

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) 5 Greenbrier St
 Check if different than previously reported. (ACC)
Charleston WV 25311

2. **FEC IDENTIFICATION NUMBER** C00417063
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 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 02 01 2010 through 02 28 2010

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

Type or Print Name of Treasurer Michelle Wilshere

Signature of Treasurer Electronically Filed by Michelle Wilshere Date 11 02 2010

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

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

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

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

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		8371.42
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	5173.57									
(c) Total Receipts (from Line 19)	41119.00	45694.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	46292.57	54065.42								
7. Total Disbursements (from Line 31)	12972.12	20744.97								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	33320.45	33320.45								
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)	64927.00									

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

For further information contact:

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

West Virginia Republican Party, Inc.

Report Covering the Period: From: To:

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)	8650.00	11900.00
(ii) Unitemized	6219.00	7444.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	14869.00	19344.00
(b) Political Party Committees	0.00	100.00
(c) Other Political Committees (such as PACs)	1250.00	1250.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	16119.00	20694.00
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)	25000.00	25000.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	25000.00	25000.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	41119.00	45694.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	16119.00	20694.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	12972.12	20744.97
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	12972.12	20744.97
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	12972.12	20744.97
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12972.12	20744.97

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	16119.00	20694.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	16119.00	20694.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	12972.12	20744.97
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	12972.12	20744.97

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 25
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A.	Full Name (Last, First, Middle Initial) Diane Shafer		Date of Receipt
	Mailing Address Box 749		<input type="text" value="02"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Shady Spring	WV	25918-0749
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Self		Occupation Orthopedic Surgeon	Transaction ID: A5EBE47372FB34708805
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="2000.00"/>	<input type="text" value="2000.00"/>

B.	Full Name (Last, First, Middle Initial) Dr. Michael Stewart		Date of Receipt
	Mailing Address PO Box 307		<input type="text" value="02"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Clarksburg	WV	26302-0307
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Self		Occupation Physician	Transaction ID: A79ECE2E6E48C4F438E9
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="300.00"/>	<input type="text" value="300.00"/>

C.	Full Name (Last, First, Middle Initial) Mr. Michael O. Fidler, MD		Date of Receipt
	Mailing Address 1561 Clark Rd.		<input type="text" value="02"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Charleston	WV	25314-2336
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Self		Occupation Physician	Transaction ID: A4BE24CEF8B2E43D08DC
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="500.00"/>	<input type="text" value="500.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="2800.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 25
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
Dr. Douglas E. McKinney, MD

Mailing Address 636 Rivendell Dr.

City State Zip Code
Bridgeport WV 26330-1358

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

Name of Employer Occupation
Va Medical Center Physician

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
02 / 01 / 2010

Transaction ID: A2B761F5B68E4444D8C9

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
Mr. Lewis H. Rexroad

Mailing Address 126 Gihon Meadows Dr.

City State Zip Code
Parkersburg WV 26101-9005

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

Name of Employer Occupation
UPS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
02 / 01 / 2010

Transaction ID: A8C9D17675FC645DC9A9

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Danny Baliker

Mailing Address 1126 Blue Horizon Dr.

City State Zip Code
Morgantown WV 26501-2063

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
MM / DD / YYYY
02 / 05 / 2010

Transaction ID: AC53B78B18A6A47D98CE

Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional) ► 1650.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 25
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Shirley F Runyon
Mailing Address HC 81, Box 273C
City Lewisburg State WV Zip Code 24901-9544
FEC ID number of contributing federal political committee. **C**
Name of Employer American Beer Company Occupation Beer Distributor
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt MM / DD / YYYY
02 / 05 / 2010
Transaction ID: A84E046C262C2406D856
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Dr. Craig M. Morgan
Mailing Address 1611 13th Ave.
City Huntington State WV Zip Code 25701-3811
FEC ID number of contributing federal political committee. **C**
Name of Employer Eye Consultants Of Huntington Occupation Physician
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt MM / DD / YYYY
02 / 09 / 2010
Transaction ID: A883257778DD94DE8AE3
Amount of Each Receipt this Period 500.00

C. Full Name (Last, First, Middle Initial)
Paul M Rady
Mailing Address 4 Mockingbird Lane
City Englewood State CO Zip Code 80113-4813
FEC ID number of contributing federal political committee. **C**
Name of Employer Antero Resources Corp Occupation Manager
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt MM / DD / YYYY
02 / 09 / 2010
Transaction ID: A365B36EDEA1F491E9FB
Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) 2000.00
TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 25
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Dr. Stephen L. Sebert, MD	Date of Receipt MM / DD / YYYY 02 / 12 / 2010
	Mailing Address 8 Meadow Creek	Transaction ID: A0BF5C5ABF5644F8094D
	City State Zip Code Barboursville WV 25504-9471	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Physician	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) Dr. Douglas E. McKinney, MD	Date of Receipt MM / DD / YYYY 02 / 15 / 2010
	Mailing Address 636 Rivendell Dr.	Transaction ID: A96AAD54661804088A86
	City State Zip Code Bridgeport WV 26330-1358	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Va Medical Center	Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

C.	Full Name (Last, First, Middle Initial) Dr. Rocco A Morabito	Date of Receipt MM / DD / YYYY 02 / 23 / 2010
	Mailing Address 20 Kensington Lane	Transaction ID: A9D8EE4007A174F64BA5
	City State Zip Code Huntington WV 25705-3860	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Physician	Occupation Huntington Urological Association	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	2000.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 25
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

A.

Full Name (Last, First, Middle Initial) Mr. Lewis H. Rexroad		Date of Receipt
Mailing Address 126 Gihon Meadows Dr.		<input type="text" value="02"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
City	State	Zip Code
Parkersburg	WV	26101-9005
FEC ID number of contributing federal political committee.		Transaction ID: A85A7A84F3E8E456AAC3
		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer UPS	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="500.00"/>	

B.

Full Name (Last, First, Middle Initial) Dr. Douglas E. McKinney, MD		Date of Receipt
Mailing Address 636 Rivendell Dr.		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
City	State	Zip Code
Bridgeport	WV	26330-1358
FEC ID number of contributing federal political committee.		Transaction ID: A335759CF25E64CC0BA4
		Amount of Each Receipt this Period
		<input type="text" value="100.00"/>
Name of Employer Va Medical Center	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="2100.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="200.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="8650.00"/>

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

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

FOR LINE NUMBER: PAGE 11 / 25
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
DOMINION POLITICAL ACTION COMMITTEE

Mailing Address One James River Plaza, 20th Floor
P.O. BOX 26666

City Richmond State VA Zip Code 23261

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 2 / 0 9 / 2 0 1 0

Transaction ID: A22C3FC0CDF294C7B82C

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Harrison County Republican Club

Mailing Address 223 Gordon Street

City Bridgeport State WV Zip Code 26330

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 2 / 2 3 / 2 0 1 0

Transaction ID: A1031C8F6D2FD4C46984

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ► 1250.00

TOTAL This Period (last page this line number only) ► 1250.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 12 / 25

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

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

A. Full Name (Last, First, Middle Initial) Tommy Phillips <hr/> Mailing Address 60 Overlook Drive <hr/> City Bridgeport State WV Zip Code 26330-1022 <hr/> Purpose of Disbursement IT services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B9BB3E703274F46B09E4 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 1 / 2 0 1 0
	Amount of Each Disbursement this Period 880.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Fibernet <hr/> Mailing Address PO Box 2021 <hr/> City Mechanicsburg State PA Zip Code 17055 <hr/> Purpose of Disbursement utilities Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B1BE2DE552A2C4FA99DB Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 1 0
	Amount of Each Disbursement this Period 251.94
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Mountaineer Gas <hr/> Mailing Address PO Box 362 <hr/> City Charleston State WV Zip Code 25322 <hr/> Purpose of Disbursement utilities Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: BD14FFA7D85A44EE7A78 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 3 / 2 0 1 0
	Amount of Each Disbursement this Period 538.84
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1670.78
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 15 / 25

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

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

<p>A. Full Name (Last, First, Middle Initial) Big Mac Printing</p> <p>Mailing Address 418 Market Street</p> <p>City Parkersburg State WV Zip Code 26101</p> <p>Purpose of Disbursement Advertising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B0FBF72FF4D3B4C4E8BD</p> <p>Date of Disbursement</p> <p><input type="text" value="02"/> <input type="text" value="10"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="200.87"/></p>
<p>B. Full Name (Last, First, Middle Initial) Troy A. Berman</p> <p>Mailing Address 11 Greenbrier St Apt 19</p> <p>City Charleston State WV Zip Code 25311-2182</p> <p>Purpose of Disbursement expense reimbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BD533475342254B50A72</p> <p>Date of Disbursement</p> <p><input type="text" value="02"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="820.10"/></p>
<p>C. Full Name (Last, First, Middle Initial) Amazon.com</p> <p>Mailing Address 1850 Mercer Road</p> <p>City Lexington State KY Zip Code 40511</p> <p>Purpose of Disbursement office supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B66BA818C0D4745BA96E</p> <p>Date of Disbursement</p> <p><input type="text" value="02"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="101.98"/></p> <p>[MEMO ITEM] office supplies</p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 16 / 25

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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

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

<p>A. Full Name (Last, First, Middle Initial) Facebook</p> <p>Mailing Address 156 University Ave</p> <p>City Paolo Alto State CA Zip Code 94301</p> <p>Purpose of Disbursement Advertising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B19D5A17FC27C4D2DA95</p> <p>Date of Disbursement 02 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 281.68</p> <p>[MEMO ITEM] Advertising</p>
<p>B. Full Name (Last, First, Middle Initial) Amazon.com</p> <p>Mailing Address 1850 Mercer Road</p> <p>City Lexington State KY Zip Code 40511</p> <p>Purpose of Disbursement office supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B71F937CD946E4E28A0F</p> <p>Date of Disbursement 02 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 68.96</p> <p>[MEMO ITEM] office supplies</p>
<p>C. Full Name (Last, First, Middle Initial) Amazon.com</p> <p>Mailing Address 1850 Mercer Road</p> <p>City Lexington State KY Zip Code 40511</p> <p>Purpose of Disbursement office supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: BECF512937A994A11B16</p> <p>Date of Disbursement 02 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 52.16</p> <p>[MEMO ITEM] office supplies</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

12171.75

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Cellular One/ A R Systems			Nature of Debt (Purpose): Cell Phone Bill from 4/1-05
Mailing Address P.O. Box 80766			
City Valley Forge	State PA	ZIP Code 19484	

Outstanding Balance Beginning This Period		Transaction ID: DC3068D8514F8455BB69	
1057.45			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	1057.45	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Strategic Telecommunications			Nature of Debt (Purpose): Interest on Strategic Fundraising
Mailing Address 7591 9th Street North			
City Oakdale	State MN	ZIP Code 55128	

Outstanding Balance Beginning This Period		Transaction ID: D869D6D1194434CB9B41	
1639.49			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	1639.49	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Christine Mcnalley			Nature of Debt (Purpose): election contract consulting-from 4/1/05
Mailing Address 44 Regent Court			
City Swansea	State MA	ZIP Code 02777	

Outstanding Balance Beginning This Period		Transaction ID: D25462FEAC2224BFE9E5	
2400.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	2400.00	

1) SUBTOTALS This Period This Page (optional).....	▶	5096.94
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Regional Distributing Center			Nature of Debt (Purpose): Toner and cartridge from 4/1/05
Mailing Address 872 S. Milwaukee Avenue #293			
City Libertyville	State IL	ZIP Code 60048	

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

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Tiffany Gibson			Nature of Debt (Purpose): Contract labor and expenses from 10/30/04
Mailing Address P.O. Box 425			
City Parkersburg	State WV	ZIP Code 26101	

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

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Bjw Printing & Office Supplies			Nature of Debt (Purpose): printing from 11/19/04
Mailing Address 3100 Robert Byrd Drive			
City Beckley	State WV	ZIP Code 25802	

Outstanding Balance Beginning This Period		Transaction ID: D4EF771A3F5514E9D9BD	
337.62			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	337.62	

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Bjw Printing & Office Supplies			Nature of Debt (Purpose): Interest
Mailing Address 3100 Robert Byrd Drive			
City Beckley	State WV	ZIP Code 25802	

Outstanding Balance Beginning This Period 291.15		Transaction ID: D6825545A7104462E97A	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 291.15	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Time Warner Cable			Nature of Debt (Purpose): Victory Field Office cable bill from 4/05
Mailing Address P.O Box 580485			
City Charlotte	State NC	ZIP Code 28258	

Outstanding Balance Beginning This Period 135.00		Transaction ID: D7704A876900941CB963	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 135.00	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Feather Larson Synhorst-dci			Nature of Debt (Purpose): fundraising calls from 10-31/2004
Mailing Address 7320 N Dreamy Draw Drive			
City Phoenix	State AZ	ZIP Code 85020	

Outstanding Balance Beginning This Period 7119.20		Transaction ID: D6F78C6722F78438A82C	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 7119.20	

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 20 / 25
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Fibernet-charleston	Nature of Debt (Purpose): Victory Field Office Phone Acct.26417
Mailing Address 211 Leon Sullivan Way	
City Charleston State WV ZIP Code 25301	

Outstanding Balance Beginning This Period 872.87	Transaction ID: D8F0AC59401D741A28E3	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 872.87

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Fibernet-charleston	Nature of Debt (Purpose): Phones for 110 Capitol St. Office
Mailing Address 211 Leon Sullivan Way	
City Charleston State WV ZIP Code 25301	

Outstanding Balance Beginning This Period 1744.90	Transaction ID: D3B3C0EDD479D432D978	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1744.90

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Komax Business Systems	Nature of Debt (Purpose): copier service and parts past due 10/04
Mailing Address 500 D Street	
City South Charleston State WV ZIP Code 25303	

Outstanding Balance Beginning This Period 1960.01	Transaction ID: D0C9639D782124A75ADA	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1960.01

1) SUBTOTALS This Period This Page (optional).....	▶	4577.78
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 / 25
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Komax Business Systems	Nature of Debt (Purpose): Incorrect Debt Previously Reported 7/05
Mailing Address 500 D Street	
City State ZIP Code South Charleston WV 25303	

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

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Tcs Technology Service	Nature of Debt (Purpose): Computer Rental from 10/3-0/2004
Mailing Address 4430 Kanawha Turnpike Suite B	
City State ZIP Code South Charleston WV 25309	

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

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Tcs Technology Service	Nature of Debt (Purpose): Computer Rental from 9/30-/2004
Mailing Address 4430 Kanawha Turnpike Suite B	
City State ZIP Code South Charleston WV 25309	

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

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Strategic Fundraising	Nature of Debt (Purpose): fundraising services from 11/15/04
Mailing Address 7591 9th Street North	
City State ZIP Code Oakdale MN 55128	

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

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Strategic Fundraising	Nature of Debt (Purpose): Interest from 7/31/05
Mailing Address 7591 9th Street North	
City State ZIP Code Oakdale MN 55128	

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

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Strategic Fundraising	Nature of Debt (Purpose): interest per Statement Summary today 1/08
Mailing Address 7591 9th Street North	
City State ZIP Code Oakdale MN 55128	

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

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 23 / 25
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Dennie Data Comm	Nature of Debt (Purpose): past due bill from 10/30/-04
Mailing Address 1339 Smith Street	
City Charleston State WV ZIP Code 25301	

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

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Alltell	Nature of Debt (Purpose): Victory Cell Bill from 4/-1/05
Mailing Address Bldg. 4 2nd Floor	
City Little Rock State AR ZIP Code 72202	

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

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Ac Express, Inc.	Nature of Debt (Purpose): Travel expense for speaker for conventio
Mailing Address 1150 Airport Road	
City Fairmont State WV ZIP Code 26554	

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

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

SCHEDULE D (FEC Form 3X)
DEBTS AND OBLIGATIONS
Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 24 / 25
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

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

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginia Republican Party, Inc.			Nature of Debt (Purpose): Monies withdrawn by Doug McKinney from non-fed. bldg. acct, put into the Fed acct.
Mailing Address 5 Greenbrier St			
City Charleston	State WV	ZIP Code 25311	

Outstanding Balance Beginning This Period		Transaction ID: D194C40A34397401F85F	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
25000.00	0.00	25000.00	

1) SUBTOTALS This Period This Page (optional).....	25000.00
2) TOTALS This Period (last page this line number only).....	64927.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	64927.00

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
West Virginia Republican Party, Inc.	M M / D D / Y Y Y Y 0 2 / 0 1 / 2 0 1 0	25000.00

BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative	0.00	Transaction ID: HEAFB742D35FA4BC99CA
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities	25000.00	Transaction ID: HFD8D949897ED43128B5
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative)	0.00
TOTAL This Period (Generic Voter Drive)	0.00
TOTAL This Period (Exempt Activities)	25000.00
TOTAL This Period (Direct Fundraising)	0.00
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred)	25000.00