgantown

WV

26508

Outstanding Balance Beginning This Period

0.24

Transaction ID : SD10.4847

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

0.24

B. 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

2.55

Transaction ID : SD10.4848

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2.55

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

3.48

Transaction ID : SD10.4849

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3.48

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

6.27

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 8 OF 78

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

6.63

Transaction ID : SD10.5021

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6.63

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

West Virginians for Life, Inc.Nature of Debt (Purpose):
Postage and Printing

Mailing Address 25 Canyon Rd

City State

Zip Code

Morgantown

WV

26508

Outstanding Balance Beginning This Period

33.65

Transaction ID : SD10.5022

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

33.65

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

West Virginians for Life, Inc.Nature of Debt (Purpose):
Postage and Printing

Mailing Address 25 Canyon Rd

City

State

Zip Code

Morgantown

WV

26508

Outstanding Balance Beginning This Period

3.72

Transaction ID : SD10.5023

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3.72

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

44.00

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
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PAGE 9 OF 78

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 and Printing

Mailing Address 25 Canyon Rd

City State

Zip Code

Morgantown

WV

26508

Outstanding Balance Beginning This Period

7.95

Transaction ID : SD10.5024

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7.95

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

West Virginians for Life, Inc.Nature of Debt (Purpose):
Travel Deliver Mailings

Mailing Address 25 Canyon Rd

City State

Zip Code

Morgantown

WV

26508

Outstanding Balance Beginning This Period

35.64

Transaction ID : SD10.5052

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

35.64

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

West Virginians for Life, Inc.Nature of Debt (Purpose):
Postage and Printing

Mailing Address 25 Canyon Rd

City

State

Zip Code

Morgantown

WV

26508

Outstanding Balance Beginning This Period

0.23

Transaction ID : SD10.5025

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

0.23

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

43.82

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
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PAGE 10 OF 78

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):

Travel Deliver Mailings

Mailing Address 25 Canyon Rd

City State

Zip Code

Morgantown

WV

26508

Outstanding Balance Beginning This Period

51.59

Transaction ID : SD10.5051

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

51.59

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

West Virginians for Life, Inc.

Nature of Debt (Purpose):

Postage and Printing

Mailing Address 25 Canyon Rd

City State

Zip Code

Morgantown

WV

26508

Outstanding Balance Beginning This Period

0.79

Transaction ID : SD10.5026

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

0.79

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

West Virginians for Life, Inc.

Nature of Debt (Purpose):

Labels

Mailing Address 25 Canyon Rd

City

State

Zip Code

Morgantown

WV

26508

Outstanding Balance Beginning This Period

429.68

Transaction ID : SD10.5209

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

429.68

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

482.06

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):
Printing

Mailing Address 25 Canyon Rd

City State

Zip Code

Morgantown

WV

26508

Outstanding Balance Beginning This Period

8.12

Transaction ID : SD10.5210

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

8.12

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

West Virginians for Life, Inc.Nature of Debt (Purpose):
Postage and Printing

Mailing Address 25 Canyon Rd

City State

Zip Code

Morgantown

WV

26508

Outstanding Balance Beginning This Period

15.37

Transaction ID : SD10.5211

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15.37

C. 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

3.00

Transaction ID : SD10.5212

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3.00

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

26.49

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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PAGE 12 OF 78

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 and Printing

Mailing Address 25 Canyon Rd

City State

Zip Code

Morgantown

WV

26508

Outstanding Balance Beginning This Period

71.08

Transaction ID : SD10.5214

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

71.08

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

West Virginians for Life, Inc.Nature of Debt (Purpose):
Postage and Printing

Mailing Address 25 Canyon Rd

City State

Zip Code

Morgantown

WV

26508

Outstanding Balance Beginning This Period

7.13

Transaction ID : SD10.5215

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7.13

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

West Virginians for Life, Inc.Nature of Debt (Purpose):
Postage and Printing

Mailing Address 25 Canyon Rd

City

State

Zip Code

Morgantown

WV

26508

Outstanding Balance Beginning This Period

58.00

Transaction ID : SD10.5216

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

58.00

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

136.21

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
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numbered line)

PAGE 13 OF 78

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 and Printing

Mailing Address 25 Canyon Rd

City State

Zip Code

Morgantown

WV

26508

Outstanding Balance Beginning This Period

1.74

Transaction ID : SD10.5219

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1.74

B. 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

15.18

Transaction ID : SD10.5217

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15.18

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

West Virginians for Life, Inc.

Nature of Debt (Purpose):

Postage and Printing

Mailing Address 25 Canyon Rd

City

State

Zip Code

Morgantown

WV

26508

Outstanding Balance Beginning This Period

5.74

Transaction ID : SD10.5218

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

5.74

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

22.66

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):

Printing and Postage

Mailing Address 25 Canyon Rd

City State

Zip Code

Morgantown

WV

26508

Outstanding Balance Beginning This Period

2.97

Transaction ID : SD10.5268

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2.97

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

West Virginians for Life, Inc.

Nature of Debt (Purpose):

Printing and Postage

Mailing Address 25 Canyon Rd

City State

Zip Code

Morgantown

WV

26508

Outstanding Balance Beginning This Period

8.89

Transaction ID : SD10.5269

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

8.89

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

West Virginians for Life, Inc.

Nature of Debt (Purpose):

Printing and Postage

Mailing Address 25 Canyon Rd

City

State

Zip Code

Morgantown

WV

26508

Outstanding Balance Beginning This Period

3.60

Transaction ID : SD10.5270

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3.60

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

15.46

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 OF 78

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 and Postage

Mailing Address 25 Canyon Rd

City State

Zip Code

Morgantown

WV

26508

Outstanding Balance Beginning This Period

4.06

Transaction ID : SD10.5271

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4.06

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

West Virginians for Life, Inc.Nature of Debt (Purpose):
Printing and Postage

Mailing Address 25 Canyon Rd

City State

Zip Code

Morgantown

WV

26508

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.5365

Amount Incurred This Period

2.28

Payment This Period

0.00

Outstanding Balance at Close of This Period

2.28

C. 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

0.00

Transaction ID : SD10.5366

Amount Incurred This Period

538.62

Payment This Period

0.00

Outstanding Balance at Close of This Period

538.62

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

544.96

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

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

PAGE 16 OF 78

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

0.00

Transaction ID : SD10.5411

Amount Incurred This Period

4.86

Payment This Period

0.00

Outstanding Balance at Close of This Period

4.86

B. 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

0.00

Transaction ID : SD10.5421

Amount Incurred This Period

36.87

Payment This Period

0.00

Outstanding Balance at Close of This Period

36.87

C. 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

0.00

Transaction ID : SD10.5422

Amount Incurred This Period

72.36

Payment This Period

0.00

Outstanding Balance at Close of This Period

72.36

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

114.09

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 17 OF 78

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

0.00

Transaction ID : SD10.5435

Amount Incurred This Period

3.79

Payment This Period

0.00

Outstanding Balance at Close of This Period

3.79

B. 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

0.00

Transaction ID : SD10.5436

Amount Incurred This Period

10.92

Payment This Period

0.00

Outstanding Balance at Close of This Period

10.92

C. 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

0.00

Transaction ID : SD10.5448

Amount Incurred This Period

1.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

1.50

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

16.21

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 18 OF 78

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

0.00

Transaction ID : SD10.5449

Amount Incurred This Period

2.70

Payment This Period

0.00

Outstanding Balance at Close of This Period

2.70

B. 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

0.00

Transaction ID : SD10.5450

Amount Incurred This Period

2.70

Payment This Period

0.00

Outstanding Balance at Close of This Period

2.70

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

0.00

Transaction ID : SD10.5468

Amount Incurred This Period

2.77

Payment This Period

0.00

Outstanding Balance at Close of This Period

2.77

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

8.17

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 19 OF 78

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 : SD10.5469

Amount Incurred This Period

2.77

Payment This Period

0.00

Outstanding Balance at Close of This Period

2.77

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

West Virginians for Life, Inc.Nature of Debt (Purpose):
Postage and Printing

Mailing Address 25 Canyon Rd

City State

Zip Code

Morgantown

WV

26508

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.5371

Amount Incurred This Period

0.19

Payment This Period

0.00

Outstanding Balance at Close of This Period

0.19

C. 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

0.00

Transaction ID : SD10.5492

Amount Incurred This Period

39.35

Payment This Period

0.00

Outstanding Balance at Close of This Period

39.35

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

42.31

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 20 OF 78

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

0.00

Transaction ID : SD10.5503

Amount Incurred This Period

11.98

Payment This Period

0.00

Outstanding Balance at Close of This Period

11.98

B. 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

0.00

Transaction ID : SD10.5502

Amount Incurred This Period

10.80

Payment This Period

0.00

Outstanding Balance at Close of This Period

10.80

C. 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

0.00

Transaction ID : SD10.5523

Amount Incurred This Period

8.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

8.00

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

30.78

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 21 OF 78

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 and Printing

Mailing Address 25 Canyon Rd

City State

Zip Code

Morgantown

WV

26508

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.5372

Amount Incurred This Period

0.19

Payment This Period

0.00

Outstanding Balance at Close of This Period

0.19

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

West Virginians for Life, Inc.Nature of Debt (Purpose):
Printng

Mailing Address 25 Canyon Rd

City State

Zip Code

Morgantown

WV

26508

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.5373

Amount Incurred This Period

11.40

Payment This Period

0.00

Outstanding Balance at Close of This Period

11.40

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

West Virginians for Life, Inc State PAC FundNature of Debt (Purpose):
Printing and Mailing

Mailing Address 25 Canyon Rd

City

State

Zip Code

Morgantown

WV

26508

Outstanding Balance Beginning This Period

0.51

Transaction ID : SD10.4824

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

0.51

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

12.10

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 22 OF 78

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

8.58

Transaction ID : SD10.5030

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

8.58

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

73.36

Transaction ID : SD10.5048

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

73.36

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

3.68

Transaction ID : SD10.5213

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

3.68

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

85.62

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 23 OF 78

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

843.90

Transaction ID : SD10.5272

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

843.90

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

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

843.90

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

3561.28

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) ►

3561.28

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 24 OF 78
FOR LINE 24 OF FORM 3X

| | | | |
|---|-------------------|---|---|
| NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE | | FEC IDENTIFICATION NUMBER ▼ C C00157537 | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | | MM / DD / YYYY | |
| Full Name of Payee Fairmont Printing [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 17 / 2014 | |
| Mailing Address PO Box 2000 | | Amount 206.53 | |
| City Fairmont | State WV | Zip Code 26555 | Transaction ID : SE.5394 |
| Purpose of Expenditure Printing | Category/ Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 02 / 2014 | |
| Name of Federal Candidate SHELLEY MOORE MS. CAPITO | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: WV |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |
| Full Name of Payee Fairmont Printing [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 17 / 2014 | |
| Mailing Address PO Box 2000 | | Amount 206.53 | |
| City Fairmont | State WV | Zip Code 26555 | Transaction ID : SE.5395 |
| Purpose of Expenditure Printing | Category/ Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 02 / 2014 | |
| Name of Federal Candidate NATALIE TENNANT | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: WV |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |
| (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. | | | |
| Mary Anne Buchanan Signature | | [Electronically Filed] Date MM / DD / YYYY 10 / 16 / 2014 | |

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 25 OF 78
 FOR LINE 24 OF FORM 3X

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

| | | | |
|---|---------------|---|--------------------------|
| Full Name of Payee Fairmont Printing [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 17 / 2014 | |
| Mailing Address PO Box 2000 | | Amount 112.24 | |
| City Fairmont | State WV | Zip Code 26555 | Transaction ID : SE.5396 |
| Purpose of Expenditure Printing | Category/Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 02 / 2014 | |
| Name of Federal Candidate GEORGE NICHOLAS JR CASEY | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV | |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |

| | | | |
|---|---------------|---|--------------------------|
| Full Name of Payee Fairmont Printing [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 17 / 2014 | |
| Mailing Address PO Box 2000 | | Amount 89.80 | |
| City Fairmont | State WV | Zip Code 26555 | Transaction ID : SE.5397 |
| Purpose of Expenditure Printing | Category/Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 02 / 2014 | |
| Name of Federal Candidate NICK JOE II RAHALL | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV | |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |

| | |
|---|------|
| (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.

Mary Anne Buchanan

[Electronically Filed]

Signature _____ Date MM / DD / YYYY 10 / 16 / 2014

| | | | |
|---|--|--|--|
| Full Name of Payee Fairmont Printing [MEMO ITEM] | | Date of Public Distribution/Dissemination M M / D D / Y Y Y Y 10 / 17 / 2014 | |
| Mailing Address PO Box 2000 | | Amount 112.25 | |
| City Fairmont | State WV | Zip Code 26555 | Transaction ID : SE.5399 |
| Purpose of Expenditure Printing | Category/ Type | Date of Disbursement or Obligation M M / D D / Y Y Y Y 09 / 02 / 2014 | |
| Name of Federal Candidate ALEXANDER XAVIER MOONEY | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> President <input type="checkbox"/> Senate | District: 02 State: WV |
| 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) ▶ _____ |

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

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

Mary Anne Buchanan

[Electronically Filed]

Date _____

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 27 OF 78
 FOR LINE 24 OF FORM 3X

| | | | |
|--|--|---|--|
| NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE | | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00157537 </div> | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y </div> | |

| | | | | | |
|---|-------------|-------------------|--|--|--|
| Full Name of Payee Fairmont Printing [MEMO ITEM] | | | Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 10 / 17 / 2014 </div> | | |
| Mailing Address PO Box 2000 | | | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 80.82 </div> | | |
| City Fairmont | State WV | Zip Code 26555 | Transaction ID : SE.5400 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 09 / 02 / 2014 </div> | | |
| Purpose of Expenditure Printing | | Category/ Type | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 09 / 02 / 2014 </div> | | |
| Name of Federal Candidate DAVID B MCKINLEY | | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV | | |
| Calendar Year-To-Date Per Election for Office Sought | | | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> | | |
| Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | | | | | |

| | | | | | |
|---|-------------|-------------------|---|--|--|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | | Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 07 / 08 / 2014 </div> | | |
| Mailing Address 25 Canyon Rd | | | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.57 </div> | | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5375 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 07 / 08 / 2014 </div> | | |
| Purpose of Expenditure Postage and Printing | | Category/ Type | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 07 / 08 / 2014 </div> | | |
| Name of Federal Candidate SHELLEY MOORE MS. CAPITO | | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: WV | | |
| Calendar Year-To-Date Per Election for Office Sought | | | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> | | |
| Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | | | | | |

| | |
|--|---|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> |
| (c) TOTAL Independent Expenditures..... ▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </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.

Mary Anne Buchanan

 Signature

[Electronically Filed] Date

M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 28 OF 78
 FOR LINE 24 OF FORM 3X

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

| | | | |
|---|---------------|---|---|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 08 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 0.57 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5376 |
| Purpose of Expenditure Postage and Printing | Category/Type | Date of Disbursement or Obligation MM / DD / YYYY 07 / 08 / 2014 | |
| Name of Federal Candidate EVAN H JENKINS | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>03</u> State: <u>WV</u> |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |
| | | 0.00 | |

| | | | |
|---|---------------|---|---|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 08 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 0.57 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5377 |
| Purpose of Expenditure Postage and Printing | Category/Type | Date of Disbursement or Obligation MM / DD / YYYY 07 / 08 / 2014 | |
| Name of Federal Candidate DAVID B MCKINLEY | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>01</u> State: <u>WV</u> |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |
| | | 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.

Mary Anne Buchanan

[Electronically Filed]

Date

MM / DD / YYYY
10 / 16 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 29 OF 78
 FOR LINE 24 OF FORM 3X

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

| | | | | | |
|---|-------------|--|---|--|--|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | | Date of Public Distribution/Dissemination MM / DD / YYYY 07 / 08 / 2014 | | |
| Mailing Address 25 Canyon Rd | | | Amount 0.57 | | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5383 | | |
| Purpose of Expenditure Postage and Printing | | Category/Type | Date of Disbursement or Obligation MM / DD / YYYY 07 / 08 / 2014 | | |
| Name of Federal Candidate ALEXANDER XAVIER MOONEY | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV | | |
| Calendar Year-To-Date Per Election for Office Sought 0.00 | | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | | |

| | | | | | |
|---|-------------|--|---|--|--|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 17 / 2014 | | |
| Mailing Address 25 Canyon Rd | | | Amount 121.55 | | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5384 | | |
| Purpose of Expenditure Printing | | Category/Type | Date of Disbursement or Obligation MM / DD / YYYY 08 / 22 / 2014 | | |
| Name of Federal Candidate NATALIE TENNANT | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: WV | | |
| Calendar Year-To-Date Per Election for Office Sought 0.00 | | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | | |

| | |
|--|-------------|
| (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.

Mary Anne Buchanan

Signature _____

[Electronically Filed]

Date

MM / DD / YYYY
10 / 16 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 30 OF 78
 FOR LINE 24 OF FORM 3X

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

| | | | |
|---|---------------|--|---|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 17 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 121.51 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5385 |
| Purpose of Expenditure Printing | Category/Type | | Date of Disbursement or Obligation MM / DD / YYYY 08 / 22 / 2014 |
| Name of Federal Candidate SHELLEY MOORE MS. CAPITO | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 0.00 | | Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: WV Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____ | |

| | | | |
|---|---------------|--|---|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 17 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 68.67 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5389 |
| Purpose of Expenditure Printing | Category/Type | | Date of Disbursement or Obligation MM / DD / YYYY 08 / 22 / 2014 |
| Name of Federal Candidate GEORGE NICHOLAS JR CASEY | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 0.00 | | Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____ | |

| | |
|--|------|
| (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.

Mary Anne Buchanan

Signature _____

[Electronically Filed]

Date

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

10 / 16 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 31 OF 78
 FOR LINE 24 OF FORM 3X

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

| | | | |
|---|---------------|---|---------------------------------|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 17 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 53.36 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5390 |
| Purpose of Expenditure Printing | Category/Type | Date of Disbursement or Obligation MM / DD / YYYY 08 / 22 / 2014 | |
| Name of Federal Candidate NICK JOE II RAHALL | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV | |
| Calendar Year-To-Date Per Election for Office Sought 0.00 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |

| | | | |
|---|---------------|---|---------------------------------|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 17 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 51.47 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5391 |
| Purpose of Expenditure Printing | Category/Type | Date of Disbursement or Obligation MM / DD / YYYY 08 / 22 / 2014 | |
| Name of Federal Candidate DAVID B MCKINLEY | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV | |
| Calendar Year-To-Date Per Election for Office Sought 0.00 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |

| | |
|--|-------------|
| (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.

Mary Anne Buchanan

Signature

[Electronically Filed]

Date

MM / DD / YYYY
10 / 16 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 32 OF 78
 FOR LINE 24 OF FORM 3X

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

| | | | |
|---|---------------|---|---|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 17 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 68.69 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5392 |
| Purpose of Expenditure Printing | Category/Type | Date of Disbursement or Obligation MM / DD / YYYY 08 / 22 / 2014 | |
| Name of Federal Candidate ALEXANDER XAVIER MOONEY | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |
| | | 0.00 | |

| | | | |
|---|---------------|---|---|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 17 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 53.37 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5393 |
| Purpose of Expenditure Printing | Category/Type | Date of Disbursement or Obligation MM / DD / YYYY 08 / 22 / 2014 | |
| Name of Federal Candidate EVAN H JENKINS | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |
| | | 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.

Mary Anne Buchanan

[Electronically Filed]

Date

MM / DD / YYYY
10 / 16 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 33 OF 78
 FOR LINE 24 OF FORM 3X

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

| | | | | | |
|---|-------------|--|---|--|--|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | | Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 06 / 2014 | | |
| Mailing Address 25 Canyon Rd | | | Amount 0.98 | | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5401 | | |
| Purpose of Expenditure Printing | | Category/Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 05 / 2014 | | |
| Name of Federal Candidate NATALIE TENNANT | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>WV</u> | | |
| Calendar Year-To-Date Per Election for Office Sought 0.00 | | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____ | | |

| | | | | | |
|---|-------------|--|---|--|--|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | | Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 06 / 2014 | | |
| Mailing Address 25 Canyon Rd | | | Amount 0.97 | | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5402 | | |
| Purpose of Expenditure Printing | | Category/Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 05 / 2014 | | |
| Name of Federal Candidate SHELLEY MOORE MS. CAPITO | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>WV</u> | | |
| Calendar Year-To-Date Per Election for Office Sought 0.00 | | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____ | | |

| | |
|--|-------------|
| (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.

Mary Anne Buchanan

Signature _____

[Electronically Filed]

Date

MM / DD / YYYY
10 / 16 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 34 OF 78
 FOR LINE 24 OF FORM 3X

| | |
|--|--|
| NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00157537 </div> |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | |

| | | | |
|---|-------------------|---|---|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> MM / DD / YYYY 09 / 05 / 2014 </div> | |
| Mailing Address 25 Canyon Rd | | Amount <div style="border: 1px solid black; padding: 2px;"> 0.97 </div> | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5403 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> MM / DD / YYYY 09 / 05 / 2014 </div> |
| Purpose of Expenditure Printing | Category/ Type | | |
| Name of Federal Candidate GEORGE NICHOLAS JR CASEY | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WV</u> |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |

| | | | |
|---|-------------------|---|---|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> MM / DD / YYYY 09 / 06 / 2014 </div> | |
| Mailing Address 25 Canyon Rd | | Amount <div style="border: 1px solid black; padding: 2px;"> 0.97 </div> | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5405 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> MM / DD / YYYY 09 / 05 / 2014 </div> |
| Purpose of Expenditure Printing | Category/ Type | | |
| Name of Federal Candidate NICK JOE II RAHALL | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: <u>03</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WV</u> |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |

| | |
|--|--|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | <div style="border: 1px solid black; padding: 2px;"> 0.00 </div> |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | <div style="border: 1px solid black; padding: 2px;"> 0.00 </div> |
| (c) TOTAL Independent Expenditures..... ▶ | <div style="border: 1px solid black; padding: 2px;"> 0.00 </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.

Mary Anne Buchanan

[Electronically Filed]

Date

MM / DD / YYYY
 10 / 16 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 37 OF 78
 FOR LINE 24 OF FORM 3X

| | | |
|--|--|---|
| NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE | | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00157537 </div> |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y . . . / . . . / </div> |

| | | | |
|---|-------------------|---|---|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 09 / 13 / 2014 </div> | |
| Mailing Address 25 Canyon Rd | | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 7.37 </div> | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5417 |
| Purpose of Expenditure Printing | Category/ Type | Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 09 / 05 / 2014 </div> | |
| Name of Federal Candidate NICK JOE II RAHALL | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |

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| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 09 / 27 / 2014 </div> | |
| Mailing Address 25 Canyon Rd | | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 4.36 </div> | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5418 |
| Purpose of Expenditure Printing | Category/ Type | Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 09 / 05 / 2014 </div> | |
| Name of Federal Candidate ALEXANDER XAVIER MOONEY | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |

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|--|---|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> |
| (c) TOTAL Independent Expenditures..... ▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </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.

Mary Anne Buchanan

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 38 OF 78
 FOR LINE 24 OF FORM 3X

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| NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE | | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00157537 </div> |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y </div> |

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| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 09 / 13 / 2014 </div> | |
| Mailing Address 25 Canyon Rd | | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2.70 </div> | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5419 |
| Purpose of Expenditure Printing | Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> | | Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 09 / 05 / 2014 </div> |
| Name of Federal Candidate DAVID B MCKINLEY | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WV</u> |
| Calendar Year-To-Date Per Election for Office Sought | | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> | |
| | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |

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| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 09 / 13 / 2014 </div> | |
| Mailing Address 25 Canyon Rd | | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2.82 </div> | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5420 |
| Purpose of Expenditure Printing | Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> | | Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 09 / 05 / 2014 </div> |
| Name of Federal Candidate EVAN H JENKINS | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: <u>03</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WV</u> |
| Calendar Year-To-Date Per Election for Office Sought | | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> | |
| | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |

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| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> |
| (c) TOTAL Independent Expenditures..... ▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </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.

Mary Anne Buchanan

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 39 OF 78
 FOR LINE 24 OF FORM 3X

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

| | | | |
|---|---------------|---|---|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 27 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 0.75 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5423 |
| Purpose of Expenditure Printing | Category/Type | | Date of Disbursement or Obligation MM / DD / YYYY 09 / 05 / 2014 |
| Name of Federal Candidate DAVID B MCKINLEY | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought | | Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV | |
| 0.00 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |

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|---|---------------|---|---|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 27 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 14.47 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5424 |
| Purpose of Expenditure Printing | Category/Type | | Date of Disbursement or Obligation MM / DD / YYYY 09 / 05 / 2014 |
| Name of Federal Candidate GEORGE NICHOLAS JR CASEY | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought | | Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV | |
| 0.00 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |

| | |
|--|-------------|
| (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.

Mary Anne Buchanan

Signature

[Electronically Filed]

Date

MM / DD / YYYY
10 / 16 / 2014

| | | | |
|---|--|---|---|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>09 / 27 / 2014</div> </div> | |
| Mailing Address 25 Canyon Rd | | Amount <div> <div>9.34</div> </div> | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5426 Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> <div>09 / 05 / 2014</div> </div> |
| Purpose of Expenditure Printing | Category/ Type | | |
| Name of Federal Candidate EVAN H JENKINS | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> President <input type="checkbox"/> Senate | District: <u>03</u> State: <u>WV</u> |
| Calendar Year-To-Date Per Election for Office Sought | <div> <div>0.00</div> </div> | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |

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| (a) SUBTOTAL of Itemized Independent Expenditures..... | 0.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures | |
| (c) TOTAL Independent Expenditures..... | |

FEC Schedule E (Form 3X) Rev. 09/2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 41 OF 78
FOR LINE 24 OF FORM 3X

| | | | |
|---|-------------------|---|---|
| NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE | | FEC IDENTIFICATION NUMBER ▼ C C00157537 | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | | M M M / D D D / Y Y Y Y Y Y | |
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 09 / 27 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 14.47 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5427 |
| Purpose of Expenditure Printing | Category/ Type | Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 09 / 05 / 2014 | |
| Name of Federal Candidate NATALIE TENNANT | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: WV |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination M M M / D D D / Y Y Y Y Y Y 09 / 27 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 14.50 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5428 |
| Purpose of Expenditure Printing | Category/ Type | Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 09 / 05 / 2014 | |
| Name of Federal Candidate SHELLEY MOORE MS. CAPITO | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: WV |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |
| (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. | | | |
| Mary Anne Buchanan Signature | | [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y 10 / 16 / 2014 | |

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 42 OF 78
 FOR LINE 24 OF FORM 3X

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

| | | | |
|---|---------------|--|---------------------------------|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 13 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 1.84 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5429 |
| Purpose of Expenditure Printing | Category/Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 05 / 2014 | |
| Name of Federal Candidate ALEXANDER XAVIER MOONEY | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought MM / DD / YYYY 0.00 | | Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |

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|---|---------------|--|---------------------------------|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 10 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 0.76 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5430 |
| Purpose of Expenditure Printing | Category/Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 05 / 2014 | |
| Name of Federal Candidate GEORGE NICHOLAS JR CASEY | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought MM / DD / YYYY 0.00 | | Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |

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|---|-------------------------------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | MM / DD / YYYY 0.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | MM / DD / YYYY |
| (c) TOTAL Independent Expenditures..... ▶ | MM / DD / YYYY |

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

Mary Anne Buchanan

[Electronically Filed]

Date

MM / DD / YYYY
10 / 16 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 43 OF 78
FOR LINE 24 OF FORM 3X

| | | | |
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| NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE | | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00157537</div> | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> | | | |
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; 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border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> | |

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 44 OF 78
FOR LINE 24 OF FORM 3X

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|---|-------------------|--|---------------------------------|
| NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE | | FEC IDENTIFICATION NUMBER ▼ C C00157537 | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | | MM / DD / YYYY | |
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 10 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 0.76 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5433 |
| Purpose of Expenditure Printing | Category/ Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 05 / 2014 | |
| Name of Federal Candidate SHELLEY MOORE MS. CAPITO | | Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: WV | |
| Calendar Year-To-Date Per Election for Office Sought 0.00 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 10 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 0.75 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5434 |
| Purpose of Expenditure Printing | Category/ Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 05 / 2014 | |
| Name of Federal Candidate ALEXANDER XAVIER MOONEY | | Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV | |
| Calendar Year-To-Date Per Election for Office Sought 0.00 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |
| (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. | | | |
| Mary Anne Buchanan Signature | | [Electronically Filed] Date MM / DD / YYYY 10 / 16 / 2014 | |

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 45 OF 78
FOR LINE 24 OF FORM 3X

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|---|-------------|--|---|
| NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE | | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00157537</div> | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> | | | |
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">10</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">17</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">2014</div> | |
| Mailing Address 25 Canyon Rd | | Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">2.19</div> | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5437 Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">09</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">05</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">2014</div> |
| Purpose of Expenditure Printing | | Category/ Type <div style="display: inline-block; border-bottom: 1px solid black; width: 60px;"></div> | |
| Name of Federal Candidate SHELLEY MOORE MS. CAPITO | | Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> President <input checked="" type="checkbox"/> Senate State: <u>WV</u> | |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____ | |
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">10</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">17</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">2014</div> | |
| Mailing Address 25 Canyon Rd | | Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">2.19</div> | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5439 Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">09</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">05</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">2014</div> |
| Purpose of Expenditure Printing | | Category/ Type <div style="display: inline-block; border-bottom: 1px solid black; width: 60px;"></div> | |
| Name of Federal Candidate NATALIE TENNANT | | Office Sought: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> President <input checked="" type="checkbox"/> Senate State: <u>WV</u> | |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____ | |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | | <div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">0.00</div> | |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | | <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> | |
| (c) TOTAL Independent Expenditures..... ▶ | | <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></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. | | | |
| Signature <i>Mary Anne Buchanan</i> | | Date <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">10</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">16</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">2014</div> <div style="text-align: right;">[Electronically Filed]</div> | |

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 46 OF 78
 FOR LINE 24 OF FORM 3X

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| NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE | | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00157537 </div> |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y . . / . . / </div> |

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|---|-------------------|--|---------------------------------|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 17 / 2014 </div> | |
| Mailing Address 25 Canyon Rd | | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2.18 </div> | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5440 |
| Purpose of Expenditure Printing | Category/ Type | Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 09 / 05 / 2014 </div> | |
| Name of Federal Candidate GEORGE NICHOLAS JR CASEY | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WV</u> | |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> | | | |

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|---|-------------------|--|---------------------------------|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 17 / 2014 </div> | |
| Mailing Address 25 Canyon Rd | | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2.18 </div> | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5441 |
| Purpose of Expenditure Printing | Category/ Type | Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 09 / 05 / 2014 </div> | |
| Name of Federal Candidate NICK JOE II RAHALL | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>03</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WV</u> | |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> | | | |

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| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> |
| (c) TOTAL Independent Expenditures..... ▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </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.

Mary Anne Buchanan

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 10 / 16 / 2014

Signature

| | | | |
|---|--|---|--|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 07 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 0.30 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5443 |
| Purpose of Expenditure Printing | Category/ Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 05 / 2014 | |
| Name of Federal Candidate EVAN H JENKINS | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> President | <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate |
| Calendar Year-To-Date Per Election for Office Sought | 0.00 | District: 03 State: WV | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ |

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| (a) SUBTOTAL of Itemized Independent Expenditures..... | ▶ | <div style="text-align: right; margin-bottom: 5px;">0.00</div> <hr/> |
| (b) SUBTOTAL of Unitemized Independent Expenditures | ▶ | <hr/> |
| (c) TOTAL Independent Expenditures..... | ▶ | <hr/> |

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.

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 48 OF 78
 FOR LINE 24 OF FORM 3X

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

| | | | |
|---|---------------|---|---------------------------------|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 07 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 0.30 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5444 |
| Purpose of Expenditure Printing | Category/Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 05 / 2014 | |
| Name of Federal Candidate NICK JOE II RAHALL | | Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV <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 2014 <input type="checkbox"/> Other (specify) ▶ | |

| | | | |
|---|---------------|---|---------------------------------|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 07 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 0.30 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5445 |
| Purpose of Expenditure Printing | Category/Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 05 / 2014 | |
| Name of Federal Candidate GEORGE NICHOLAS JR CASEY | | Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV <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 2014 <input type="checkbox"/> Other (specify) ▶ | |

| | |
|--|-------------|
| (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.

Mary Anne Buchanan

Signature

[Electronically Filed]

Date

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

10 / 16 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 49 OF 78
FOR LINE 24 OF FORM 3X

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

| | | | |
|---|-------------------|---|---|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 07 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 0.30 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5446 |
| Purpose of Expenditure Printing | Category/ Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 05 / 2014 | |
| Name of Federal Candidate NATALIE TENNANT | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: WV |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |

| | | | |
|---|-------------------|---|---|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 07 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 0.30 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5447 |
| Purpose of Expenditure Printing | Category/ Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 05 / 2014 | |
| Name of Federal Candidate SHELLEY MOORE MS. CAPITO | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: WV |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |

| | |
|--|------|
| (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.

Mary Anne Buchanan

[Electronically Filed]

Date

MM / DD / YYYY
10 / 16 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 50 OF 78
FOR LINE 24 OF FORM 3X

| | | | |
|---|-------------------|---|---|
| NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE | | FEC IDENTIFICATION NUMBER ▼ C C00157537 | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | | MM / DD / YYYY | |
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 0.54 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5451 |
| Purpose of Expenditure Printing | Category/ Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 05 / 2014 | |
| Name of Federal Candidate NATALIE TENNANT | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: WV |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 0.54 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5452 |
| Purpose of Expenditure Printing | Category/ Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 05 / 2014 | |
| Name of Federal Candidate NICK JOE II RAHALL | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |
| (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. | | | |
| Mary Anne Buchanan Signature | | [Electronically Filed] Date MM / DD / YYYY 10 / 16 / 2014 | |

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 51 OF 78
 FOR LINE 24 OF FORM 3X

| | | |
|--|--|---|
| NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE | | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00157537 </div> |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | | |

| | | | |
|---|-------------------|--|--------------------------|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 0.54 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5453 |
| Purpose of Expenditure Printing | Category/ Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 05 / 2014 | |
| Name of Federal Candidate GEORGE NICHOLAS JR CASEY | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV | |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |

| | | | |
|---|-------------------|---|--------------------------|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 0.54 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5454 |
| Purpose of Expenditure Printing | Category/ Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 05 / 2014 | |
| Name of Federal Candidate SHELLEY MOORE MS. CAPITO | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: WV | |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |

| | |
|--|------|
| (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.

Mary Anne Buchanan

[Electronically Filed]

Date

 MM / DD / YYYY
 10 / 16 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 52 OF 78
FOR LINE 24 OF FORM 3X

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|---|-------------------|---|---|
| NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE | | FEC IDENTIFICATION NUMBER ▼ C C00157537 | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | | MM / DD / YYYY | |
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 0.54 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5455 |
| Purpose of Expenditure Printing | Category/ Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 05 / 2014 | |
| Name of Federal Candidate DAVID B MCKINLEY | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 15 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 0.54 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5456 |
| Purpose of Expenditure Printing | Category/ Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 05 / 2014 | |
| Name of Federal Candidate DAVID B MCKINLEY | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |
| (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. | | | |
| Mary Anne Buchanan | | [Electronically Filed] | |
| Signature | | Date MM / DD / YYYY 10 / 16 / 2014 | |

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 53 OF 78
FOR LINE 24 OF FORM 3X

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|---|-------------------|---|---|
| NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE | | FEC IDENTIFICATION NUMBER ▼ C C00157537 | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | | MM / DD / YYYY | |
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 15 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 0.54 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5457 |
| Purpose of Expenditure Printing | Category/ Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 05 / 2014 | |
| Name of Federal Candidate GEORGE NICHOLAS JR CASEY | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 15 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 0.54 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5458 |
| Purpose of Expenditure Printing | Category/ Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 05 / 2014 | |
| Name of Federal Candidate NICK JOE II RAHALL | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |
| (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. | | | |
| Mary Anne Buchanan Signature | | [Electronically Filed] Date MM / DD / YYYY 10 / 16 / 2014 | |

| | | | |
|---|-------------|---|---|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>09 / 15 / 2014</div> </div> | |
| Mailing Address 25 Canyon Rd | | Amount <div> <div>0.54</div> </div> | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5462 Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> <div>09 / 05 / 2014</div> </div> |
| Purpose of Expenditure Printing | | Category/ Type | |
| Name of Federal Candidate SHELLEY MOORE MS. CAPITO | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>WV</u> |
| Calendar Year-To-Date Per Election for Office Sought | | <div> <div>0.00</div> </div> | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ► _____ |

| | | |
|--|---|------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... | ▶ | 0.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures | ▶ | |
| (c) TOTAL Independent Expenditures..... | ▶ | |

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 55 OF 78
 FOR LINE 24 OF FORM 3X

| | | | |
|--|--|---|--|
| NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE | | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00157537 </div> | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y </div> | |

| | | | |
|---|--|--|---|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 09 / 08 / 2014 </div> | |
| Mailing Address 25 Canyon Rd | | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.56 </div> | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5463 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 09 / 08 / 2014 </div> |
| Purpose of Expenditure Postage | Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> | | |
| Name of Federal Candidate SHELLEY MOORE MS. CAPITO | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: <u> </u> <input type="checkbox"/> President State: <u>WV</u> | |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> | | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.56 </div> | |

| | | | |
|---|--|--|---|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 09 / 08 / 2014 </div> | |
| Mailing Address 25 Canyon Rd | | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.55 </div> | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5464 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 09 / 08 / 2014 </div> |
| Purpose of Expenditure Postage | Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> | | |
| Name of Federal Candidate DAVID B MCKINLEY | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: <u>01</u> <input type="checkbox"/> President State: <u>WV</u> | |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> | | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.55 </div> | |

| | |
|--|---|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> |
| (c) TOTAL Independent Expenditures..... ▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </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.

Mary Anne Buchanan
 Signature

[Electronically Filed] Date

M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 56 OF 78
 FOR LINE 24 OF FORM 3X

| | | | |
|--|--|---|--|
| NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE | | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00157537 </div> | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y </div> | |

| | | | | | |
|---|-------------|-------------------|---|--|--|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | | Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 09 / 08 / 2014 </div> | | |
| Mailing Address 25 Canyon Rd | | | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.56 </div> | | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5465 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 09 / 08 / 2014 </div> | | |
| Purpose of Expenditure Postage | | Category/ Type | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 09 / 08 / 2014 </div> | | |
| Name of Federal Candidate NATALIE TENNANT | | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: WV | | |
| Calendar Year-To-Date Per Election for Office Sought | | | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> | | |
| Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | | | | | |

| | | | | | |
|---|-------------|-------------------|--|--|--|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | | Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 09 / 08 / 2014 </div> | | |
| Mailing Address 25 Canyon Rd | | | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.55 </div> | | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5467 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 09 / 08 / 2014 </div> | | |
| Purpose of Expenditure Postage | | Category/ Type | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 09 / 08 / 2014 </div> | | |
| Name of Federal Candidate NICK JOE II RAHALL | | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV | | |
| Calendar Year-To-Date Per Election for Office Sought | | | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> | | |
| Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | | | | | |

| | |
|--|---|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> |
| (c) TOTAL Independent Expenditures..... ▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </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.

Mary Anne Buchanan

Signature _____

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 57 OF 78
 FOR LINE 24 OF FORM 3X

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

| | | | |
|---|-------------------|---|--------------------------|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 08 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 0.55 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5472 |
| Purpose of Expenditure Postage | Category/ Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 08 / 2014 | |
| Name of Federal Candidate GEORGE NICHOLAS JR CASEY | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV | |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |

| | | | |
|---|-------------------|--|--------------------------|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 15 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 0.56 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5470 |
| Purpose of Expenditure Postage | Category/ Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 15 / 2014 | |
| Name of Federal Candidate SHELLEY MOORE MS. CAPITO | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: WV | |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |

| | |
|---|------|
| (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.

Mary Anne Buchanan

Signature _____

[Electronically Filed]

Date

MM / DD / YYYY

10 / 16 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 58 OF 78
 FOR LINE 24 OF FORM 3X

| | | | |
|--|--|---|--|
| NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE | | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00157537 </div> | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y </div> | |

| | | | | | |
|--|-------------|-------------------|---|--|--|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | | Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 09 / 15 / 2014 </div> | | |
| Mailing Address 25 Canyon Rd | | | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.56 </div> | | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5471 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 09 / 15 / 2014 </div> | | |
| Purpose of Expenditure Postage | | Category/ Type | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 09 / 15 / 2014 </div> | | |
| Name of Federal Candidate NATALIE TENNANT | | | <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; display: inline-block;"> 0.00 </div> | | |
| Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: WV | | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ► | | |

| | | | | | |
|---|-------------|-------------------|---|--|--|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | | Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 09 / 15 / 2014 </div> | | |
| Mailing Address 25 Canyon Rd | | | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.55 </div> | | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5473 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 09 / 15 / 2014 </div> | | |
| Purpose of Expenditure Postage | | Category/ Type | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 09 / 15 / 2014 </div> | | |
| Name of Federal Candidate NICK JOE II RAHALL | | | <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; display: inline-block;"> 0.00 </div> | | |
| Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV | | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ► | | |

| | |
|--|---|
| (a) SUBTOTAL of Itemized Independent Expenditures..... | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> |
| (b) SUBTOTAL of Unitemized Independent Expenditures | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> |
| (c) TOTAL Independent Expenditures..... | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </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.

Mary Anne Buchanan
 Signature

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 59 OF 78
 FOR LINE 24 OF FORM 3X

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

| | | | |
|---|---------------|--|--|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 15 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 0.55 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5474 |
| Purpose of Expenditure Postage | Category/Type | | Date of Disbursement or Obligation MM / DD / YYYY 09 / 15 / 2014 |
| Name of Federal Candidate GEORGE NICHOLAS JR CASEY | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 0.00 | | Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |

| | | | |
|---|---------------|--|--|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 15 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 0.55 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5475 |
| Purpose of Expenditure Postage | Category/Type | | Date of Disbursement or Obligation MM / DD / YYYY 09 / 15 / 2014 |
| Name of Federal Candidate DAVID B MCKINLEY | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought 0.00 | | Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |

| | |
|---|------|
| (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.

Mary Anne Buchanan
 Signature

[Electronically Filed]

Date MM / DD / YYYY
 10 / 16 / 2014

| | | | |
|---|-------------|---|---|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>09 / 22 / 2014</div> </div> | |
| Mailing Address 25 Canyon Rd | | Amount <div> <div>0.00</div> </div> | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5477 Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> <div>09 / 22 / 2014</div> </div> |
| Purpose of Expenditure Postage and Printing | | Category/ Type | |
| Name of Federal Candidate NATALIE TENNANT | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>WV</u> |
| Calendar Year-To-Date Per Election for Office Sought | | <div> <div>0.00</div> </div> | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ |

| | |
|--|------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... | 0.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures | |
| (c) TOTAL Independent Expenditures..... | |

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 61 OF 78
 FOR LINE 24 OF FORM 3X

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

| | | | |
|---|-------------------|---|---|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 22 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 0.04 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5478 |
| Purpose of Expenditure Postage and Printing | Category/ Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 22 / 2014 | |
| Name of Federal Candidate GEORGE NICHOLAS JR CASEY | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |

| | | | |
|---|-------------------|---|---|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 22 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 0.03 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5479 |
| Purpose of Expenditure Postage and Printing | Category/ Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 22 / 2014 | |
| Name of Federal Candidate NICK JOE II RAHALL | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |

| | |
|---|------|
| (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.

Mary Anne Buchanan

[Electronically Filed]

Date

MM / DD / YYYY
10 / 16 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 62 OF 78
 FOR LINE 24 OF FORM 3X

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|--|--|---|
| NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE | | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00157537 </div> |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | | |

| | | | |
|---|---------------|---|---|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 22 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 0.04 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5481 |
| Purpose of Expenditure Postage and Printing | Category/Type | | Date of Disbursement or Obligation MM / DD / YYYY 09 / 22 / 2014 |
| Name of Federal Candidate EVAN H JENKINS | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |

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|---|---------------|---|---|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 27 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 7.87 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5493 |
| Purpose of Expenditure Printing | Category/Type | | Date of Disbursement or Obligation MM / DD / YYYY 09 / 22 / 2014 |
| Name of Federal Candidate GEORGE NICHOLAS JR CASEY | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |

| | |
|--|------|
| (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.

Mary Anne Buchanan

[Electronically Filed]

Date

 MM / DD / YYYY
 10 / 16 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 63 OF 78
 FOR LINE 24 OF FORM 3X

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

| | | | |
|--|--|---|---------------------------------|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY <div style="display: flex; justify-content: space-between;"><div>09</div><div>27</div><div>2014</div></div> | |
| Mailing Address 25 Canyon Rd | | Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">7.86</div> | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5494 |
| Purpose of Expenditure Printing | Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div> | Date of Disbursement or Obligation MM / DD / YYYY <div style="display: flex; justify-content: space-between;"><div>09</div><div>22</div><div>2014</div></div> | |
| Name of Federal Candidate NICK JOE II RAHALL | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>03</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WV</u> | |
| 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 2014 <input type="checkbox"/> Other (specify) ▶ _____ | |

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|--|--|---|---------------------------------|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY <div style="display: flex; justify-content: space-between;"><div>09</div><div>27</div><div>2014</div></div> | |
| Mailing Address 25 Canyon Rd | | Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1.80</div> | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5495 |
| Purpose of Expenditure Printing | Category/Type <div style="border: 1px solid black; width: 50px; height: 20px;"></div> | Date of Disbursement or Obligation MM / DD / YYYY <div style="display: flex; justify-content: space-between;"><div>09</div><div>22</div><div>2014</div></div> | |
| Name of Federal Candidate EVAN H JENKINS | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>03</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WV</u> | |
| 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 2014 <input type="checkbox"/> Other (specify) ▶ _____ | |

| | |
|--|---|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | <div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div> |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | <div style="border: 1px solid black; padding: 2px; text-align: right;"></div> |
| (c) TOTAL 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.

Mary Anne Buchanan

Signature _____

[Electronically Filed]

Date

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

10

16

2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 64 OF 78
 FOR LINE 24 OF FORM 3X

| | | |
|--|--|---|
| NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE | | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00157537 </div> |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y </div> |

| | | | |
|---|---------------|---|--|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 09 / 27 / 2014 </div> | |
| Mailing Address 25 Canyon Rd | | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 3.41 </div> | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5496 |
| Purpose of Expenditure Printing | Category/Type | | Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 09 / 22 / 2014 </div> |
| Name of Federal Candidate DAVID B MCKINLEY | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WV</u> |
| Calendar Year-To-Date Per Election for Office Sought | | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> | |
| | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |

| | | | |
|---|---------------|---|--|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 09 / 27 / 2014 </div> | |
| Mailing Address 25 Canyon Rd | | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2.65 </div> | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5499 |
| Purpose of Expenditure Printing | Category/Type | | Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 09 / 22 / 2014 </div> |
| Name of Federal Candidate ALEXANDER XAVIER MOONEY | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WV</u> |
| Calendar Year-To-Date Per Election for Office Sought | | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> | |
| | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |

| | |
|--|---|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> |
| (c) TOTAL Independent Expenditures..... ▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </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.

Mary Anne Buchanan

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 65 OF 78
 FOR LINE 24 OF FORM 3X

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

| | | | |
|---|---------------|---|---------------------------------|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 27 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 7.88 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5500 |
| Purpose of Expenditure Printing | Category/Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 22 / 2014 | |
| Name of Federal Candidate NATALIE TENNANT | | Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>WV</u> | |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____ | |

| | | | |
|---|---------------|---|---------------------------------|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 27 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 7.88 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5501 |
| Purpose of Expenditure Printing | Category/Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 22 / 2014 | |
| Name of Federal Candidate SHELLEY MOORE MS. CAPITO | | Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>WV</u> | |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____ | |

| | |
|--|-------------|
| (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.

Mary Anne Buchanan

Signature _____

[Electronically Filed]

Date

MM / DD / YYYY

MM / DD / YYYY

MM / DD / YYYY

10 / 16 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 66 OF 78
FOR LINE 24 OF FORM 3X

| | | | |
|---|-------------|--|---|
| NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE | | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00157537</div> | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> | | | |
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">10</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">07</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">2014</div> | |
| Mailing Address 25 Canyon Rd | | Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">2.40</div> | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5512 Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">09</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">22</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">2014</div> |
| Purpose of Expenditure Printing | | Category/ Type <div style="display: inline-block; border-bottom: 1px solid black; width: 60px;"></div> | |
| Name of Federal Candidate SHELLEY MOORE MS. CAPITO | | Office Sought: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>WV</u> | |
| Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">0.00</div> | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____ | |
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">10</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">07</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">2014</div> | |
| Mailing Address 25 Canyon Rd | | Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">2.40</div> | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5513 Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">09</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">22</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">2014</div> |
| Purpose of Expenditure Printing | | Category/ Type <div style="display: inline-block; border-bottom: 1px solid black; width: 60px;"></div> | |
| Name of Federal Candidate NATALIE TENNANT | | Office Sought: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>WV</u> | |
| Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">0.00</div> | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____ | |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | | <div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">0.00</div> | |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | | <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div> | |
| (c) TOTAL Independent Expenditures..... ▶ | | <div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></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. | | | |
| Signature <i>Mary Anne Buchanan</i> | | Date <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">10</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">16</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">2014</div> <div style="text-align: center;">[Electronically Filed]</div> | |

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

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|--|--|---|--|
| NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE | | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00157537 </div> | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y </div> | |

| | | | |
|---|--|--|---|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 10 / 07 / 2014 </div> | |
| Mailing Address 25 Canyon Rd | | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2.40 </div> | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5514 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 09 / 22 / 2014 </div> |
| Purpose of Expenditure Printing | Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> | | |
| Name of Federal Candidate GEORGE NICHOLAS JR CASEY | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought | | Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> | | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> | |

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|---|--|--|---|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 10 / 07 / 2014 </div> | |
| Mailing Address 25 Canyon Rd | | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2.39 </div> | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5515 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 09 / 22 / 2014 </div> |
| Purpose of Expenditure Printing | Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> | | |
| Name of Federal Candidate NICK JOE II RAHALL | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought | | Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> | | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> | |

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|---|---|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> |
| (b) SUBTOTAL of Unitemized Independent Expenditures▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> |
| (c) TOTAL Independent Expenditures.....▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </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.

Mary Anne Buchanan
 Signature

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 68 OF 78
FOR LINE 24 OF FORM 3X

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| NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE | | FEC IDENTIFICATION NUMBER ▼ C C00157537 | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | | MM / DD / YYYY | |
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 07 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 0.20 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5516 |
| Purpose of Expenditure Printing | Category/ Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 22 / 2014 | |
| Name of Federal Candidate ALEXANDER XAVIER MOONEY | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 07 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 2.19 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5517 |
| Purpose of Expenditure Printing | Category/ Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 22 / 2014 | |
| Name of Federal Candidate EVAN H JENKINS | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |
| (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. | | | |
| Mary Anne Buchanan Signature | | [Electronically Filed] Date MM / DD / YYYY 10 / 16 / 2014 | |

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

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| NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE | | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00157537 </div> | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y </div> | |
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 09 / 27 / 2014 </div> | |
| Mailing Address 25 Canyon Rd | | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2.16 </div> | |
| City State Zip Code Morgantown WV 26508 | | Transaction ID : SE.5504 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 09 / 25 / 2014 </div> | |
| Purpose of Expenditure Printing | | Category/Type | |
| Name of Federal Candidate NATALIE TENNANT | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought | | Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: WV | |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 09 / 27 / 2014 </div> | |
| Mailing Address 25 Canyon Rd | | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2.16 </div> | |
| City State Zip Code Morgantown WV 26508 | | Transaction ID : SE.5505 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 09 / 25 / 2014 </div> | |
| Purpose of Expenditure Printing | | Category/Type | |
| Name of Federal Candidate SHELLEY MOORE MS. CAPITO | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | |
| Calendar Year-To-Date Per Election for Office Sought | | Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: WV | |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> | |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> | |
| (c) TOTAL Independent Expenditures..... ▶ | | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </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. | | | |
| Signature <u>Mary Anne Buchanan</u> | | Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 10 / 16 / 2014 </div> | |

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 70 OF 78
FOR LINE 24 OF FORM 3X

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| NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE | | FEC IDENTIFICATION NUMBER ▼ C C00157537 | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | | MM / DD / YYYY | |
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 27 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 2.16 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5506 |
| Purpose of Expenditure Printing | Category/ Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 25 / 2014 | |
| Name of Federal Candidate ALEXANDER XAVIER MOONEY | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 27 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 2.16 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5509 |
| Purpose of Expenditure Printing | Category/ Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 25 / 2014 | |
| Name of Federal Candidate GEORGE NICHOLAS JR CASEY | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |
| (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. | | | |
| Mary Anne Buchanan Signature | | [Electronically Filed] Date MM / DD / YYYY 10 / 16 / 2014 | |

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

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|--|--|---|--|
| NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE | | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00157537 </div> | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y </div> | |

| | | | |
|---|--|---|---|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 09 / 27 / 2014 </div> | |
| Mailing Address 25 Canyon Rd | | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2.16 </div> | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5511 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 09 / 25 / 2014 </div> |
| Purpose of Expenditure Printing | Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> | | |
| Name of Federal Candidate NICK JOE II RAHALL | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV | |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> | | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> | |

| | | | |
|---|--|---|---|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 10 / 13 / 2014 </div> | |
| Mailing Address 25 Canyon Rd | | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 1.60 </div> | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5518 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 09 / 25 / 2014 </div> |
| Purpose of Expenditure Printing | Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> | | |
| Name of Federal Candidate SHELLEY MOORE MS. CAPITO | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: WV | |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |
| <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> | | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> | |

| | |
|--|---|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> |
| (c) TOTAL Independent Expenditures..... ▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </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.

Mary Anne Buchanan
 Signature

[Electronically Filed] Date

M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2014

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 ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00157537 </div> |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | | |

| | | | |
|---|---------------|---|--------------------------|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 13 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 1.60 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5519 |
| Purpose of Expenditure Printing | Category/Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 25 / 2014 | |
| Name of Federal Candidate NATALIE TENNANT | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President State: WV | |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____ | |

| | | | |
|---|---------------|--|--------------------------|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 13 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 1.60 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5520 |
| Purpose of Expenditure Printing | Category/Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 25 / 2014 | |
| Name of Federal Candidate DAVID B MCKINLEY | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President State: WV | |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____ | |

| | |
|--|------|
| (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.

Mary Anne Buchanan

[Electronically Filed]

Date

MM / DD / YYYY
10 / 16 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 73 OF 78
 FOR LINE 24 OF FORM 3X

| | | |
|--|--|---|
| NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE | | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00157537 </div> |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | | |

| | | | |
|---|---------------|--|--------------------------|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 13 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 1.60 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5521 |
| Purpose of Expenditure Printing | Category/Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 25 / 2014 | |
| Name of Federal Candidate GEORGE NICHOLAS JR CASEY | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV | |
| Calendar Year-To-Date Per Election for Office Sought 0.00 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |

| | | | |
|---|---------------|--|--------------------------|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 13 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 1.60 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5522 |
| Purpose of Expenditure Printing | Category/Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 25 / 2014 | |
| Name of Federal Candidate NICK JOE II RAHALL | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV | |
| Calendar Year-To-Date Per Election for Office Sought 0.00 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |

| | |
|--|------|
| (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.

Mary Anne Buchanan

[Electronically Filed]

Date

MM / DD / YYYY
10 / 16 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 74 OF 78
 FOR LINE 24 OF FORM 3X

| | | | |
|--|--|---|--|
| NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE | | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00157537 </div> | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y </div> | |

| | | | | | |
|--|-------------|-------------------|---|--|--|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | | Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 09 / 30 / 2014 </div> | | |
| Mailing Address 25 Canyon Rd | | | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.04 </div> | | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5482 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 09 / 30 / 2014 </div> | | |
| Purpose of Expenditure Postage and Printing | | Category/ Type | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> | | |
| Name of Federal Candidate NATALIE TENNANT | | | <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; display: inline-block;"> 0.00 </div> | | |
| Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: WV | | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | | |

| | | | | | |
|--|-------------|-------------------|---|--|--|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | | Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 09 / 30 / 2014 </div> | | |
| Mailing Address 25 Canyon Rd | | | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.04 </div> | | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5483 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M / D D / Y Y Y Y Y Y 09 / 30 / 2014 </div> | | |
| Purpose of Expenditure Postage and Printing | | Category/ Type | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> | | |
| Name of Federal Candidate SHELLEY MOORE MS. CAPITO | | | <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; display: inline-block;"> 0.00 </div> | | |
| Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: WV | | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | | |

| | |
|--|---|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> |
| (c) TOTAL Independent Expenditures..... ▶ | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </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.

Mary Anne Buchanan
 Signature

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 10 / 16 / 2014

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 75 OF 78
 FOR LINE 24 OF FORM 3X

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

| | | | |
|---|-------------------|---|---|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 30 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 0.04 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5484 |
| Purpose of Expenditure Postage and Printing | Category/ Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 30 / 2014 | |
| Name of Federal Candidate EVAN H JENKINS | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |

| | | | |
|---|-------------------|---|---|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 30 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 0.03 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5485 |
| Purpose of Expenditure Postage and Printing | Category/ Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 30 / 2014 | |
| Name of Federal Candidate NICK JOE II RAHALL | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |

| | |
|---|------|
| (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.

Mary Anne Buchanan

[Electronically Filed]

Date

MM / DD / YYYY
10 / 16 / 2014

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 76 OF 78
FOR LINE 24 OF FORM 3X

| | | | |
|---|-------------|---|---|
| NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE | | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;">C C00157537</div> | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> | | | |
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;">09</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;">30</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;">2014</div> | |
| Mailing Address 25 Canyon Rd | | Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> 0.04 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5486 Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;">09</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;">30</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;">2014</div> |
| Purpose of Expenditure Postage and Printing | | Category/ Type <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> | |
| Name of Federal Candidate GEORGE NICHOLAS JR CASEY | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WV</u> | |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____ | |
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;">10</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;">07</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;">2014</div> | |
| Mailing Address 25 Canyon Rd | | Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> 2.28 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5487 Date of Disbursement or Obligation <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;">09</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;">30</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;">2014</div> |
| Purpose of Expenditure Printing | | Category/ Type <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> | |
| Name of Federal Candidate SHELLEY MOORE MS. CAPITO | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>WV</u> | |
| Calendar Year-To-Date Per Election for Office Sought | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ _____ | |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | | <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> 0.00 | |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | | <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> | |
| (c) TOTAL Independent Expenditures..... ▶ | | <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></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. | | | |
| Signature <i>Mary Anne Buchanan</i> | | Date <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;"></div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;"></div> <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;">10</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px;">16</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px;">2014</div> | |
| [Electronically Filed] | | | |

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 77 OF 78
 FOR LINE 24 OF FORM 3X

| | | | |
|---|--|--|--|
| NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE | | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00157537 </div> | |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y . . . / . . . / </div> | |
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 10 / 07 / 2014 </div> | |
| Mailing Address 25 Canyon Rd | | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2.28 </div> | |
| City State Zip Code Morgantown WV 26508 | | Transaction ID : SE.5488 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 09 / 30 / 2014 </div> | |
| Purpose of Expenditure Printing | | Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">.</div> | |
| Name of Federal Candidate ALEXANDER XAVIER MOONEY | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 02 State: WV <input type="checkbox"/> President | |
| Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 10 / 07 / 2014 </div> | |
| Mailing Address 25 Canyon Rd | | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 2.28 </div> | |
| City State Zip Code Morgantown WV 26508 | | Transaction ID : SE.5489 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 09 / 30 / 2014 </div> | |
| Purpose of Expenditure Printing | | Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">.</div> | |
| Name of Federal Candidate NICK JOE II RAHALL | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate District: 03 State: WV <input type="checkbox"/> President | |
| Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> 0.00 </div> | |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div> | |
| (c) TOTAL Independent Expenditures..... ▶ | | <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </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. | | | |
| Signature <u>Mary Anne Buchanan</u> | | Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 10 / 16 / 2014 </div> | |

[Electronically Filed]

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 78 OF 78
 FOR LINE 24 OF FORM 3X

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| NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE | | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00157537 </div> |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | | |

| | | | |
|---|---------------|--|--------------------------|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 07 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 2.28 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5490 |
| Purpose of Expenditure Printing | Category/Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 30 / 2014 | |
| Name of Federal Candidate GEORGE NICHOLAS JR CASEY | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WV | |
| Calendar Year-To-Date Per Election for Office Sought 0.00 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |

| | | | |
|---|---------------|---|--------------------------|
| Full Name of Payee West Virginians for Life, Inc. [MEMO ITEM] | | Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 07 / 2014 | |
| Mailing Address 25 Canyon Rd | | Amount 2.28 | |
| City Morgantown | State WV | Zip Code 26508 | Transaction ID : SE.5491 |
| Purpose of Expenditure Printing | Category/Type | Date of Disbursement or Obligation MM / DD / YYYY 09 / 30 / 2014 | |
| Name of Federal Candidate NATALIE TENNANT | | <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: WV | |
| Calendar Year-To-Date Per Election for Office Sought 0.00 | | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | |

| | |
|--|------|
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | 0.00 |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | |
| (c) TOTAL Independent Expenditures..... ▶ | 0.00 |

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

Mary Anne Buchanan

[Electronically Filed]

Date

MM / DD / YYYY
10 / 16 / 2014

Signature