

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED SECRETARY OF STATE PUBLIC 14 APR 15 AM 11:11 Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Capito For West Virginia

ADDRESS (number and street) P.O. Box 11519 Charleston WV 25339 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00539825 3. IS THIS REPORT NEW (N) OR AMENDED (A) CITY STATE ZIP CODE STATE DISTRICT WV

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) Termination Report (TER)

(b) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on MM/DD/YYYY in the State of (c) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on MM/DD/YYYY in the State of

5. Covering Period 01 01 2014 through 03 31 2014

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 Mr. Reed Spangler Signature of Treasurer Mr. Reed Spangler Reed Spangler Date 04 14 2014

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 table with 6 empty cells and FEC FORM 3 (Revised 02/2003)

149291925

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**Capito For West Virginia**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)) ..	837983.61	4134456.53
(b) Total Contribution Refunds (from Line 20(d)) ..	12450	17495
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))...	825533.61	4116961.53
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17) ..	359458.07	1571152.23
(b) Total Offsets to Operating Expenditures (from Line 14)...	3002.19	8381.79
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))...	356455.88	1562770.44
<b>8. Cash on Hand at Close of Reporting Period (from Line 27)...</b>	4196881.59	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) ..</b>		
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) ..</b>		

**For further information contact:**

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

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

14020182524

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 442

Write or Type Committee Name

Capito For West Virginia

Report Covering the Period: From: 

M	M
01	

 / 

D	D
01	

 / 

Y	Y	Y	Y
2014			

 To: 

M	M
03	

 / 

D	D
31	

 / 

Y	Y	Y	Y
2014			

**I. RECEIPTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than Political Committees

(i) Itemized (use Schedule A)...

555142

2696716.88

(ii) Unitemized .....

44741.61

189191.65

(iii) TOTAL of contributions from individuals .

599883.61

2885908.53

(b) Political Party Committees...

(c) Other Political Committees (such as PACs) ..

238100

1248548

(d) The Candidate .....

(e) TOTAL CONTRIBUTIONS

(other than loans)  
(add Lines 11(a)(iii), (b), (c), and (d))..

837983.61

4134456.53

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES ..

2600

1642212.13

13. LOANS:

(a) Made or Guaranteed by the Candidate...

(b) All Other Loans...

(c) TOTAL LOANS

(add Lines 13(a) and (b))...

14. OFFSETS TO OPERATING EXPENDITURES

(Refunds, Rebates, etc.) ..

3002.19

8381.79

15. OTHER RECEIPTS

(Dividends, Interest, etc.)...

347.95

978.37

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15)  
(Carry Total to Line 24, page 4)...

843933.75

5786028.82

14920192525

**DETAILED SUMMARY PAGE**  
of Disbursements

**II. DISBURSEMENTS**

**COLUMN A**  
Total This Period

**COLUMN B**  
Election Cycle-to-Date

17. OPERATING EXPENDITURES...

359458.07

1571152.23

18. TRANSFERS TO OTHER  
AUTHORIZED COMMITTEES ..

19. LOAN REPAYMENTS:

(a) Of Loans Made or Guaranteed  
by the Candidate...

(b) Of All Other Loans .....

(c) TOTAL LOAN REPAYMENTS  
(add Lines 19(a) and (b))...

20. REFUNDS OF CONTRIBUTIONS TO:

(a) Individuals/Persons Other  
Than Political Committees ..

(b) Political Party Committees...

(c) Other Political Committees  
(such as PACs) ..

(d) TOTAL CONTRIBUTION REFUNDS  
(add Lines 20(a), (b), and (c))...

8950

11495

3500

6000

12450

17495

21. OTHER DISBURSEMENTS ..

500

500

22. TOTAL DISBURSEMENTS

(add Lines 17, 18, 19(c), 20(d), and 21) ▶

372408.07

1589147.23

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...

3725355.91

24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...

843933.75

25. SUBTOTAL (add Line 23 and Line 24)...

4569289.66

26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...

372408.07

27. CASH ON HAND AT CLOSE OF REPORTING PERIOD

(subtract Line 26 from Line 25)...

4196881.59

1402092525



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

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

FOR LINE NUMBER: PAGE 5 OF 442  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Larkspur Land Group LLC**

Mailing Address **60 Terrence Dr  
Ste 302**

City **Pleasant Hill** State **PA** Zip Code **15236**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 22 / 2014**

Transaction ID : **SA11AI-CN40420**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Stephen Slaughter**

Mailing Address **60 Terrence Dr  
Ste 302**

City **Pleasant Hill** State **PA** Zip Code **15236**

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

Name of Employer Occupation  
**Larkspur Land Group LLC**    **Principal/Land Manager**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 22 / 2014**

Transaction ID : **SA11AI-CN40427**

Amount of Each Receipt this Period  
**1000**

Partnership-Larkspur Land Group LLC

**[MEMO ITEM]**  
**\$1000.00 MEMO Partnership Attributed**

**C.** Full Name (Last, First, Middle Initial)  
**Lyon Oil**

Mailing Address **114 Center St**

City **Madison** State **WV** Zip Code **25130**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 14 / 2014**

Transaction ID : **SA11AI-CN39738**

Amount of Each Receipt this Period  
**200**

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

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

**1200.00**

0192527

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Precision Pipe LLC**

Mailing Address **3314 56th Street**

City **Eau Claire** State **WI** Zip Code **54703**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **750**

Date of Receipt  
MM / DD / YYYY  
**03 / 22 / 2014**

Transaction ID : **SA11AI-CN40425**

Amount of Each Receipt this Period  
**750**

**B.** Full Name (Last, First, Middle Initial)  
**Robinson Enterprises**

Mailing Address **2300 Main St**

City **Wheeling** State **WV** Zip Code **26003**

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **2600**

Date of Receipt  
MM / DD / YYYY  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN41125**

Amount of Each Receipt this Period  
**2600**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Anne G Robinson**

Mailing Address **228 Carmel Rd**

City **Wheeling** State **WV** Zip Code **26003**

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

Name of Employer **Robinson Enterprises** Occupation **Owner**

Receipt For: 2014  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **3600**

Date of Receipt  
MM / DD / YYYY  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN41132**

Amount of Each Receipt this Period  
**1300**  
Partnership-Robinson Enterprises

**[MEMO ITEM]**  
**\$1300.00 MEMO Partnership Attributed**

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

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

**3350.00**

14920182528

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Robert Robinson**

Mailing Address **228 Carmel Rd**

City **Wheeling** State **WV** Zip Code **26003**

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

Name of Employer **Robinson Enterprises** Occupation **Managing Partner**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **3600**

Date of Receipt  
 MM / DD / YYYY  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN41133**

Amount of Each Receipt this Period  
**1300**  
 Partnership-Robinson Enterprises

**[MEMO ITEM]**  
**\$1300.00 MEMO Partnership Attributed**

**B.** Full Name (Last, First, Middle Initial)  
**Robinson Enterprises**

Mailing Address **2300 Main St**

City **Wheeling** State **WV** Zip Code **26003**

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

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 MM / DD / YYYY  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN41126**

Amount of Each Receipt this Period  
**2600**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Anne G Robinson**

Mailing Address **228 Carmel Rd**

City **Wheeling** State **WV** Zip Code **26003**

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

Name of Employer **Robinson Enterprises** Occupation **Owner**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2300**

Date of Receipt  
 MM / DD / YYYY  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN41130**

Amount of Each Receipt this Period  
**1300**  
 Partnership-Robinson Enterprises

**[MEMO ITEM]**  
**\$1300.00 MEMO Partnership Attributed**

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

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

**2600.00**

143 20192529

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Robert Robinson**

Mailing Address **228 Carmel Rd**

City **Wheeling** State **WV** Zip Code **26003**

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

Name of Employer **Robinson Enterprises** Occupation **Managing Partner**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2300**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11Ai-CN41131**

Amount of Each Receipt this Period  
**1300**  
 Partnership-Robinson Enterprises

**[MEMO ITEM]**  
**\$1300.00 MEMO Partnership Attributed**

**B.** Full Name (Last, First, Middle Initial)  
**Dr. James A Addy**

Mailing Address **Post Office Box 34**

City **Harpers Ferry** State **WV** Zip Code **25425**

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

Name of Employer **City of Harpers Ferry** Occupation **Mayor**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **225**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11Ai-CN40725**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Dr. John A. Adeniyi**

Mailing Address **708 Saddleback Cir**

City **Bridgeport** State **WV** Zip Code **26330**

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

Name of Employer **ASI** Occupation **Physician**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**01 / 27 / 2014**

Transaction ID : **SA11Ai-CN39371**

Amount of Each Receipt this Period  
**100**

**14020102530**

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

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

**200.00**

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 9 OF 442

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

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**Mr. Mike A. Albert**

Mailing Address **843 Spring Rd**

City State Zip Code  
**Charleston WV 25314**

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

Name of Employer Occupation  
**Public Service Comm'n Of W. VA Chairman**

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date **650**

Date of Receipt  
**02 / 25 / 2014**

Transaction ID : **SA11AI-CN39878**

Amount of Each Receipt this Period  
**200**

Full Name (Last, First, Middle Initial)  
**Mrs. Marilyn Albrecht**

Mailing Address **30567 Lakeview Ave**

City State Zip Code  
**Red Wing MN 55066**

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

Name of Employer Occupation  
**Red Wing Publishing Co. Publishers**

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date **1000**

Date of Receipt  
**03 / 22 / 2014**

Transaction ID : **SA11AI-CN40414**

Amount of Each Receipt this Period  
**1000**

Full Name (Last, First, Middle Initial)  
**Mr. Beaumont Allen**

Mailing Address **PO Box 250675**

City State Zip Code  
**Atlanta GA 30325**

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

Name of Employer Occupation  
**Self Employed Real Estate Management**

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date **1000**

Date of Receipt  
**03 / 07 / 2014**

Transaction ID : **SA11AI-CN39967**

Amount of Each Receipt this Period  
**1000**

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

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

**2200.00**

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

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

FOR LINE NUMBER: PAGE 10 OF 442

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**Mr. John Allen**

Mailing Address **PO Box 718**

City State Zip Code  
**Calhoun LA 71225**

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**Pipe Line Constructors**

Occupation  
**Pipeline Construction**

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

**2000**

Date of Receipt

**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40645**

Amount of Each Receipt this Period

**2000**

Full Name (Last, First, Middle Initial)

**Mr. Scott A Allen**

Mailing Address **7475 Jackrabbit Rd E**

City State Zip Code  
**Scottsdale AZ 85250**

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**Cash Time Title Loans**

Occupation  
**President**

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

**2000**

Date of Receipt

**02 / 13 / 2014**

Transaction ID : **SA11AI-CN39451**

Amount of Each Receipt this Period

**2000**

Full Name (Last, First, Middle Initial)

**Mr. John F Allevato**

Mailing Address **302 Georgetown Cir**

City State Zip Code  
**Charleston WV 25314**

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**Spilman Thomas Battle PLLC**

Occupation  
**Attorney**

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

**500**

Date of Receipt

**03 / 31 / 2014**

Transaction ID : **SA11AI-CN41151**

Amount of Each Receipt this Period

**250**

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

**4250.00**

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

**4250.00**

14920182532

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Peter Alphin**

Mailing Address 603 Olympic Dr

City Martinsburg State WV Zip Code 25404

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

Name of Employer Self Occupation Social Worker

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : SA11AI-CN41254

Amount of Each Receipt this Period  
**50**

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Jessica Alsop**

Mailing Address 1598 Hampton Rd

City Charleston State WV Zip Code 25314

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

Name of Employer Jackson Kelly Law Occupation Attorney

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 14 / 2014**

Transaction ID : SA11AI-CN39714

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. James E Altmeyer**

Mailing Address 609 Bay Colony Dr

City Virginia Beach State VA Zip Code 23451

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

Name of Employer Self Employed Occupation Funeral Director

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **750**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : SA11AI-CN40881

Amount of Each Receipt this Period  
**250**

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

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

**800.00**

14929182533

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>Mr. Franklin L. Ammons</b>		Date of Receipt MM / DD / YYYY 02 / 14 / 2014	
Mailing Address <b>473 Lawnview Dr</b>		Transaction ID : <b>SA11AI-CN39747</b>	
City <b>Morgantown</b>	State <b>WV</b>	Zip Code <b>26505</b>	Amount of Each Receipt this Period _____ <b>70</b> _____
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Requested Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation Requested Election Cycle-to-Date _____ <b>270</b> _____		

<b>B.</b> Full Name (Last, First, Middle Initial) <b>Michael Anderson</b>		Date of Receipt MM / DD / YYYY 02 / 14 / 2014	
Mailing Address <b>284 Halleck Rd</b>		Transaction ID : <b>SA11AI-CN39713</b>	
City <b>Fairmont</b>	State <b>WV</b>	Zip Code <b>26554</b>	Amount of Each Receipt this Period _____ <b>1000</b> _____
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>self-employed</b> Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation <b>Health Care</b> Election Cycle-to-Date _____ <b>1000</b> _____		

<b>C.</b> Full Name (Last, First, Middle Initial) <b>Michael Anderson</b>		Date of Receipt MM / DD / YYYY 02 / 25 / 2014	
Mailing Address <b>284 Halleck Rd</b>		Transaction ID : <b>SA11AI-CN39900</b>	
City <b>Fairmont</b>	State <b>WV</b>	Zip Code <b>26554</b>	Amount of Each Receipt this Period _____ <b>1000</b> _____
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>self-employed</b> Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Occupation <b>Health Care</b> Election Cycle-to-Date _____ <b>2000</b> _____		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	_____ <b>2070.00</b> _____
<b>TOTAL</b> This Period (last page this line number only).....	_____

14020182534



**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Frank Angiulli**

Mailing Address **621 Wescam Ct**

City **Bridgeport** State **WV** Zip Code **26330**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 MM / DD / YYYY  
**02 / 14 / 2014**

Transaction ID : **SA11Ai-CN39751**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Frank Angiulli**

Mailing Address **621 Wescam Ct**

City **Bridgeport** State **WV** Zip Code **26330**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 MM / DD / YYYY  
**03 / 18 / 2014**

Transaction ID : **SA11Ai-CN40113**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Marion H Baer**

Mailing Address **1562 Thomas Cir**

City **Charleston** State **WV** Zip Code **25314**

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

Name of Employer **Retired** Occupation **Housewife**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 MM / DD / YYYY  
**03 / 22 / 2014**

Transaction ID : **SA11Ai-CN40323**

Amount of Each Receipt this Period  
**100**

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

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

**300.00**

130102

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Wilburn Bailey Jr.**

Mailing Address **6272 Huff Creek Hwy**

City <b>Davin</b>	State <b>WV</b>	Zip Code <b>25617-8522</b>
----------------------	--------------------	-------------------------------

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

Name of Employer <b>Retired</b>	Occupation <b>Retired</b>
------------------------------------	------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 MM / DD / YYYY  
**02 / 14 / 2014**

Transaction ID : **SA11AI-CN39725**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Robert C. Baird**

Mailing Address **PO Box 711**

City <b>Gallipolis Ferry</b>	State <b>WV</b>	Zip Code <b>25515</b>
---------------------------------	--------------------	--------------------------

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

Name of Employer <b>Retired</b>	Occupation <b>Retired</b>
------------------------------------	------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt  
 MM / DD / YYYY  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40670**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**James Baker**

Mailing Address **1172 Park Ave**

City <b>New York</b>	State <b>NY</b>	Zip Code <b>10128</b>
-------------------------	--------------------	--------------------------

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

Name of Employer <b>Neuberger Berman</b>	Occupation <b>Investments</b>
---	----------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 MM / DD / YYYY  
**02 / 21 / 2014**

Transaction ID : **SA11AI-CN41109**

Amount of Each Receipt this Period  
**2600**

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

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

**2800.00**

11020182536

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

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

FOR LINE NUMBER: PAGE 15 OF 442  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Jack A Baldini**

Mailing Address **811 Poplar St**

City **Bridgeport** State **WV** Zip Code **26330**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **1400**

Date of Receipt  
**02 / 14 / 2014**

Transaction ID : **SA11Ai-CN39766**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Charles W Ballou**

Mailing Address **2112 Wakefield Ct**

City **Alexandria** State **VA** Zip Code **22307**

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

Name of Employer **RSM McGladrey** Occupation **C.P.A.**

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt  
**02 / 14 / 2014**

Transaction ID : **SA11Ai-CN39769**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Barbara R Banke**

Mailing Address **1045 Alexander Mountain Rd**

City **Geyserville** State **CA** Zip Code **95441**

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

Name of Employer **Jackson Family Farms** Occupation **Vintner**

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
**01 / 27 / 2014**

Transaction ID : **SA11Ai-CN39384**

Amount of Each Receipt this Period  
**2600**

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

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

**3200.00**

11020192537

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

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

FOR LINE NUMBER: PAGE 16 OF 442

(check only one)

11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Patrick L. Barker**

Mailing Address **234 Utah Rd**

City **Ravenswood** State **WV** Zip Code **26164**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt **03 / 23 / 2014**

Transaction ID : **SA11AI-CN40055**

Amount of Each Receipt this Period **300**

**B.** Full Name (Last, First, Middle Initial)  
**Stephen Barlow**

Mailing Address **4000 Colorado Blvd S**

City **Cherry Hills** State **CO** Zip Code **80113**

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

Name of Employer **Lockton Companies** Occupation **Insurance Broker**

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt **02 / 15 / 2014**

Transaction ID : **SA11AI-CN39531**

Amount of Each Receipt this Period **2600**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. William Barr**

Mailing Address **1910 Red Stone Rd**

City **Charleston** State **WV** Zip Code **25309**

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

Name of Employer **Amherst Industries Inc.** Occupation **Vice-President**

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt **03 / 07 / 2014**

Transaction ID : **SA11AI-CN39983**

Amount of Each Receipt this Period **1000**

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

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

**3900.00**

201092530

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 17 OF 442

(check only one)

11a     11b     11c     11d  
 12     13a     13b     14     15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Christy Barry**

Mailing Address 4003 Old Mill Rd

City Alexandria State VA Zip Code 22309-2814

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

Name of Employer US Air Force Occupation Attorney

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt **03 / 18 / 2014**

Transaction ID : **SA11Ai-CN40133**

Amount of Each Receipt this Period **100**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Thomas Barry**

Mailing Address 1220 Park Ave

City New York State NY Zip Code 10128

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

Name of Employer Zephyr Management LP Occupation Investments

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt **03 / 19 / 2014**

Transaction ID : **SA11Ai-CN40238**

Amount of Each Receipt this Period **1000**

**C.** Full Name (Last, First, Middle Initial)  
**Dill Battle**

Mailing Address 1605 Wilshire Pl

City Charleston State WV Zip Code 25314

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

Name of Employer Spilman Thomas & Battle PLLC Occupation lawyer

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt **02 / 28 / 2014**

Transaction ID : **SA11Ai-CN41193**

Amount of Each Receipt this Period **250**

**JSUBTOTAL** of Receipts This Page (optional) ..... **1350.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Emily Battle**

Mailing Address 1605 Wilshire Pl

City Charleston State WV Zip Code 25314

FEC ID number of contributing federal political committee.  C

Name of Employer KVGI Associates Occupation Physician

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 250

Date of Receipt  
 MM / DD / YYYY  
 02 / 28 / 2014

Transaction ID : SA11AI-CN41243

Amount of Each Receipt this Period  
 250

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Edward A Bell**

Mailing Address 1713 Sassafrass Road

City West Columbia State WV Zip Code 25287

FEC ID number of contributing federal political committee.  C

Name of Employer A B Contractn Inc. Occupation Owner

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 2600

Date of Receipt  
 MM / DD / YYYY  
 03 / 10 / 2014

Transaction ID : SA11AI-CN40029

Amount of Each Receipt this Period  
 2600

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Melodi Bell**

Mailing Address 1713 Sassafras Rd

City West Columbia State WV Zip Code 25287

FEC ID number of contributing federal political committee.  C

Name of Employer Ab Contracting Occupation Secretary

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 2500

Date of Receipt  
 MM / DD / YYYY  
 03 / 21 / 2014

Transaction ID : SA11AI-CN41312

Amount of Each Receipt this Period  
 2500

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

5350.00

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

149 20182549

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Cleveland Benedict**

Mailing Address **HC 37 Box 155**

City **Lewisburg** State **WV** Zip Code **24901**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **3500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 28 / 2014**

Transaction ID : **SA11AI-CN41232**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Jeffrey L Berenson**

Mailing Address **888 Park Ave # 12A**

City **New York** State **NY** Zip Code **10075**

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

Name of Employer **Berenson & Co** Occupation **CEO**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40757**

Amount of Each Receipt this Period  
**2600**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Pat S Bibbee**

Mailing Address **1572 Hampton Rd**

City **Charleston** State **WV** Zip Code **25314**

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

Name of Employer **Pat Bibbee Designs** Occupation **Interior Decorator**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 10 / 2014**

Transaction ID : **SA11AI-CN39994**

Amount of Each Receipt this Period  
**250**

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

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

**3350.00**

14329182541

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Peter M Billey**

Mailing Address **760 Pellis Rd**  
**PO Box 638**

City **Greensburg** State **PA** Zip Code **15601**

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

Name of Employer **Right-of-Way Clearing** Occupation **President/Owner**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40657**

Amount of Each Receipt this Period  
**2600**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Christopher J Bise**

Mailing Address **234 Wayland St**

City **Morgantown** State **WV** Zip Code **26505**

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

Name of Employer **WV University** Occupation **Professor**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40889**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Mary Ann Black**

Mailing Address **216 Birchwood Ave**

City **Traverse City** State **MI** Zip Code **49686**

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

Name of Employer **Neahtawanta Inn** Occupation **Owner**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40610**

Amount of Each Receipt this Period  
**1000**

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

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

**4100.00**

14329192542



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Mary Ann Black**

Mailing Address **216 Birchwood Ave**

City **Traverse City** State **MI** Zip Code **49686**

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

Name of Employer **Nehtawanta Inn** Occupation **Owner**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40611**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Benjamin H Blackwell**

Mailing Address **269 Pinch Rd S**

City **Elkview** State **WV** Zip Code **25071**

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

Name of Employer **retired** Occupation **retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 14 / 2014**

Transaction ID : **SA11AI-CN39810**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Thomas M Bloch II**

Mailing Address **22 Norwood Rd**

City **Charleston** State **WV** Zip Code **25314-1327**

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

Name of Employer **Self Employed** Occupation **Businessman**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 10 / 2014**

Transaction ID : **SA11AI-CN39990**

Amount of Each Receipt this Period  
**500**

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

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

**1600.00**

1020182543



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

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

FOR LINE NUMBER: PAGE 23 OF 442

(check only one)

11a     11b     11c     11d  
 12     13a     13b     14     15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Boswell**

Mailing Address **320 High St**

City **Denver** State **CO** Zip Code **80218**

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

Name of Employer **Laramie Energy II LLC** Occupation **CEO**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt **02 / 15 / 2014**

Transaction ID : **SA11Ai-CN39532**

Amount of Each Receipt this Period **2600**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Joseph W. Boutaugh**

Mailing Address **4 Poplar Ave Apt 1**

City **Wheeling** State **WV** Zip Code **26003**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt **02 / 14 / 2014**

Transaction ID : **SA11Ai-CN39727**

Amount of Each Receipt this Period **100**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Joseph W. Boutaugh**

Mailing Address **4 Poplar Ave Apt 1**

City **Wheeling** State **WV** Zip Code **26003**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **650**

Date of Receipt **03 / 31 / 2014**

Transaction ID : **SA11Ai-CN40550**

Amount of Each Receipt this Period **150**

**SUBTOTAL** of Receipts This Page (optional)..... **2850.00**

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

201302545

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a

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)  
**Capito For West Virginia**

**A.**

Full Name (Last, First, Middle Initial)  
**Mr. Jerry A Bovenizer**

Mailing Address 1015 Dogwood Lane

City State Zip Code  
Bluefield WV 24701

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

Name of Employer Occupation  
Goody Kurntz Drug Store Pharmacist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250

Date of Receipt  
MM / DD / YYYY  
03 / 18 / 2014

Transaction ID : SA11Ai-CN40080

Amount of Each Receipt this Period  
250

**B.**

Full Name (Last, First, Middle Initial)  
**Mr. Jerry A Bovenizer**

Mailing Address 1015 Dogwood Lane

City State Zip Code  
Bluefield WV 24701

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

Name of Employer Occupation  
Goody Kurntz Drug Store Pharmacist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
450

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : SA11Ai-CN40913

Amount of Each Receipt this Period  
200

**C.**

Full Name (Last, First, Middle Initial)  
**Mr. R E Bowlby**

Mailing Address 950 Parkersburg Rd

City State Zip Code  
Spencer WV 25276

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

Name of Employer Occupation  
First Neighborhood Bank Director

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
800

Date of Receipt  
MM / DD / YYYY  
03 / 17 / 2014

Transaction ID : SA11Ai-CN40049

Amount of Each Receipt this Period  
400

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

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

850.00

14820182546

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 442
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Lana Bowman**

Mailing Address 2195 Elk River Rd

City Gassaway State WV Zip Code 26624

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

Name of Employer: **Kenton Meadows Co.** Occupation: **Controller**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **1150**

Date of Receipt: **01 / 27 / 2014**

Transaction ID : **SA11Ai-CN39360**

Amount of Each Receipt this Period: **800**

**B.** Full Name (Last, First, Middle Initial)  
**Mr Thomas R Bradley**

Mailing Address 55 Acorn Cir

City Harpers Ferry State WV Zip Code 25425-5496

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

Name of Employer: **retired** Occupation: **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **280**

Date of Receipt: **02 / 13 / 2014**

Transaction ID : **SA11Ai-CN39568**

Amount of Each Receipt this Period: **120**

**C.** Full Name (Last, First, Middle Initial)  
**Mr Thomas R Bradley**

Mailing Address 55 Acorn Cir

City Harpers Ferry State WV Zip Code 25425-5496

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

Name of Employer: **retired** Occupation: **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **430**

Date of Receipt: **03 / 18 / 2014**

Transaction ID : **SA11Ai-CN40092**

Amount of Each Receipt this Period: **150**

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

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

**1070.00**

10192547

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

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

FOR LINE NUMBER: PAGE 26 OF 442

(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**Mr. David M Brannan**

Mailing Address 86 Hidden Valley Cir

City

Shepherdstown

State

WV

Zip Code

25443

FEC ID number of contributing federal political committee.

C [ ]

Name of Employer

United Airlines

Occupation

Pilot

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

[ ] 250 [ ]

Date of Receipt

M M M / D D D / Y Y Y Y Y Y Y Y  
03 / 31 / 2014

Transaction ID : SA11Ai-CN40904

Amount of Each Receipt this Period

[ ] 250 [ ]

Full Name (Last, First, Middle Initial)

**Mrs. Jane Kremer Bray**

Mailing Address 3101 Garland Dr

City

Portsmouth

State

VA

Zip Code

23703

FEC ID number of contributing federal political committee.

C [ ]

Name of Employer

Homemaker

Occupation

Homemaker

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

[ ] 250 [ ]

Date of Receipt

M M M / D D D / Y Y Y Y Y Y Y Y  
02 / 14 / 2014

Transaction ID : SA11Ai-CN39805

Amount of Each Receipt this Period

[ ] 100 [ ]

Full Name (Last, First, Middle Initial)

**Mr. Robert Bray**

Mailing Address 3101 Garland Dr

City

Portsmouth

State

VA

Zip Code

23703

FEC ID number of contributing federal political committee.

C [ ]

Name of Employer

Retired

Occupation

Retired

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

[ ] 200 [ ]

Date of Receipt

M M M / D D D / Y Y Y Y Y Y Y Y  
03 / 31 / 2014

Transaction ID : SA11Ai-CN40782

Amount of Each Receipt this Period

[ ] 100 [ ]

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

[ ] 450.00 [ ]

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

[ ] [ ]

14829192549

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 27 OF 442	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Susan Brewer**

Mailing Address **25 Cedarwood Dr**

City **Morgantown** State **WV** Zip Code **26505**

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

Name of Employer **Steptoe & Johnson** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40629**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Maria Molina Bronosky**

Mailing Address **170 Woodland Dr**

City **Huntington** State **WV** Zip Code **25705**

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

Name of Employer **Glaxosmithline** Occupation **Pharma Sales Rep**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **225**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 25 / 2014**

Transaction ID : **SA11AI-CN39881**

Amount of Each Receipt this Period  
**25**

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Lynn Brookshire**

Mailing Address **1934 Olympus Rd**

City **Charleston** State **WV** Zip Code **25314-2284**

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

Name of Employer **CAMC** Occupation **Executive**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 18 / 2014**

Transaction ID : **SA11AI-CN40153**

Amount of Each Receipt this Period  
**100**

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

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

**1125.00**

109192549

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Ike Brown**

Mailing Address **5430 Palomar Ln**

City **Dallas** State **TX** Zip Code **75229**

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

Name of Employer **NFI Industries** Occupation **Vice Chairman/President**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**02 / 13 / 2014**

Transaction ID : **SA11Ai-CN39437**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Jerry R Brown**

Mailing Address **PO Box 196**

City **Middlebourne** State **WV** Zip Code **26149**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**03 / 22 / 2014**

Transaction ID : **SA11Ai-CN40436**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Michael J Brown**

Mailing Address **3117 S Indian Creek River Drive**

City **Fort Pierce** State **FL** Zip Code **34982**

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

Name of Employer **Harbor Community Bank** Occupation **CEO**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**02 / 28 / 2014**

Transaction ID : **SA11Ai-CN39832**

Amount of Each Receipt this Period  
**500**

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

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

**1100.00**

110320192550



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Miriam R. Brubaker**

Mailing Address PO Box 30

City State Zip Code  
Circleville WV 26804-0030

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

Name of Employer Occupation  
Retired retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**400**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 14 / 2014**

Transaction ID : **SA11Ai-CN39783**

Amount of Each Receipt this Period  
**200**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. John Brumley**

Mailing Address PO Box 1991

City State Zip Code  
Huntington WV 25720

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

Name of Employer Occupation  
Nat'l Assoc. Of Home Builders Contractor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11Ai-CN40638**

Amount of Each Receipt this Period  
**300**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. James D Bruning**

Mailing Address 52 Megans Ter

City State Zip Code  
Berkeley Springs WV 25411

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

Name of Employer Occupation  
Self Employed IT Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**200**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 25 / 2014**

Transaction ID : **SA11Ai-CN39849**

Amount of Each Receipt this Period  
**100**

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

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

**600.00**

11  
12  
13  
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16  
17  
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20  
21  
22  
23  
24

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 30 OF 442
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Toby J Buel Sr**

Mailing Address **5321 Glow Dr**

City **Cross Lanes** State **WV** Zip Code **25313**

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

Name of Employer **Self Employed** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **550**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 10 / 2014**

Transaction ID : **SA11Ai-CN40023**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. David Bungard**

Mailing Address **188 Ridgemont Dr**

City **Elkview** State **WV** Zip Code **25071**

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

Name of Employer **US Govt** Occupation **Public Defender**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 10 / 2014**

Transaction ID : **SA11Ai-CN39995**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Helen L Burch**

Mailing Address **PO Box 627**

City **Charles Town** State **WV** Zip Code **25414**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 19 / 2014**

Transaction ID : **SA11Ai-CN40193**

Amount of Each Receipt this Period  
**25**

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

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

**375.00**

149029192552

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 31 OF 442
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Jonathan Burkan**

Mailing Address **49 N 8th St**

City **Brooklyn** State **NY** Zip Code **11249**

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

Name of Employer **UBS Financial Services** Occupation **Finance**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**01 / 28 / 2014**

Transaction ID : **SA11AI-CN41030**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Judy G Burke**

Mailing Address **PO Box 833**

City **Moundsville** State **WV** Zip Code **26041-0833**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**01 / 27 / 2014**

Transaction ID : **SA11AI-CN39359**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Beulah M Bush**

Mailing Address **55 Heartwood Cir**

City **Martinsburg** State **WV** Zip Code **25401-1146**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 13 / 2014**

Transaction ID : **SA11AI-CN39624**

Amount of Each Receipt this Period  
**100**

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

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

**450.00**

14029192553

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 32 OF 442
	(check only one)	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Robert J Busse**

Mailing Address 1990 Olympus Rd

City Charleston State WV Zip Code 25314

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

Name of Employer Jackson Kelly PLLC Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 13 / 2014**

Transaction ID : SA11Ai-CN39586

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Robert Butcher**

Mailing Address 41 Mustang Acres

City Parkersburg State WV Zip Code 26104

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 17 / 2014**

Transaction ID : SA11Ai-CN40048

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Carl Byrge**

Mailing Address 164 Beech Fork Church Rd

City Caryville State TN Zip Code 37714

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

Name of Employer Requested Occupation Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **240**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : SA11Ai-CN40776

Amount of Each Receipt this Period  
**60**

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

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

**260.00**

14929192554

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 442				
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.**

Full Name (Last, First, Middle Initial)  
**Nicholas Calio**

Mailing Address **1101 Pennsylvania Ave NW  
Ste 1000**

City **Washington** State **DC** Zip Code **20004**

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

Name of Employer **Airlines For America** Occupation **President & CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN41257**

Amount of Each Receipt this Period  
**1000**

**B.**

Full Name (Last, First, Middle Initial)  
**Ms. Nada S Camp**

Mailing Address **810 John Beggs Rd**

City **Spencer** State **WV** Zip Code **25276**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40990**

Amount of Each Receipt this Period  
**50**

**C.**

Full Name (Last, First, Middle Initial)  
**Mr. Michael G Campbell**

Mailing Address **12029 Intracoastal Ter SE**

City **Jupiter** State **FL** Zip Code **33469-1718**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1250**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 14 / 2014**

Transaction ID : **SA11AI-CN39803**

Amount of Each Receipt this Period  
**750**

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

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

**1800.00**

1103103

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 34 OF 442	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Pamela Ryan Campe**

Mailing Address **2 Jasmine Ln**

City **Charleston** State **WV** Zip Code **25314**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
M / M / Y  
**03 / 07 / 2014**

Transaction ID : **SA11AI-CN39911**

Amount of Each Receipt this Period  
**200**

**B.** Full Name (Last, First, Middle Initial)  
**Eddie Canterbury**

Mailing Address **PO Box 622**

City **Logan** State **WV** Zip Code **25601**

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

Name of Employer **Logan Bank & Trust** Occupation **Banker**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
M / M / Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40748**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Curtis R Capehart**

Mailing Address **244 hyde Park Road**

City **Winfield** State **WV** Zip Code **25213**

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

Name of Employer **Dinsmore & Shohl LLP** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
M / M / Y  
**03 / 10 / 2014**

Transaction ID : **SA11AI-CN40028**

Amount of Each Receipt this Period  
**250**

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

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

**550.00**

14029192559

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 35 OF 442	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. C. Howard Capito**

Mailing Address **740 Kenesaw Ave**

City **Knoxville** State **TN** Zip Code **37919**

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

Name of Employer **Shenandoah Northern Co.** Occupation **Executive**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1750**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11Ai-CN40789**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Katherine Capito**

Mailing Address **510 Linden Road**

City **Charleston** State **WV** Zip Code **25314**

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

Name of Employer **Dinsmore Sholh Law** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 18 / 2014**

Transaction ID : **SA11Ai-CN40118**

Amount of Each Receipt this Period  
**200**

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Marshall J Carper MD**

Mailing Address **PO Box 4626**

City **Charleston** State **WV** Zip Code **25364-4626**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 19 / 2014**

Transaction ID : **SA11Ai-CN40178**

Amount of Each Receipt this Period  
**50**

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

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

**500.00**

2010102557

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Wilson Carraway**

Mailing Address 3320 Thomasville Rd

City State Zip Code  
Tallahassee FL 32308

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

Name of Employer Occupation  
Farmers & Merchants Bank Banker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2014

Transaction ID : SA11Ai-CN39536

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**Russell Carson**

Mailing Address 930 Fifth Ave

City State Zip Code  
New York NY 10021

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

Name of Employer Occupation  
Welsh Carson Private Equity

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : SA11Ai-CN41344

Amount of Each Receipt this Period  
2600

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Marcy Carte**

Mailing Address 1319 Bridge Road

City State Zip Code  
Charleston WV 25314

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

Name of Employer Occupation  
None Housewife

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
400

Date of Receipt  
MM / DD / YYYY  
02 / 14 / 2014

Transaction ID : SA11Ai-CN39784

Amount of Each Receipt this Period  
400

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

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

4000.00

20130225



**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:  
(check only one)

11a  
 12
  11b  
 13a
  11c  
 13b
  11d  
 14
  15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**Mr. Steve Conrad**

Mailing Address 1104 Conrad Rd

City

Brandywine

State

WV

Zip Code

26802

FEC ID number of contributing federal political committee.

C

Name of Employer self-employed

Occupation  
Farmer

Receipt For: 2014

Primary
  General  
 Other (specify)

Election Cycle-to-Date

2000

Date of Receipt

M M M / D D D / Y Y Y Y Y Y Y Y  
 03 / 19 / 2014

Transaction ID : SA11Ai-CN40201

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

**Mr. Manus Cooney**

Mailing Address 8801 Bel Air Place

City

Potomac

State

MD

Zip Code

20854

FEC ID number of contributing federal political committee.

C

Name of Employer

American Continental Group

Occupation

Partner

Receipt For: 2014

Primary
  General  
 Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M / D D D / Y Y Y Y Y Y Y Y  
 03 / 12 / 2014

Transaction ID : SA11AI-CN41302

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

**Mr. Manus Cooney**

Mailing Address 8801 Bel Air Place

City

Potomac

State

MD

Zip Code

20854

FEC ID number of contributing federal political committee.

C

Name of Employer

American Continental Group

Occupation

Partner

Receipt For: 2014

Primary
  General  
 Other (specify)

Election Cycle-to-Date

2000

Date of Receipt

M M M / D D D / Y Y Y Y Y Y Y Y  
 03 / 31 / 2014

Transaction ID : SA11Ai-CN41274

Amount of Each Receipt this Period

1000

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

3000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 442		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Mark Carter**

Mailing Address 1091 Green Meadow Rd

City Charleston State WV Zip Code 25314

FEC ID number of contributing federal political committee.  C

Name of Employer Dinsmore & Shohl LLP Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1250

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 10 / 2014

Transaction ID : SA11Ai-CN40015

Amount of Each Receipt this Period  
 250

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Joseph Casabona**

Mailing Address 1940 Chenango Ct E

City Englewood State CO Zip Code 80113

FEC ID number of contributing federal political committee.  C

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2600

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 06 / 2014

Transaction ID : SA11Ai-CN39402

Amount of Each Receipt this Period  
 2600

**C.** Full Name (Last, First, Middle Initial)  
**Mr. James W Casey**

Mailing Address 347 Old Shennandale Rd

City Charles Town State WV Zip Code 25414

FEC ID number of contributing federal political committee.  C

Name of Employer Self Employed Occupation Horse Breeder

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 500

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 13 / 2014

Transaction ID : SA11Ai-CN39622

Amount of Each Receipt this Period  
 250

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

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

3100.00

1309192590

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. James W Caudill**

Mailing Address **18 Foxchase Rd**

City **Charleston** State **WV** Zip Code **25304**

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

Name of Employer **WV Eye Consultants** Occupation **Physician**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40745**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Dr. James J Caveney**

Mailing Address **10 Woods Dr..**

City **Wheeling** State **WV** Zip Code **26003**

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

Name of Employer **self-employed** Occupation **Dentist**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40542**

Amount of Each Receipt this Period  
**200**

**C.** Full Name (Last, First, Middle Initial)  
**Dr. R M Caveney**

Mailing Address **305 Boone Hedges Rd**

City **Wheeling** State **WV** Zip Code **26003-7731**

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

Name of Employer **OVMC** Occupation **Doctor**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40549**

Amount of Each Receipt this Period  
**200**

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

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

**900.00**

14329192591

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 39 OF 442
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Jayne Chambers**

Mailing Address 1256 Kensington Rd

City Mclean State VA Zip Code 22101

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

Name of Employer Federation of American Hospitals Occupation Association Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN41162**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Richard Chaty**

Mailing Address 3690 Chestnut Rd

City Charleston State WV Zip Code 25309

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

Name of Employer Self Occupation Pilot

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**01 / 21 / 2014**

Transaction ID : **SA11AI-CN40991**

Amount of Each Receipt this Period  
**2600**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Faris Chesley**

Mailing Address 84 Woodley Road

City Winnetka State IL Zip Code 60093

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

Name of Employer Chesley Taft & Associate LLC Occupation Financial Advisor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 14 / 2014**

Transaction ID : **SA11AI-CN39704**

Amount of Each Receipt this Period  
**2600**

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

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

**6200.00**

14920192562

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 40 OF 442				
	(check only one)	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
		<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Peggy Chesser-Sjoberg**

Mailing Address **PO Box 987**

City **Philippi** State **WV** Zip Code **25415**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 07 / 2014**

Transaction ID : **SA11AI-CN39958**

Amount of Each Receipt this Period  
**50**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Robert Cheves Jr**

Mailing Address **7433 Delray Rd**

City **Delray** State **WV** Zip Code **26714**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40580**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Sue Cheves**

Mailing Address **7433 Delray Rd**

City **Delray** State **WV** Zip Code **26714**

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

Name of Employer **self-employed** Occupation **Farmer**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11Ai-CN40579**

Amount of Each Receipt this Period  
**100**

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

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

**250.00**

10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Paul L Christafore**

Mailing Address 1774 Shinnston Pike

City Clarksburg      State WV      Zip Code 26301

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

Name of Employer Sandy's Hardwar And Home Center      Occupation Vice President

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 13 / 2014**

Transaction ID : **SA11AI-CN39663**

Amount of Each Receipt this Period  
**150**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Daniel Cicero**

Mailing Address 1126 Steeplechase Dr

City Morgantown      State WV      Zip Code 26508

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

Name of Employer Retired US Dept Of Energy      Occupation Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 22 / 2014**

Transaction ID : **SA11AI-CN40368**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. J Peter Clements**

Mailing Address PO Box 57

City Carson      State VA      Zip Code 23830

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

Name of Employer The Bank Of Southside VA      Occupation Community Banker

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 14 / 2014**

Transaction ID : **SA11AI-CN39763**

Amount of Each Receipt this Period  
**500**

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

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

**1150.00**

14929192594

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Hugh Clonch**

Mailing Address **PO Box 93**

City **Dixie** State **WV** Zip Code **25059**

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

Name of Employer **Clonch Industries Inc.** Occupation **Executive**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40581**

Amount of Each Receipt this Period  
**600**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Hugh Clonch**

Mailing Address **PO Box 93**

City **Dixie** State **WV** Zip Code **25059**

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

Name of Employer **Clonch Industries Inc.** Occupation **Executive**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40582**

Amount of Each Receipt this Period  
**1400**

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Mary P Clubb**

Mailing Address **11 Brittany Woods**

City **Charleston** State **WV** Zip Code **25314**

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

Name of Employer **Housewife** Occupation **Housewife**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 22 / 2014**

Transaction ID : **SA11AI-CN40395**

Amount of Each Receipt this Period  
**100**

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

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

**2100.00**

149 20192695

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Cherie B. Cole**

Mailing Address **Hc 65 Box 168**

City **Forest Hill** State **WV** Zip Code **24935-9262**

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

Name of Employer **Cole Nurseries** Occupation **Owner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 19 / 2014**

Transaction ID : **SA11AI-CN40170**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Christophe Colenda**

Mailing Address **400 St Andrews Dr**

City **Morgantown** State **WV** Zip Code **26508**

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

Name of Employer **WVU Hospitals** Occupation **Executive**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40626**

Amount of Each Receipt this Period  
**750**

**C.** Full Name (Last, First, Middle Initial)  
**James Comerci**

Mailing Address **1516 Atlas Rd**

City **Wheeling** State **WV** Zip Code **26003**

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

Name of Employer **FMA-Inc.** Occupation **Physician**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 13 / 2014**

Transaction ID : **SA11AI-CN39647**

Amount of Each Receipt this Period  
**250**

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

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

**1100.00**

110320182566



**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Lynn P Comerci**

Mailing Address **1516 Atlas Rd**

City **Wheeling** State **WV** Zip Code **26003**

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

Name of Employer **James L Comerci** Occupation **Office Manager**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 19 / 2014**

Transaction ID : **SA11AI-CN40258**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Edward Conard**

Mailing Address **1202 Lexington Ave**  
**Box 106**

City **New York** State **NY** Zip Code **10028**

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

Name of Employer **Self** Occupation **Consultant**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40758**

Amount of Each Receipt this Period  
**2600**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. William F Connelly Jr**

Mailing Address **921 Providence Pl**

City **Lexington** State **VA** Zip Code **24450**

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

Name of Employer **Washington & Lee University** Occupation **Politics Professor**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **450**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40704**

Amount of Each Receipt this Period  
**200**

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

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

**3050.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 49 OF 442
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Christopher Cox**

Mailing Address **2205 Windsor Rd**

City **Alexandria** State **VA** Zip Code **22307**

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

Name of Employer **Navigators Global** Occupation **Principal**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 13 / 2014**

Transaction ID : **SA11AI-CN39456**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Kevin Crain**

Mailing Address **460 42nd St W  
Apt 57J**

City **New York** State **NY** Zip Code **10036**

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

Name of Employer **Bank of America** Occupation **Managing Director**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 20 / 2014**

Transaction ID : **SA11AI-CN40036**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr Alfred R. Cramer**

Mailing Address **27 Charleston Way**

City **Fairmont** State **WV** Zip Code **26554**

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

Name of Employer **retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **205**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 13 / 2014**

Transaction ID : **SA11AI-CN39503**

Amount of Each Receipt this Period  
**50**

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

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

**1550.00**

110320192503

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Lakin C Cummings**

Mailing Address **870 Stover Fork**

City **Spencer** State **WV** Zip Code **25276**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **225**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**02 / 13 / 2014**

Transaction ID : **SA11Ai-CN39613**

Amount of Each Receipt this Period  
**50**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Lakin C Cummings**

Mailing Address **870 Stover Fork**

City **Spencer** State **WV** Zip Code **25276**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **265**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**03 / 18 / 2014**

Transaction ID : **SA11Ai-CN40121**

Amount of Each Receipt this Period  
**40**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Tim Cunningham**

Mailing Address **1011 Shawnee Trail**

City **Elkview** State **WV** Zip Code **25071**

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

Name of Employer **Cunningham Electrical Services** Occupation **Owner**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11Ai-CN40537**

Amount of Each Receipt this Period  
**200**

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

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

**290.00**

20130219

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 51 OF 442
	(check only one)	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Robert B. Cross**

Mailing Address **99 Cross Ln**

City **Moorefield** State **WV** Zip Code **26836-8355**

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

Name of Employer **Retired** Occupation **US Navy Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 07 / 2014**

Transaction ID : **SA11AI-CN39941**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Glenn Crotty Jr**

Mailing Address **36 Coventry Rd E**

City **South Charleston** State **WV** Zip Code **25309**

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

Name of Employer **CAMC** Occupation **COO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 27 / 2014**

Transaction ID : **SA11AI-CN41173**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Tom Crouser**

Mailing Address **235 Dutch Rd**

City **Charleston** State **WV** Zip Code **25302**

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

Name of Employer **Crouser & Associates** Occupation **Business Consultant**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN41205**

Amount of Each Receipt this Period  
**250**

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

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

**850.00**

149 29192579

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Dominic Cottrell**

Mailing Address 187 Tierra Rd

City: Wheeling    State: WV    Zip Code: 26003

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

Name of Employer: Medical Park Anesthesiologists    Occupation: Physician

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date: **750**

Date of Receipt: 03 / 07 / 2014

Transaction ID : SA11AI-CN39908

Amount of Each Receipt this Period: **250**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. George G Couch**

Mailing Address 36 Floral Dr

City: Wheeling    State: WV    Zip Code: 26003

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

Name of Employer: Wheeling Hospital    Occupation: Vice President

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date: **1250**

Date of Receipt: 03 / 31 / 2014

Transaction ID : SA11AI-CN40560

Amount of Each Receipt this Period: **250**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Miller Couse**

Mailing Address 227 E Cresent Drive

City: Clewiston    State: FL    Zip Code: 33440

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

Name of Employer: First Bank    Occupation: Banker

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date: **1000**

Date of Receipt: 02 / 28 / 2014

Transaction ID : SA11AI-CN39834

Amount of Each Receipt this Period: **1000**

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

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

**1500.00**

10192571

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 50 OF 442	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr Alfred R. Cramer**

Mailing Address **27 Charleston Way**

City **Fairmont** State **WV** Zip Code **26554**

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

Name of Employer **retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **255**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 19 / 2014**

Transaction ID : **SA11AI-CN40261**

Amount of Each Receipt this Period  
**50**

**B.** Full Name (Last, First, Middle Initial)  
**Rick Creehan**

Mailing Address **1 Greystone Dr**

City **Philippi** State **WV** Zip Code **26416**

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

Name of Employer **Anderson Broaddus** Occupation **President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 07 / 2014**

Transaction ID : **SA11AI-CN39910**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Robert B. Cross**

Mailing Address **99 Cross Ln**

City **Moorefield** State **WV** Zip Code **26836-8355**

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

Name of Employer **Retired** Occupation **US Navy Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 13 / 2014**

Transaction ID : **SA11AI-CN39656**

Amount of Each Receipt this Period  
**100**

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

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

**400.00**

14920182572

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Jeanette Corey**

Mailing Address **2 Portview Dr**

City **Charleston** State **WV** Zip Code **25311**

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

Name of Employer **Corey Development Corporation** Occupation **President/Owner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 10 / 2014**

Transaction ID : **SA11Ai-CN40001**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Gregory H. Corliss**

Mailing Address **948 Daniel Rd**

City **Shenandoah Junction** State **WV** Zip Code **25442**

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

Name of Employer **Retired** Occupation **retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 13 / 2014**

Transaction ID : **SA11Ai-CN39495**

Amount of Each Receipt this Period  
**25**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Gregory H. Corliss**

Mailing Address **948 Daniel Rd**

City **Shenandoah Junction** State **WV** Zip Code **25442**

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

Name of Employer **Retired** Occupation **retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **325**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11Ai-CN40858**

Amount of Each Receipt this Period  
**25**

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

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

**150.00**

148 20182573

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 55 OF 442
	(check only one)	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. William M Davis**

Mailing Address **145 Abney Cir**

City **Charleston** State **WV** Zip Code **25314**

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

Name of Employer **Retired** Occupation **retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 14 / 2014**

Transaction ID : **SA11Ai-CN39715**

Amount of Each Receipt this Period  
**2600**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Russell L. Davisson**

Mailing Address **1108 Oakbridge Dr**

City **Hurricane** State **WV** Zip Code **25526**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 20 / 2014**

Transaction ID : **SA11Ai-CN40037**

Amount of Each Receipt this Period  
**200**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Joseph M Dawley**

Mailing Address **19 Canterbury Rd**

City **Pittsburgh** State **PA** Zip Code **15202**

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

Name of Employer **EQT** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11Ai-CN40617**

Amount of Each Receipt this Period  
**500**

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

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

**3300.00**

14020182574



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 57 OF 442
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Oliver E Deming IV**

Mailing Address **7314 Lamar Dr**

City **Springfield** State **VA** Zip Code **22150**

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

Name of Employer **Self Employed** Occupation **Lobbyist**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
**02 / 13 / 2014**

Transaction ID : **SA11AI-CN39561**

Amount of Each Receipt this Period  
**50**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Anthony Deusenbery**

Mailing Address **8720 Eelpot Road**

City **Naples** State **NY** Zip Code **14512**

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

Name of Employer **Otis Eastern Services LLC** Occupation **Vice President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40659**

Amount of Each Receipt this Period  
**2600**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Sharon C DeWitt**

Mailing Address **457 Lakeview Dr**

City **Morgantown** State **WV** Zip Code **26508**

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

Name of Employer **Mon. County Board Of Education** Occupation **Educator**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1800**

Date of Receipt  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40621**

Amount of Each Receipt this Period  
**1300**

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

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

**3950.00**

1103032575

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 53 OF 442
	(check only one)	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Anna Dailey**

Mailing Address 140 Sunset Dr

City Charleston State WV Zip Code 25301

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

Name of Employer Dinsmore & Shohl LLP Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt  
MM / DD / YYYY  
**03 / 10 / 2014**

Transaction ID : **SA11AI-CN40026**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Dr. C. Richard Daniel**

Mailing Address 216 Granville Ave

City Beckley State WV Zip Code 25801-6005

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

Name of Employer Self-employed Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
MM / DD / YYYY  
**03 / 19 / 2014**

Transaction ID : **SA11AI-CN40254**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Greg Darby**

Mailing Address PO Box 968

City Beckley State WV Zip Code 25802

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

Name of Employer Little General Store Inc. Occupation President & CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
MM / DD / YYYY  
**02 / 25 / 2014**

Transaction ID : **SA11AI-CN39884**

Amount of Each Receipt this Period  
**1000**

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

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

**1600.00**

402019102476

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 54 OF 442	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Dessie P Daugherty**

Mailing Address **114 Lincoln Ave**

City **West Union** State **WV** Zip Code **26456**

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

Name of Employer **retired** Occupation **retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **270**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**03 / 19 / 2014**

Transaction ID : **SA11Ai-CN40235**

Amount of Each Receipt this Period  
**50**

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Dessie P Daugherty**

Mailing Address **114 Lincoln Ave**

City **West Union** State **WV** Zip Code **26456**

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

Name of Employer **retired** Occupation **retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **320**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11Ai-CN40882**

Amount of Each Receipt this Period  
**50**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Harold Davis**

Mailing Address **PO Box 457**

City **Lenore** State **WV** Zip Code **25676**

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

Name of Employer **Harold B. Davis CPA** Occupation **Business Owner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **495**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11Ai-CN40969**

Amount of Each Receipt this Period  
**100**

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

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

**200.00**

14929192577

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Lorinda P De Roulet**

Mailing Address **Post Office Box 777**

City **Manhasset** State **NY** Zip Code **11030-0777**

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

Name of Employer **self-employed** Occupation **Executive**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 13 / 2014**

Transaction ID : **SA11AI-CN39481**

Amount of Each Receipt this Period  
**300**

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Lorinda P De Roulet**

Mailing Address **Post Office Box 777**

City **Manhasset** State **NY** Zip Code **11030-0777**

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

Name of Employer **self-employed** Occupation **Executive**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 22 / 2014**

Transaction ID : **SA11AI-CN40369**

Amount of Each Receipt this Period  
**200**

**C.** Full Name (Last, First, Middle Initial)  
**Arthur Dehon**

Mailing Address **112 Sandy Ln**

City **Brevard** State **NC** Zip Code **28712**

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

Name of Employer **Self** Occupation **Real Estate**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 13 / 2014**

Transaction ID : **SA11AI-CN41307**

Amount of Each Receipt this Period  
**250**

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

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

**750.00**

11030182579

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11d <input type="checkbox"/> 14	<input type="checkbox"/> 15

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)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Marilyn E Coors**

Mailing Address 15205 32nd Ave W

City Golden State CO Zip Code 80401

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

Name of Employer University Of Colorado Occupation Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
-2600

Date of Receipt  
MM / DD / YYYY  
02 / 06 / 2014

Transaction ID : SA11AI-CN39405

Amount of Each Receipt this Period  
-2600  
Redesignated to General 2014

**[MEMO ITEM]**  
Redesignated

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Marilyn E Coors**

Mailing Address 15205 32nd Ave W

City Golden State CO Zip Code 80401

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

Name of Employer University Of Colorado Occupation Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
MM / DD / YYYY  
02 / 06 / 2014

Transaction ID : SA11AI-CN39406

Amount of Each Receipt this Period  
2600  
Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Marilyn E Coors**

Mailing Address 15205 32nd Ave W

City Golden State CO Zip Code 80401

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

Name of Employer University Of Colorado Occupation Professor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200

Date of Receipt  
MM / DD / YYYY  
02 / 06 / 2014

Transaction ID : SA11AI-CN39401

Amount of Each Receipt this Period  
5200

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

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

5200.00

03  
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**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 58 OF 442

(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**Mr. Thomas J DeWitt**

Mailing Address 3146 Dahlia Way

City	State	Zip Code
Naples	FL	34105-3046

FEC ID number of contributing federal political committee.

C

Name of Employer  
Swanson Industries Inc.

Occupation  
President

Receipt For: 2014

Election Cycle-to-Date

Primary  General  
 Other (specify)

4800

Date of Receipt

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : SA11AI-CN40622

Amount of Each Receipt this Period

1300

Full Name (Last, First, Middle Initial)

**Guillermo Diaz Rousselot**

Mailing Address 1801 1st St SW

City	State	Zip Code
Miami	FL	33135

FEC ID number of contributing federal political committee.

C

Name of Employer  
Continental National Bank

Occupation  
President

Receipt For: 2014

Election Cycle-to-Date

Primary  General  
 Other (specify)

300

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2014

Transaction ID : SA11AI-CN39540

Amount of Each Receipt this Period

300

Full Name (Last, First, Middle Initial)

**Mr. William Dibert**

Mailing Address 34 Clinton Dr

City	State	Zip Code
Triadelphia	WV	26059

FEC ID number of contributing federal political committee.

C

Name of Employer  
Self Employed

Occupation  
Consultant

Receipt For: 2014

Election Cycle-to-Date

Primary  General  
 Other (specify)

200

Date of Receipt

MM / DD / YYYY  
03 / 22 / 2014

Transaction ID : SA11AI-CN40502

Amount of Each Receipt this Period

50

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

1650.00

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs Helen L. Doman**

Mailing Address 5372 Dry Ridge Rd

City Cameron State WV Zip Code 26033-1570

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

Name of Employer Requested Occupation Requested

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **295**

Date of Receipt  
 MM / DD / YYYY  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40986**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**James Donovan**

Mailing Address 1235 Delaplane Grad Rd

City Upperville State VA Zip Code 20184

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

Name of Employer Requested Occupation Requested  
**Goldman Sachs & Co Investment Banker**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 MM / DD / YYYY  
**03 / 20 / 2014**

Transaction ID : **SA11AI-CN40034**

Amount of Each Receipt this Period  
**5200**

**C.** Full Name (Last, First, Middle Initial)  
**James Donovan**

Mailing Address 1235 Delaplane Grad Rd

City Upperville State VA Zip Code 20184

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

Name of Employer Requested Occupation Requested  
**Goldman Sachs & Co Investment Banker**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 MM / DD / YYYY  
**03 / 21 / 2014**

Transaction ID : **SA11AI-CN41325**

Amount of Each Receipt this Period  
**-2600**  
 Redesignated to General 2014

**[MEMO ITEM]**  
Redesignated

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

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

**5300.00**

1103 20182592



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**James Donovan**

Mailing Address 1235 Delaplane Grad Rd

City Upperville State VA Zip Code 20184

FEC ID number of contributing federal political committee.  C

Name of Employer Goldman Sachs & Co Occupation Investment Banker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5200

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2014

Transaction ID : SA11Ai-CN41326

Amount of Each Receipt this Period  
 2600

Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Brian F Doran**

Mailing Address 120 Broadway

City New York State NY Zip Code 10271

FEC ID number of contributing federal political committee.  C

Name of Employer Banco Popular Occupation Region President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2014

Transaction ID : SA11Ai-CN39835

Amount of Each Receipt this Period  
 1000

**C.** Full Name (Last, First, Middle Initial)  
**Mr. William Douglas**

Mailing Address 6123 Deer Run

City Fort Myers State FL Zip Code 33908

FEC ID number of contributing federal political committee.  C

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 500

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014

Transaction ID : SA11Ai-CN41209

Amount of Each Receipt this Period  
 500

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Thomas Douglass**

Mailing Address **3201 Kanawha Avenue SE**

City **Charleston** State **WV** Zip Code **25304**

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

Name of Employer **General Anesthesia Services** Occupation **Physician**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 09 / 2014**

Transaction ID : **SA11AI-CN41287**

Amount of Each Receipt this Period  
**600**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Ralph S. Dover**

Mailing Address **91 Alpine Dr**

City **Bunker Hill** State **WV** Zip Code **25413-3207**

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

Name of Employer **Retired** Occupation **retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 13 / 2014**

Transaction ID : **SA11AI-CN39626**

Amount of Each Receipt this Period  
**200**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Ralph S. Dover**

Mailing Address **91 Alpine Dr**

City **Bunker Hill** State **WV** Zip Code **25413-3207**

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

Name of Employer **Retired** Occupation **retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 17 / 2014**

Transaction ID : **SA11AI-CN40505**

Amount of Each Receipt this Period  
**100**

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

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

**900.00**

14020192594

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 63 OF 442
	(check only one)	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Wesley R Drake**

Mailing Address **PO Box 8236**

City **Clarksburg** State **WV** Zip Code **26301**

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

Name of Employer **JP Morgan Chase & Co** Occupation **Security Manager**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 22 / 2014**

Transaction ID : **SA11Ai-CN40468**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Marion H Drews**

Mailing Address **27 Forest Hills**

City **Wheeling** State **WV** Zip Code **26003**

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

Name of Employer **Nephrology Associates Inc.** Occupation **Advisor**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11Ai-CN40556**

Amount of Each Receipt this Period  
**200**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Shelly Duncan**

Mailing Address **2014 Ices Ferry Dr**

City **Morgantown** State **WV** Zip Code **26508**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11Ai-CN40628**

Amount of Each Receipt this Period  
**200**

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

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

**650.00**

192505

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 64 OF 442
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Sandra J Dunn**

Mailing Address **1 Orchard Hill**

City **Point Pleasant** State **WV** Zip Code **25550**

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

Name of Employer self-employed  
**Real Estate**

Occupation **Real Estate**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11Ai-CN40674**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Kenneth Dwyer**

Mailing Address **14 Brittany Woods Rd**

City **Charleston** State **WV** Zip Code **25314**

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

Name of Employer  
**Montgomery General Hospital**

Occupation **Radiologist**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y Y Y  
**02 / 13 / 2014**

Transaction ID : **SA11Ai-CN39635**

Amount of Each Receipt this Period  
**200**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. David Dyer**

Mailing Address **36 Fieldside Ln**

City **Brandywine** State **WV** Zip Code **26802**

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

Name of Employer Requested  
**Requested**

Occupation Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y Y Y  
**02 / 16 / 2014**

Transaction ID : **SA11Ai-CN39548**

Amount of Each Receipt this Period  
**100**

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

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

**1300.00**

110929192599

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 65 OF 442				
	(check only one)	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
		<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Billy J. Edwards**

Mailing Address **144 Billy Joyce Ln**

City <b>Kearneysville</b>	State <b>WV</b>	Zip Code <b>25430</b>
------------------------------	--------------------	--------------------------

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

Name of Employer <b>retired</b>	Occupation <b>Retired</b>
------------------------------------	------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**350**

Date of Receipt  

MM	DD	YYYY
02	13	2014

Transaction ID : **SA11AI-CN39679**

Amount of Each Receipt this Period  
**50**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Billy J. Edwards**

Mailing Address **144 Billy Joyce Ln**

City <b>Kearneysville</b>	State <b>WV</b>	Zip Code <b>25430</b>
------------------------------	--------------------	--------------------------

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

Name of Employer <b>retired</b>	Occupation <b>Retired</b>
------------------------------------	------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**385**

Date of Receipt  

MM	DD	YYYY
03	31	2014

Transaction ID : **SA11AI-CN40989**

Amount of Each Receipt this Period  
**35**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Paul S Efron**

Mailing Address **10 Pryer Ln**

City <b>Larchmont</b>	State <b>NY</b>	Zip Code <b>10538</b>
--------------------------	--------------------	--------------------------

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

Name of Employer <b>Goldman Sachs</b>	Occupation <b>Partner</b>
--	------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**2600**

Date of Receipt  

MM	DD	YYYY
03	31	2014

Transaction ID : **SA11AI-CN40755**

Amount of Each Receipt this Period  
**2600**

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

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

**2685.00**

7  
1  
0  
9  
2  
1  
0  
7

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 66 OF 442
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Susan Efron**

Mailing Address **10 Pryer Ln**

City **Larchmont** State **NY** Zip Code **10538**

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

Name of Employer **Homemaker** Occupation **Homemaker**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
MM / DD / YYYY  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40756**

Amount of Each Receipt this Period  
**2600**

**B.** Full Name (Last, First, Middle Initial)  
**Judith Eisenberg**

Mailing Address **9 57th St W**  
**Ste 4200**

City **New York** State **NY** Zip Code **10019**

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

Name of Employer **Homemaker** Occupation **Homemaker**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5100**

Date of Receipt  
MM / DD / YYYY  
**03 / 04 / 2014**

Transaction ID : **SA11AI-CN41328**

Amount of Each Receipt this Period  
**5100**

Reattributed from **Lewis Eisenberg**

**[MEMO ITEM]**  
Reattribution

**C.** Full Name (Last, First, Middle Initial)  
**Judith Eisenberg**

Mailing Address **9 57th St W**  
**Ste 4200**

City **New York** State **NY** Zip Code **10019**

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

Name of Employer **Homemaker** Occupation **Homemaker**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
MM / DD / YYYY  
**03 / 05 / 2014**

Transaction ID : **SA11AI-CN41335**

Amount of Each Receipt this Period  
**-2500**

Redesignated to General 2014

**[MEMO ITEM]**  
Redesignated

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

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

**2600.00**

1492918253

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 67 OF 442	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Judith Eisenberg**

Mailing Address **9 57th St W**  
**Ste 4200**

City **New York** State **NY** Zip Code **10019**

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

Name of Employer **Homemaker** Occupation **Homemaker**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5100**

Date of Receipt  
MM / DD / YYYY  
**03 / 05 / 2014**

Transaction ID : **SA11AI-CN41336**

Amount of Each Receipt this Period  
**2500**

Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

**B.** Full Name (Last, First, Middle Initial)  
**Judith Eisenberg**

Mailing Address **9 57th St W**  
**Ste 4200**

City **New York** State **NY** Zip Code **10019**

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

Name of Employer **Homemaker** Occupation **Homemaker**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
MM / DD / YYYY  
**03 / 06 / 2014**

Transaction ID : **SA11AI-CN41332**

Amount of Each Receipt this Period  
**100**

Reattributed from Lewis Eisenberg

**[MEMO ITEM]**  
Reattribution

**C.** Full Name (Last, First, Middle Initial)  
**Lewis Eisenberg**

Mailing Address **9 57th St W**  
**Ste 4200**

City **New York** State **NY** Zip Code **10019**

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

Name of Employer **Kohlberg Kravis Roberts** Occupation **Investments**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **10200**

Date of Receipt  
MM / DD / YYYY  
**03 / 03 / 2014**

Transaction ID : **SA11AI-CN39828**

Amount of Each Receipt this Period  
**10200**

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

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

**10200.00**

1492918253

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 68 OF 442
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Lewis Eisenberg**

Mailing Address **9 57th St W**  
**Ste 4200**

City **New York** State **NY** Zip Code **10019**

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

Name of Employer **Kohlberg Kravis Roberts** Occupation **Investments**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5100**

Date of Receipt  
MM / DD / YYYY  
**03 / 04 / 2014**

Transaction ID : **SA11AI-CN41327**

Amount of Each Receipt this Period  
**-5100**  
Reattributed to **Judith Eisenberg**

**[MEMO ITEM]**  
Reattributed

**B.** Full Name (Last, First, Middle Initial)  
**Lewis Eisenberg**

Mailing Address **9 57th St W**  
**Ste 4200**

City **New York** State **NY** Zip Code **10019**

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

Name of Employer **Kohlberg Kravis Roberts** Occupation **Investments**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
MM / DD / YYYY  
**03 / 04 / 2014**

Transaction ID : **SA11AI-CN41329**

Amount of Each Receipt this Period  
**-2500**  
Redesignated to **General 2014**

**[MEMO ITEM]**  
Redesignated

**C.** Full Name (Last, First, Middle Initial)  
**Lewis Eisenberg**

Mailing Address **9 57th St W**  
**Ste 4200**

City **New York** State **NY** Zip Code **10019**

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

Name of Employer **Kohlberg Kravis Roberts** Occupation **Investments**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5100**

Date of Receipt  
MM / DD / YYYY  
**03 / 04 / 2014**

Transaction ID : **SA11AI-CN41330**

Amount of Each Receipt this Period  
**2500**  
Redesignated from **Primary 2014**

**[MEMO ITEM]**  
Redesignation

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

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

**0.00**

149 20192599



**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 69 OF 442	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Lewis Eisenberg**

Mailing Address **9 57th St W**  
**Ste 4200**

City **New York** State **NY** Zip Code **10019**

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

Name of Employer **Kohlberg Kravis Roberts** Occupation **Investments**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5300**

Date of Receipt  
MM / DD / YYYY  
**03 / 05 / 2014**

Transaction ID : **SA11AI-CN39906**

Amount of Each Receipt this Period  
**200**

**B.** Full Name (Last, First, Middle Initial)  
**Lewis Eisenberg**

Mailing Address **9 57th St W**  
**Ste 4200**

City **New York** State **NY** Zip Code **10019**

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

Name of Employer **Kohlberg Kravis Roberts** Occupation **Investments**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
MM / DD / YYYY  
**03 / 06 / 2014**

Transaction ID : **SA11AI-CN41331**

Amount of Each Receipt this Period  
**-100**

Reattributed to **Judith Eisenberg**

**[MEMO ITEM]**  
Reattributed

**C.** Full Name (Last, First, Middle Initial)  
**Mr. James R Elkins II**

Mailing Address **322 Hubbard St**

City **Beckley** State **WV** Zip Code **25801**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
MM / DD / YYYY  
**03 / 18 / 2014**

Transaction ID : **SA11AI-CN40100**

Amount of Each Receipt this Period  
**100**

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

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

**300.00**

10102501

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Joe L Ellison**

Mailing Address **PO Box 8**

City **Greenville** State **WV** Zip Code **24945**

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

Name of Employer **WV Bankers Assn** Occupation **President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 14 / 2014**

Transaction ID : **SA11AI-CN39721**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**David Eisenberg**

Mailing Address **5200 Keller Spgs Rd Apt 234**

City **Dallas** State **TX** Zip Code **75248**

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

Name of Employer **Requested** Occupation **Requested**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 13 / 2014**

Transaction ID : **SA11AI-CN39438**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Sanford Emery**

Mailing Address **3958 Eastlake Dr**

City **Morgantown** State **WV** Zip Code **26508**

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

Name of Employer **WVU Hospital** Occupation **Physician**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 14 / 2014**

Transaction ID : **SA11AI-CN39709**

Amount of Each Receipt this Period  
**100**

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

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

**1600.00**

20102592

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11d <input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Miles Epling**

Mailing Address **6194 Ohio River Rd**

City **Point Pleasant** State **WV** Zip Code **25550**

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

Name of Employer **Mason County** Occupation **Commissioner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 MM / DD / YYYY  
**03 / 31 / 2014**

Transaction ID : **SA11Ai-CN40683**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Gary Erlbaum**

Mailing Address **44 West Lancaster Ave Ste 110**

City **Ardmore** State **PA** Zip Code **19003**

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

Name of Employer **Self Employed** Occupation **Businessman**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 MM / DD / YYYY  
**03 / 26 / 2014**

Transaction ID : **SA11Ai-CN41279**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Michelle L Esposito**

Mailing Address **488 Rebecca St.**

City **Morgantown** State **WV** Zip Code **26505**

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

Name of Employer **Student** Occupation **Student**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1600**

Date of Receipt  
 MM / DD / YYYY  
**03 / 24 / 2014**

Transaction ID : **SA11Ai-CN41306**

Amount of Each Receipt this Period  
**1600**

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

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

**2700.00**

1913253

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Michelle L Esposito**

Mailing Address 488 Rebecca St.

City Morgantown State WV Zip Code 26505

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

Name of Employer Student Occupation Student

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40636**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Patrick Esposito II**

Mailing Address 488 Rebecca St

City Morgantown State WV Zip Code 26505

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

Name of Employer Augusta Systems Inc Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 07 / 2014**

Transaction ID : **SA11AI-CN39952**

Amount of Each Receipt this Period  
**2600**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. James Estep**

Mailing Address 213 Mystic Drive

City Morgantown State WV Zip Code 26508

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

Name of Employer WVHTC Foundation Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 24 / 2014**

Transaction ID : **SA11AI-CN41299**

Amount of Each Receipt this Period  
**1000**

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

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

**4600.00**

1409209182504

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 73 OF 442
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Robert Eustis**

Mailing Address **1100 Poydras St**  
**Apt 2525**

City **New Orleans** State **LA** Zip Code **70163**

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

Name of Employer **Eustis Mortgage** Occupation **Owner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
MM / DD / YYYY  
**03 / 22 / 2014**

Transaction ID : **SA11AI-CN40292**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Paul W Exley**

Mailing Address **28 Aaron Woods**

City **Wheeling** State **WV** Zip Code **26003**

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

Name of Employer **Alpine Skis** Occupation **Owner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450**

Date of Receipt  
MM / DD / YYYY  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40557**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Robert Farkas**

Mailing Address **7130 Eudora**

City **Dallas** State **TX** Zip Code **75230**

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

Name of Employer **Physician** Occupation **Self Employed**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
MM / DD / YYYY  
**02 / 13 / 2014**

Transaction ID : **SA11AI-CN39439**

Amount of Each Receipt this Period  
**500**

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

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

**1250.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 74 OF 442		
	(check only one)	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Pamela G Farris**

Mailing Address 990 Harmony Ln

City Charleston State WV Zip Code 25303

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

Name of Employer Dinsmore Shohl Law Occupation HR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 10 / 2014**

Transaction ID : **SA11AI-CN40006**

Amount of Each Receipt this Period  
**200**

**B.** Full Name (Last, First, Middle Initial)  
**Dr. James D. Felsen**

Mailing Address 1369 Orleans Rd

City Great Cacapon State WV Zip Code 25422-3546

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

Name of Employer self-employed Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 13 / 2014**

Transaction ID : **SA11AI-CN39680**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Melody Fennel**

Mailing Address 320 North Pitt street

City Alexandria State VA Zip Code 22314

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

Name of Employer Self Employed Occupation Consultant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 14 / 2014**

Transaction ID : **SA11AI-CN40066**

Amount of Each Receipt this Period  
**1000**

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

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

**1300.00**

2010192509

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 75 OF 442
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
		<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**VoteSane Pac**

Mailing Address **PO Box 2713**

City **Alexandria** State **VA** Zip Code **22301**

FEC ID number of contributing federal political committee. **C C00484535**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **1750**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 14 / 2014**

Transaction ID : **SA11C-CN40067**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **1000** \_\_\_\_\_

Earmarked contribution-Melody Fennel

**[MEMO ITEM]**  
 Total earmarked through conduit. PAC limit not affect

**B.** Full Name (Last, First, Middle Initial)  
**Elizabeth Ferguson**

Mailing Address **2563 Germantown Rd S**

City **Germantown** State **TN** Zip Code **38138**

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

Name of Employer **TN** Occupation **floral designer**

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **200**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 26 / 2014**

Transaction ID : **SA11AI-CN41288**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **100** \_\_\_\_\_

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Kathleen Ferrell**

Mailing Address **714 Broadway**  
**Floor 8**

City **New York** State **NY** Zip Code **10003**

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

Name of Employer **Davis Polk & Wardwell** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **1000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 21 / 2014**

Transaction ID : **SA11AI-CN41309**

Amount of Each Receipt this Period  
 \_\_\_\_\_ **1000** \_\_\_\_\_

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

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

\_\_\_\_\_ **1100.00** \_\_\_\_\_

\_\_\_\_\_

1029102597

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Vernon Ferrell**

Mailing Address **200 Hillcrest Dr**

City **Logan** State **WV** Zip Code **25601**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 25 / 2014**

Transaction ID : **SA11Ai-CN39886**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Sandra L Fichter**

Mailing Address **18 Sherwood Cir**

City **Hurricane** State **WV** Zip Code **25526**

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

Name of Employer **Dr. Leonard A. Fichter Inc.** Occupation **Consultant**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 13 / 2014**

Transaction ID : **SA11Ai-CN39488**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Joseph E Fidler**

Mailing Address **379 Fidhill Ln**

City **Lost Creek** State **WV** Zip Code **26385-6923**

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

Name of Employer **retired** Occupation **retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 19 / 2014**

Transaction ID : **SA11Ai-CN40222**

Amount of Each Receipt this Period  
**200**

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

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

**1700.00**

201802509



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. James H Fletcher**

Mailing Address **2 Willow Glen Rd**

City **Huntington** State **WV** Zip Code **25701**

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

Name of Employer **JH Fletcher & Co** Occupation **Vice Chairman**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40693**

Amount of Each Receipt this Period  
**600**

**B.** Full Name (Last, First, Middle Initial)  
**Mark Fowler**

Mailing Address **17 Birch Tree Ln**

City **Charleston** State **WV** Zip Code **25314**

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

Name of Employer **Pullin Fowler Flanagan** Occupation **Lawyer**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 22 / 2014**

Transaction ID : **SA11AI-CN40992**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Gary Frampton**

Mailing Address **137 Walnut St**

City **East Bank** State **WV** Zip Code **25067**

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

Name of Employer **Alpha Natural Resources** Occupation **Mining Safety**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 26 / 2014**

Transaction ID : **SA11AI-CN41281**

Amount of Each Receipt this Period  
**100**

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

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

**1200.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 78 OF 442	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Alex Franklin II**

Mailing Address **22 Wild Acre Rd**

City **Charleston** State **WV** Zip Code **25314**

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

Name of Employer **Craig Patton House** Occupation **Executive Director**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**03 / 17 / 2014**

Transaction ID : **SA11AI-CN40043**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. George J Freebersyser**

Mailing Address **106 Orchard Dr**

City **Nitro** State **WV** Zip Code **25143-1127**

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

Name of Employer **Union Carbide** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**03 / 17 / 2014**

Transaction ID : **SA11AI-CN40051**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. John E Freyer**

Mailing Address **350 Gilpin St**

City **Denver** State **CO** Zip Code **80218**

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

Name of Employer **Land Title** Occupation **Title Insurance**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1300**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**02 / 06 / 2014**

Transaction ID : **SA11AI-CN39404**

Amount of Each Receipt this Period  
**1300**

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

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

**1500.00**

20102600

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 79 OF 442	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Arthur L Fricke**

Mailing Address **29 Bradley Foster Dr N**

City **Huntington** State **WV** Zip Code **25701**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**03 / 17 / 2014**

Transaction ID : **SA11AI-CN40516**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Joe Funderburk**

Mailing Address **113 Cyrus Pt.**

City **Charleston** State **WV** Zip Code **25314**

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

Name of Employer **WV Physicans Mutual Insurance** Occupation **Agent**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**03 / 07 / 2014**

Transaction ID : **SA11AI-CN39907**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Marshall Funk**

Mailing Address **11226 Indian Trl**

City **Dallas** State **TX** Zip Code **75229**

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

Name of Employer **Marinas International** Occupation **Marina Management**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**02 / 13 / 2014**

Transaction ID : **SA11AI-CN39440**

Amount of Each Receipt this Period  
**500**

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

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

**850.00**

14920182601

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 80 OF 442
	(check only one)	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Stephen Gainer**

Mailing Address **824 Chestnut St**

City **Parkersburg** State **WV** Zip Code **26101**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt  
**02 / 13 / 2014**

Transaction ID : **SA11AI-CN39583**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Gay Gaines**

Mailing Address **1446 Ocean Blvd N**

City **Palm Beach** State **FL** Zip Code **33480**

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

Name of Employer **retired** Occupation **retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
**02 / 14 / 2014**

Transaction ID : **SA11AI-CN39771**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Charles P Gallagher**

Mailing Address **20 Cherry Hills Dr**

City **Englewood** State **CO** Zip Code **80113**

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

Name of Employer **Self Employed** Occupation **Business**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
**02 / 06 / 2014**

Transaction ID : **SA11AI-CN39403**

Amount of Each Receipt this Period  
**2600**

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

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

**4600.00**

20192592

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 81 OF 442
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. James C Gardill**

Mailing Address **408 Jefferson Ave**

City **Glen Dale** State **WV** Zip Code **26038**

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

Name of Employer **Self Employed** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1200**

Date of Receipt  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40559**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Paul Gardner**

Mailing Address **6805 Caulfield**

City **Dallas** State **TX** Zip Code **75248**

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

Name of Employer **Silver Tree Partners** Occupation **Real Estate**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
**02 / 13 / 2014**

Transaction ID : **SA11AI-CN39441**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Billy Garner**

Mailing Address **25 Chatwood Rd**

City **Charleston** State **WV** Zip Code **25304**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
**02 / 04 / 2014**

Transaction ID : **SA11AI-CN41077**

Amount of Each Receipt this Period  
**50**

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

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

**1050.00**

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

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

FOR LINE NUMBER: PAGE 82 OF 442  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Billy Garner**

Mailing Address 25 Chatwood Rd

City Charleston State WV Zip Code 25304

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt  
MM / DD / YYYY  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN41264**

Amount of Each Receipt this Period  
**50**

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Sara Gaskins**

Mailing Address 1407 Connell Rd

City Charleston State WV Zip Code 25314

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

Name of Employer Geraniums Inc Occupation Sales Associates

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1250**

Date of Receipt  
MM / DD / YYYY  
**03 / 17 / 2014**

Transaction ID : **SA11AI-CN40044**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Edward J George**

Mailing Address 1513 Virginia Street E

City Charleston State WV Zip Code 25311

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

Name of Employer Robinson & McElwee LLP Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750**

Date of Receipt  
MM / DD / YYYY  
**02 / 14 / 2014**

Transaction ID : **SA11AI-CN39717**

Amount of Each Receipt this Period  
**250**

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

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

**550.00**

2013026094



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 442				
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Harold Gernslacher**

Mailing Address **6442 Lakehurst**

City **Dallas** State **TX** Zip Code **75230**

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

Name of Employer **Chain Link Services** Occupation **Sales**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
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**02 / 13 / 2014**

Transaction ID : **SA11AI-CN39442**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Steven Ghareeb**

Mailing Address **707 Cross Lanes Dr**

City **Cross Lanes** State **WV** Zip Code **25143**

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

Name of Employer **Self Employed** Occupation **Dentist**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 13 / 2014**

Transaction ID : **SA11AI-CN41098**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Vivian Ghiz**

Mailing Address **13 Tailwind Ct**

City **Verona** State **WI** Zip Code **53593**

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

Name of Employer **Self Employed** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
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**03 / 07 / 2014**

Transaction ID : **SA11AI-CN39953**

Amount of Each Receipt this Period  
**250**

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

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

**1750.00**

14929182699



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 85 OF 442
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Hallie H Gibbs**

Mailing Address **617 S Eagle Trce**

City **Jefferson City** State **MO** Zip Code **65109**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
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**03 / 26 / 2014**

Transaction ID : **SA11Ai-CN40488**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Thomas S Giotto**

Mailing Address **1331 Terrace Dr**

City **Pittsburgh** State **PA** Zip Code **15228**

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

Name of Employer **Buchanan Ingersoll & Rooney** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11Ai-CN40623**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Tom Giompalo**

Mailing Address **5 Twin Oaks Dr**

City **Huntington** State **WV** Zip Code **25701**

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

Name of Employer **Anesthesia Care Associates** Occupation **Owner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11Ai-CN40647**

Amount of Each Receipt this Period  
**100**

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

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

**2100.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Russell Gordy**

Mailing Address **32 Crestwood Dr**

City **Houston** State **TX** Zip Code **77007**

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

Name of Employer **Self** Occupation **Oil & Gas**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 21 / 2014**

Transaction ID : **SA11AI-CN41108**

Amount of Each Receipt this Period  
**2600**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. L. D. Gorman**

Mailing Address **PO Box 1097**

City **Hazard** State **KY** Zip Code **41702**

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

Name of Employer **Black Gold Sales Inc.** Occupation **Executive**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 06 / 2014**

Transaction ID : **SA11AI-CN39390**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Jamie L Gould**

Mailing Address **178 Cole Rd**

City **Ravenswood** State **WV** Zip Code **26164**

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

Name of Employer **Pete Gould & Sons Inc.** Occupation **Sales**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40601**

Amount of Each Receipt this Period  
**2000**

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

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

**5600.00**

20192609

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

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

FOR LINE NUMBER: PAGE 88 OF 442

(check only one)

11a  11b  11c  11d  15  
 12  13a  13b  14

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**Mr. Patrick A Grant**

Mailing Address **106 S University  
# 4**

City State Zip Code  
**Denver CO 80209**

FEC ID number of contributing federal political committee.

C

Name of Employer  
**NWSS**

Occupation  
**Executive**

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

500

Date of Receipt

M M M / D D D / Y Y Y Y Y Y Y Y  
**02 14 2014**

Transaction ID : **SA11AI-CN39703**

Amount of Each Receipt this Period

500

Full Name (Last, First, Middle Initial)

**Mr. James D Gray**

Mailing Address **746 Shannon Rd E**

City State Zip Code  
**Bridgeport WV 26330**

FEC ID number of contributing federal political committee.

C

Name of Employer  
**Self Employed**

Occupation  
**Attorney**

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M M M / D D D / Y Y Y Y Y Y Y Y  
**03 19 2014**

Transaction ID : **SA11AI-CN40198**

Amount of Each Receipt this Period

500

Full Name (Last, First, Middle Initial)

**Mrs. Nancy G. Greenleaf**

Mailing Address **390 Apple Gate Ln**

City State Zip Code  
**Buckhannon WV 26201**

FEC ID number of contributing federal political committee.

C

Name of Employer  
**retired**

Occupation  
**Retired**

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

250

Date of Receipt

M M M / D D D / Y Y Y Y Y Y Y Y  
**03 17 2014**

Transaction ID : **SA11AI-CN40515**

Amount of Each Receipt this Period

100

14929192919

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

1100.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Rex W Greenleaf**

Mailing Address 1105 Grace Rd

City Reedy State WV Zip Code 25270

FEC ID number of contributing federal political committee.

Name of Employer Requested Occupation Requested

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014

Transaction ID : SA11AI-CN40987

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**Mr. David F Grohne**

Mailing Address 25907 Murphy Road

City Wilmington State IL Zip Code 60481

FEC ID number of contributing federal political committee.

Name of Employer Requested Occupation Requested  
Independence Tube Corp CEO

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 25 / 2014

Transaction ID : SA11AI-CN39888

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Margaret Grohne**

Mailing Address 25907 Murphy Road

City Wilmington State IL Zip Code 60481

FEC ID number of contributing federal political committee.

Name of Employer Requested Occupation Requested  
Housewife Housewife

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 25 / 2014

Transaction ID : SA11AI-CN39889

Amount of Each Receipt this Period

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

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

11  
10  
9  
8  
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4  
3  
2  
1

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 90 OF 442
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Edward K Grose**

Mailing Address 2305 Winchester Rd

City Charleston State WV Zip Code 25303-3018

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600**

Date of Receipt  
MM / DD / YYYY  
**03 / 19 / 2014**

Transaction ID : **SA11AI-CN40241**

Amount of Each Receipt this Period  
**200**

**B.** Full Name (Last, First, Middle Initial)  
**Michael Groves**

Mailing Address 107 Symington Dr

City Martinsburg State WV Zip Code 25401

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

Name of Employer Self Occupation Management Services

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
MM / DD / YYYY  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN41136**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Phil Hager**

Mailing Address Post Office Box 283

City Hurricane State WV Zip Code 25526

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

Name of Employer self-employed Occupation Farmer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
MM / DD / YYYY  
**03 / 19 / 2014**

Transaction ID : **SA11AI-CN40207**

Amount of Each Receipt this Period  
**100**

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

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

**800.00**

1209192912

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Jane Hamilton**

Mailing Address **5 Polo Club Rd**

City **Denver** State **CO** Zip Code **80209**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 22 / 2014**

Transaction ID : **SA11AI-CN40405**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Jeanne G Hamilton**

Mailing Address **Drawer 930 Merry Hill Farm**

City **Lewisburg** State **WV** Zip Code **24901**

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

Name of Employer **None** Occupation **Housewife**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **4500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 14 / 2014**

Transaction ID : **SA11AI-CN39712**

Amount of Each Receipt this Period  
**2500**

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Jeanne G Hamilton**

Mailing Address **Drawer 930 Merry Hill Farm**

City **Lewisburg** State **WV** Zip Code **24901**

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

Name of Employer **None** Occupation **Housewife**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 17 / 2014**

Transaction ID : **SA11AI-CN39819**

Amount of Each Receipt this Period  
**-2000**  
 Redesignated to General 2014

**[MEMO ITEM]**  
 Redesignated

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

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

**3000.00**

1020192613

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Jeanne G Hamilton**

Mailing Address **Drawer 930 Merry Hill Farm**

City **Lewisburg** State **WV** Zip Code **24901**

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

Name of Employer **None** Occupation **Housewife**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 17 / 2014**

Transaction ID : **SA11AI-CN39820**

Amount of Each Receipt this Period  
**2000**

Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Thomas Hamm**

Mailing Address **885 Popular Rd**

City **Charleston** State **WV** Zip Code **25302**

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

Name of Employer **Dinsmore & Shohl LLP** Occupation **management**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 07 / 2014**

Transaction ID : **SA11AI-CN39909**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Alison Hansen**

Mailing Address **1969 Jefferson St**

City **San Francisco** State **CA** Zip Code **94123**

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

Name of Employer **Requested** Occupation **Requested**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 15 / 2014**

Transaction ID : **SA11AI-CN39538**

Amount of Each Receipt this Period  
**5200**

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

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

**5450.00**

1929192914



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 93 OF 442
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
		<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Alison Hansen**

Mailing Address 1969 Jefferson St

City San Francisco State CA Zip Code 94123

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

Name of Employer Requested Occupation Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
MM / DD / YYYY  
02 / 17 / 2014

Transaction ID : SA11AI-CN41070

Amount of Each Receipt this Period  
-2600

Redesignated to General 2014

**[MEMO ITEM]**  
Redesignated

**B.** Full Name (Last, First, Middle Initial)  
**Alison Hansen**

Mailing Address 1969 Jefferson St

City San Francisco State CA Zip Code 94123

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

Name of Employer Requested Occupation Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200

Date of Receipt  
MM / DD / YYYY  
02 / 17 / 2014

Transaction ID : SA11AI-CN41071

Amount of Each Receipt this Period  
2600

Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

**C.** Full Name (Last, First, Middle Initial)  
**Raenel Hansen**

Mailing Address 1349 Morningside Dr

City Charleston State WV Zip Code 25314

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

Name of Employer Requested Occupation Requested  
Herman and Comany Accountant

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
MM / DD / YYYY  
03 / 19 / 2014

Transaction ID : SA11AI-CN40186

Amount of Each Receipt this Period  
2000

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

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

2000.00

1103010000

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11d <input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. David Hansford**

Mailing Address 101 Chestnut St

City Parsons State WV Zip Code 26287

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

Name of Employer Hansford Insurance Agency Inc. Occupation Insurance Sales

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN41148**

Amount of Each Receipt this Period  
**50**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Charles Hare**

Mailing Address 264 Glenwood Rd

City Wheeling State WV Zip Code 26003-6618

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **430**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40551**

Amount of Each Receipt this Period  
**50**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Sherry E Harrison**

Mailing Address 1116 Shamrock Rd

City Charleston State WV Zip Code 25314

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

Name of Employer F. Evans Construction Inc. Occupation businesswoman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **650**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 25 / 2014**

Transaction ID : **SA11AI-CN39896**

Amount of Each Receipt this Period  
**500**

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

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

**600.00**

14920192619

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Art E Hartley Jr**

Mailing Address **29 Warwick Rd**

City **Point Pleasant** State **WV** Zip Code **25550**

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

Name of Employer **City Ice & Fuel Co.** Occupation **Chairman and CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40666**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Art E Hartley Jr**

Mailing Address **29 Warwick Rd**

City **Point Pleasant** State **WV** Zip Code **25550**

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

Name of Employer **City Ice & Fuel Co.** Occupation **Chairman and CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40667**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Craig W. Hartzell**

Mailing Address **918 Bakers Ridge Road**

City **Morgantown** State **WV** Zip Code **26508**

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

Name of Employer **Azimuth Inc** Occupation **President & CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40618**

Amount of Each Receipt this Period  
**2600**

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

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

**3600.00**

14920192617

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 442		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. John C Harvey**

Mailing Address 3320 Fortnum Pl

City: Vero Beach State: FL Zip Code: 32963

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

Name of Employer: Cowperwood Co. Occupation: President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **5200**

Date of Receipt: **02 / 28 / 2014**

Transaction ID : **SA11AI-CN39840**

Amount of Each Receipt this Period: **5200**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. John C Harvey**

Mailing Address 3320 Fortnum Pl

City: Vero Beach State: FL Zip Code: 32963

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

Name of Employer: Cowperwood Co. Occupation: President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **2600**

Date of Receipt: **03 / 03 / 2014**

Transaction ID : **SA11AI-CN39918**

Amount of Each Receipt this Period: **-2600**

Redesignated to General 2014

**[MEMO ITEM]**  
Redesignated

**C.** Full Name (Last, First, Middle Initial)  
**Mr. John C Harvey**

Mailing Address 3320 Fortnum Pl

City: Vero Beach State: FL Zip Code: 32963

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

Name of Employer: Cowperwood Co. Occupation: President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **5200**

Date of Receipt: **03 / 03 / 2014**

Transaction ID : **SA11AI-CN39919**

Amount of Each Receipt this Period: **2600**

Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

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

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

**5200.00**

10201026103

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

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

FOR LINE NUMBER: PAGE 97 OF 442

(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Lenna B Haught**

Mailing Address **PO Box 2**

City **Smithville** State **WV** Zip Code **26178**

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

Name of Employer **Self Employed** Occupation **Oil & Natural Gas Production**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
MM / DD / YYYY  
**03 / 19 / 2014**

Transaction ID : **SA11Ai-CN40230**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Orval Paul Hawkins**

Mailing Address **45 Cedar Tree Ln**

City **Parkersburg** State **WV** Zip Code **26104**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
MM / DD / YYYY  
**02 / 09 / 2014**

Transaction ID : **SA11Ai-CN41088**

Amount of Each Receipt this Period  
**25**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Orval Paul Hawkins**

Mailing Address **45 Cedar Tree Ln**

City **Parkersburg** State **WV** Zip Code **26104**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **225**

Date of Receipt  
MM / DD / YYYY  
**02 / 26 / 2014**

Transaction ID : **SA11Ai-CN41122**

Amount of Each Receipt this Period  
**25**

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

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

**1050.00**

19130109

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 98 OF 442
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Orval Paul Hawkins**

Mailing Address 45 Cedar Tree Ln

City Parkersburg State WV Zip Code 26104

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
MM / DD / YYYY  
03 / 25 / 2014

Transaction ID : SA11AI-CN41291

Amount of Each Receipt this Period  
**25**

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Rebekah B Heflin**

Mailing Address 5802 Longview Cir

City Bridgeville State PA Zip Code 15017

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

Name of Employer EQT Occupation Manager Reservoir Engineering

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : SA11AI-CN40614

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Tom Heine**

Mailing Address RR 7 Box 517

City Fairmont State WV Zip Code 26554-8953

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

Name of Employer retired Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
MM / DD / YYYY  
03 / 19 / 2014

Transaction ID : SA11AI-CN40256

Amount of Each Receipt this Period  
**100**

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

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

**625.00**

1929192629

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. James E Helmick Jr**

Mailing Address 138 Horseshoe Dr

City State Zip Code  
Freeport PA 16229

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

Name of Employer Occupation  
EQT Executive

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : SA11AI-CN40586

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**Theresa Hennesy**

Mailing Address 440 S Broad St

City State Zip Code  
Philadelphia PA 19146

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

Name of Employer Occupation  
Comcast Executive

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1500

Date of Receipt  
MM / DD / YYYY  
02 / 14 / 2014

Transaction ID : SA11AI-CN41102

Amount of Each Receipt this Period  
1500

**C.** Full Name (Last, First, Middle Initial)  
**David Herbert**

Mailing Address 106 Lynn Cir

City State Zip Code  
Ripley WV 25271

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
300

Date of Receipt  
MM / DD / YYYY  
02 / 28 / 2014

Transaction ID : SA11AI-CN41231

Amount of Each Receipt this Period  
100

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

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

2600.00

14920192621

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Philip Hereford**

Mailing Address 1330 Mount Vernon Rd

City Charleston State WV Zip Code 25314

FEC ID number of contributing federal political committee.

Name of Employer self-employed Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
 03 / 10 / 2014

Transaction ID : SA11AI-CN40016

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Jackie Hibbler**

Mailing Address 8929 Briar Forest Dr

City Houston State TX Zip Code 77024-7218

FEC ID number of contributing federal political committee.

Name of Employer Exco Resources Occupation Lease Analyst

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
 03 / 31 / 2014

Transaction ID : SA11AI-CN40790

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Hugh D. Hicks**

Mailing Address 209 40th St SE

City Charleston State WV Zip Code 25304

FEC ID number of contributing federal political committee.

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
 02 / 13 / 2014

Transaction ID : SA11AI-CN39607

Amount of Each Receipt this Period

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

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

149 29182622



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 101 OF 442
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Joann Hieronimus**

Mailing Address **169 Blaney Farm Ln**

City **Wheeling** State **WV** Zip Code **26003-1248**

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

Name of Employer Requested \_\_\_\_\_ Occupation Requested \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **200**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 13 / 2014**

Transaction ID : **SA11AI-CN39653**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. David K Higgins**

Mailing Address **18 Norwood Rd**

City **Charleston** State **WV** Zip Code **25314**

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

Name of Employer Requested **Robinson & McElwee** Occupation Requested **Atorney**

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **200**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 14 / 2014**

Transaction ID : **SA11AI-CN39716**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Frances M Hill**

Mailing Address **123 S Fraley St**

City **Kane** State **PA** Zip Code **16735**

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

Name of Employer Requested \_\_\_\_\_ Occupation Requested \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40603**

Amount of Each Receipt this Period  
**1000**

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

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

**1200.00**

1049192623

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.**

Full Name (Last, First, Middle Initial)  
**Mr. Jack I. Hill**

Mailing Address **10008 Magnolia Bnd**

City **Bonita Springs** State **FL** Zip Code **34135-8119**

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

Name of Employer **Retired** Occupation **retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 25 / 2014**

Transaction ID : **SA11Ai-CN39855**

Amount of Each Receipt this Period  
**100**

**B.**

Full Name (Last, First, Middle Initial)  
**Mr. Jack I. Hill**

Mailing Address **10008 Magnolia Bnd**

City **Bonita Springs** State **FL** Zip Code **34135-8119**

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

Name of Employer **Retired** Occupation **retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11Ai-CN40826**

Amount of Each Receipt this Period  
**250**

**C.**

Full Name (Last, First, Middle Initial)  
**Ms. Mary Velma Hill**

Mailing Address **335 Woodland Dr**

City **Madison** State **WV** Zip Code **25130**

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

Name of Employer **retired** Occupation **retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 19 / 2014**

Transaction ID : **SA11Ai-CN40155**

Amount of Each Receipt this Period  
**100**

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

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

**450.00**

149 20182624

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 103 OF 442
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**David Hillman**

Mailing Address **713 Saint James St**

City **Pittsburgh** State **PA** Zip Code **15232**

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

Name of Employer **PNC Riverarch Capital** Occupation **Investment Manager**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40653**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. E Michael Hines Jr**

Mailing Address **26 Magnolia Plz**  
**Ste 201**

City **Weston** State **WV** Zip Code **26452**

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

Name of Employer **Requested** Occupation **Requested**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40602**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. L Wayne Hinter**

Mailing Address **288 Smokey Grose Rd**

City **Buckhannon** State **WV** Zip Code **26201**

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

Name of Employer **Requested** Occupation **Requested**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 22 / 2014**

Transaction ID : **SA11AI-CN40435**

Amount of Each Receipt this Period  
**100**

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

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

**1600.00**

148 20182625

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 442
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Michael Hirsh**

Mailing Address 16306 Sunset Valley

City Dallas State TX Zip Code 75248

FEC ID number of contributing federal political committee.  C

Name of Employer Weaver Occupation CPA

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 500

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 27 / 2014

Transaction ID : SA11Ai-CN39823

Amount of Each Receipt this Period  
 500

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Jesus T Ho**

Mailing Address 101 Leatherwood Dr

City Moundsville State WV Zip Code 26041

FEC ID number of contributing federal political committee.  C

Name of Employer Self Employed Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 400

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 22 / 2014

Transaction ID : SA11Ai-CN40321

Amount of Each Receipt this Period  
 200

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Eleanor Hoffman**

Mailing Address 7264 Longdale Rd

City Letart State WV Zip Code 25253

FEC ID number of contributing federal political committee.  C

Name of Employer Requested Occupation Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 300

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 13 / 2014

Transaction ID : SA11Ai-CN39648

Amount of Each Receipt this Period  
 100

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

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

800.00

14326192626

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

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

FOR LINE NUMBER: PAGE 105 OF 442  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**Robert Hoffman**

Mailing Address **5915 Fairrington Rd  
Ste 202**

City State Zip Code  
**Chaple Hill NC 27517**

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**Retired**

Occupation  
**Retired**

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

**5200**

Date of Receipt

**03 / 03 / 2014**

Transaction ID : **SA11AI-CN39829**

Amount of Each Receipt this Period

**5200**

Full Name (Last, First, Middle Initial)  
**Robert Hoffman**

Mailing Address **5915 Fairrington Rd  
Ste 202**

City State Zip Code  
**Chaple Hill NC 27517**

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**Retired**

Occupation  
**Retired**

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

**2600**

Date of Receipt

**03 / 31 / 2014**

Transaction ID : **SA11AI-CN41062**

Amount of Each Receipt this Period

**-2600**

Redesignated to General 2014

**[MEMO ITEM]**  
Redesignated

Full Name (Last, First, Middle Initial)  
**Robert Hoffman**

Mailing Address **5915 Fairrington Rd  
Ste 202**

City State Zip Code  
**Chaple Hill NC 27517**

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**Retired**

Occupation  
**Retired**

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

**5200**

Date of Receipt

**03 / 31 / 2014**

Transaction ID : **SA11AI-CN41063**

Amount of Each Receipt this Period

**2600**

Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

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

**5200.00**

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

**5200.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Frank Hoffmann**

Mailing Address 9121 Cardiff Rd

City North Chesterfield State VA Zip Code 23236

FEC ID number of contributing federal political committee.

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
 03 / 31 / 2014

Transaction ID : SA11AI-CN40727

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Donald H Hofreuter**

Mailing Address 2018 Oglebay Dr

City Wheeling State WV Zip Code 26003

FEC ID number of contributing federal political committee.

Name of Employer retired Occupation retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
 03 / 31 / 2014

Transaction ID : SA11AI-CN40925

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**Dr. John D Holloway**

Mailing Address 95 Bethany Pike

City Wheeling State WV Zip Code 26003

FEC ID number of contributing federal political committee.

Name of Employer self-employed Occupation Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
 03 / 31 / 2014

Transaction ID : SA11AI-CN40558

Amount of Each Receipt this Period

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

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

10  
09  
08  
07  
06  
05  
04  
03  
02  
01

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. W. P. Holloway Jr**

Mailing Address **55 Forest Hills**

City **Wheeling** State **WV** Zip Code **26003**

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

Name of Employer **Hazlett Burt & Watson** Occupation **Financial Advisor**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11Ai-CN40545**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. John A Hotopp**

Mailing Address **1575 Clark Rd**

City **Charleston** State **WV** Zip Code **25314**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **550**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 13 / 2014**

Transaction ID : **SA11Ai-CN39596**

Amount of Each Receipt this Period  
**50**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Constance Hoxton**

Mailing Address **PO Box E 185 Windward Lane**

City **Shepherdstown** State **WV** Zip Code **25443**

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

Name of Employer **Retired** Occupation **retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 13 / 2014**

Transaction ID : **SA11Ai-CN39490**

Amount of Each Receipt this Period  
**300**

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

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

**850.00**

14929192629

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 108 OF 442
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Eileen Huarte**

Mailing Address 14959 La Cumbre Dr

City Pacific Palisades State CA Zip Code 90272

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

Name of Employer arizona tile Occupation management

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y Y Y  
**02 / 05 / 2014**

Transaction ID : **SA11AI-CN41079**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Eileen Huarte**

Mailing Address 14959 La Cumbre Dr

City Pacific Palisades State CA Zip Code 90272

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

Name of Employer arizona tile Occupation management

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y Y Y  
**03 / 24 / 2014**

Transaction ID : **SA11AI-CN41304**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Charlie Hudson**

Mailing Address HC 74 Box 76A

City Hinton State WV Zip Code 25951

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

Name of Employer Sugar Creek Pizza Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y Y Y  
**02 / 01 / 2014**

Transaction ID : **SA11AI-CN41074**

Amount of Each Receipt this Period  
**500**

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

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

**700.00**

14929192639



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 109 OF 442
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Myra Huffman**

Mailing Address 3330 Franklin Pike

City Petersburg State WV Zip Code 26847

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

Name of Employer housewife Occupation Housewife

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
MM / DD / YYYY  
**02 / 14 / 2014**

Transaction ID : **SA11AI-CN39733**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. John F Hussell IV**

Mailing Address 3 Quail Cove

City Charleston State WV Zip Code 25314

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

Name of Employer Dinsmore Shohl Law Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
MM / DD / YYYY  
**03 / 10 / 2014**

Transaction ID : **SA11AI-CN40003**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Wilma L Hutton**

Mailing Address 2718 Cottageville Rd

City Mt. Alto State WV Zip Code 25264

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

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
MM / DD / YYYY  
**02 / 13 / 2014**

Transaction ID : **SA11AI-CN39502**

Amount of Each Receipt this Period  
**200**

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

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

**800.00**

1103010101

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 110 OF 442	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Wilma L Hutton**

Mailing Address **2718 Cottageville Rd**

City **Mt. Alto** State **WV** Zip Code **25264**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40668**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Mary Elise Hyland**

Mailing Address **520 Colquitt Dr**

City **Pittsburgh** State **PA** Zip Code **15238**

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

Name of Employer **EQT** Occupation **Vice President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40562**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Howard R Irvin Jr**

Mailing Address **28 22nd St Ext**

City **Wellsburg** State **WV** Zip Code **26070**

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

Name of Employer **Requested** Occupation **Requested**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 16 / 2014**

Transaction ID : **SA11AI-CN39547**

Amount of Each Receipt this Period  
**100**

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

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

**1100.00**

14929192632

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 111 OF 442
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Thomas L Isaac**

Mailing Address **223 E Washington St**

City **Lewisburg** State **WV** Zip Code **24901**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40942**

Amount of Each Receipt this Period  
**200**

**B.** Full Name (Last, First, Middle Initial)  
**Randall Isenberg**

Mailing Address **4303 Central Expressway N**

City **Dallas** State **TX** Zip Code **75205**

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

Name of Employer **Self Employed** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 24 / 2014**

Transaction ID : **SA11AI-CN40070**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Michael R Jackson**

Mailing Address **PO Box 795**

City **Andover** State **NY** Zip Code **14806**

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

Name of Employer **Otis Eastern Service LLC** Occupation **Land Manager**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40656**

Amount of Each Receipt this Period  
**2600**

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

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

**3300.00**

1402919263

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 442
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Joseph Jaggers**

Mailing Address **34031 Meadow Mountain Rd**

City **Evergreen** State **CO** Zip Code **80439**

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

Name of Employer **Jagged Peak Energy** Occupation **CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**02 / 06 / 2014**

Transaction ID : **SA11AI-CN39420**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Paul L Janney**

Mailing Address **1221 12th St**

City **Nitro** State **WV** Zip Code **25143-1923**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **280**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**03 / 19 / 2014**

Transaction ID : **SA11AI-CN40197**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Eric Javits**

Mailing Address **150 Bradley Pl**

City **Palm Beach** State **FL** Zip Code **33480**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**02 / 10 / 2014**

Transaction ID : **SA11AI-CN41092**

Amount of Each Receipt this Period  
**250**

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

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

**600.00**

14929182634

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 113 OF 442
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Charles T. Jones**

Mailing Address Rt 2 Box 336A

City Charleston State WV Zip Code 25306

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

Name of Employer Amherst Industries Inc Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
MM / DD / YYYY  
**03 / 31 / 2014**

Transaction ID : **SA11Ai-CN40642**

Amount of Each Receipt this Period  
**600**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Charles T. Jones**

Mailing Address Rt 2 Box 336A

City Charleston State WV Zip Code 25306

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

Name of Employer Amherst Industries Inc Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt  
MM / DD / YYYY  
**03 / 31 / 2014**

Transaction ID : **SA11Ai-CN40643**

Amount of Each Receipt this Period  
**400**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Thomas E Jorden**

Mailing Address 1700 Lincoln St Ste 1800

City Denver State CO Zip Code 80203

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

Name of Employer Cimarex Energy Co. Occupation Chairman President & CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
MM / DD / YYYY  
**02 / 06 / 2014**

Transaction ID : **SA11Ai-CN39419**

Amount of Each Receipt this Period  
**2600**

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

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

**3600.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.**

Full Name (Last, First, Middle Initial)  
**George Jordon**

Mailing Address **3 Abney Cr.**

City **Charleston** State **WV** Zip Code **25314**

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

Name of Employer **Self Employed** Occupation **Businessman**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 22 / 2014**

Transaction ID : **SA11AI-CN40457**

Amount of Each Receipt this Period  
**500**

**B.**

Full Name (Last, First, Middle Initial)  
**Mr. Charles Joyce**

Mailing Address **4165 Granview Ave**

City **Wellsville** State **NY** Zip Code **14895**

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

Name of Employer **Otis Eastern Service LLC** Occupation **Manager**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN41127**

Amount of Each Receipt this Period  
**2600**

**C.**

Full Name (Last, First, Middle Initial)  
**Mr. Charles Joyce**

Mailing Address **4165 Granview Ave**

City **Wellsville** State **NY** Zip Code **14895**

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

Name of Employer **Otis Eastern Service LLC** Occupation **Manager**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN41128**

Amount of Each Receipt this Period  
**2600**

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

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

**5700.00**

149 20102636

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

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

FOR LINE NUMBER: PAGE 115 OF 442

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**Mr. Richard Joyce**

Mailing Address **PO Box 330**

City State Zip Code  
**Wellsville NY 14895**

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

Name of Employer Occupation  
**Otis Eastern Service LLC Pipeline Contractor**

Receipt For: 2014  
 Primary  General  
 Other (specify) Election Cycle-to-Date **2600**

Date of Receipt

**03 / 31 / 2014**

Transaction ID : **SA11AI-CN41124**

Amount of Each Receipt this Period

**2600**

Full Name (Last, First, Middle Initial)

**Mr. Gordon Justice**

Mailing Address **1938 N Spring Rd**

City State Zip Code  
**Justice WV 24851**

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

Name of Employer Occupation  
**J. Mac Leasing Miner**

Receipt For: 2014  
 Primary  General  
 Other (specify) Election Cycle-to-Date **1000**

Date of Receipt

**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40977**

Amount of Each Receipt this Period

**1000**

Full Name (Last, First, Middle Initial)

**Carol Kable**

Mailing Address **336 Rosemont Way**

City State Zip Code  
**Charles Town WV 25414**

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

Name of Employer Occupation  
**self-employed Realtor**

Receipt For: 2014  
 Primary  General  
 Other (specify) Election Cycle-to-Date **250**

Date of Receipt

**01 / 27 / 2014**

Transaction ID : **SA11AI-CN39356**

Amount of Each Receipt this Period

**250**

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

**3850.00**

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

**3850.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 116 OF 442
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Brent Kalafat**

Mailing Address 16 Forest Dr

City State Zip Code  
Bridgeport WV 26330-7771

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

Name of Employer Occupation  
Self Employed Pawnbroker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
MM / DD / YYYY  
03 / 22 / 2014

Transaction ID : SA11AI-CN40319

Amount of Each Receipt this Period  
500

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Barclay B Kass**

Mailing Address 3400 Fortnum Pl

City State Zip Code  
Vero Beach FL 32963

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
MM / DD / YYYY  
02 / 28 / 2014

Transaction ID : SA11AI-CN39845

Amount of Each Receipt this Period  
2600

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Dennis M Kass**

Mailing Address 3400 Fortnum Pl

City State Zip Code  
Vero Beach FL 32963

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

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt  
MM / DD / YYYY  
02 / 28 / 2014

Transaction ID : SA11AI-CN39844

Amount of Each Receipt this Period  
2600

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

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

5700.00

149 29192638



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 117 OF 442
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Antoine Katiny**

Mailing Address **PO Box 358**

City **Flatwoods** State **WV** Zip Code **26621**

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

Name of Employer **self-employed** Occupation **Physician**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1250**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**02 / 16 / 2014**

Transaction ID : **SA11AI-CN39544**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Antoine Katiny**

Mailing Address **PO Box 358**

City **Flatwoods** State **WV** Zip Code **26621**

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

Name of Employer **self-employed** Occupation **Physician**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN41167**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**I A Katz**

Mailing Address **2825 Oak Lawn 192667**

City **Dallas** State **TX** Zip Code **75219**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**02 / 13 / 2014**

Transaction ID : **SA11AI-CN39443**

Amount of Each Receipt this Period  
**500**

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

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

**1250.00**

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

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

FOR LINE NUMBER: PAGE 118 OF 442

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

<p><b>A.</b> Full Name (Last, First, Middle Initial) <b>Mr. Samuel L Katz</b></p> <p>Mailing Address <b>101 Central Park W # 2B</b></p> <p>City <b>New York</b> State <b>NY</b> Zip Code <b>10023</b></p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer <b>TZP Group</b> Occupation <b>Managing Partner</b></p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>Election Cycle-to-Date <b>1000</b></p>		<p>Date of Receipt <b>03 / 31 / 2014</b></p> <p>Transaction ID : <b>SA11AI-CN40763</b></p> <p>Amount of Each Receipt this Period <b>1000</b></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) <b>Diana Kemp</b></p> <p>Mailing Address <b>Eight Timberwood Dr</b></p> <p>City <b>Charleston</b> State <b>WV</b> Zip Code <b>25302</b></p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer <b>self-employed</b> Occupation <b>Physician</b></p> <p>Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>Election Cycle-to-Date <b>250</b></p>		<p>Date of Receipt <b>02 / 28 / 2014</b></p> <p>Transaction ID : <b>SA11AI-CN39848</b></p> <p>Amount of Each Receipt this Period <b>250</b></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) <b>Mr. Thomas L Kempner Jr</b></p> <p>Mailing Address <b>123 73rd St E</b></p> <p>City <b>New York</b> State <b>NY</b> Zip Code <b>10021</b></p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer <b>Davidson Kempner Capital</b> Occupation <b>Investment Manager</b></p> <p>Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>Election Cycle-to-Date <b>3600</b></p>		<p>Date of Receipt <b>03 / 31 / 2014</b></p> <p>Transaction ID : <b>SA11AI-CN41346</b></p> <p>Amount of Each Receipt this Period <b>1000</b></p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional).....</p> <p><b>TOTAL</b> This Period (last page this line number only).....</p>		<p><b>2250.00</b></p>

14920182640

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 119 OF 442
	(check only one)	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. John W Kepner**

Mailing Address **215 Camel Rd**

City **Wheeling** State **WV** Zip Code **26003**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 22 / 2014**

Transaction ID : **SA11AI-CN40432**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Harold Kessel**

Mailing Address **2095 Belle Babb Ln**

City **Burlington** State **WV** Zip Code **26710**

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

Name of Employer **retired** Occupation **retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 13 / 2014**

Transaction ID : **SA11AI-CN39492**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Henry L Kettler**

Mailing Address **813 Mozart Rd**

City **Wheeling** State **WV** Zip Code **26003**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40546**

Amount of Each Receipt this Period  
**250**

**14020192641**

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

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

**750.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Virginia Keys**

Mailing Address **3740 Ocean Blvd S  
Apt 705**

City **Highland Beach** State **FL** Zip Code **33487-3402**

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

Name of Employer **retired** Occupation **retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11Ai-CN41185**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. William D Kilgore Jr.**

Mailing Address **14457 Highlands Trl**

City **Bristol** State **VA** Zip Code **24202-4971**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **3500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11Ai-CN40813**

Amount of Each Receipt this Period  
**1500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. William D Kilgore Jr.**

Mailing Address **14457 Highlands Trl**

City **Bristol** State **VA** Zip Code **24202-4971**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11Ai-CN41060**

Amount of Each Receipt this Period  
**-900**  
 Redesignated to General 2014

**[MEMO ITEM]**  
 Redesignated

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

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

**1750.00**

14929192642

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. William D Kilgore Jr.**

Mailing Address **14457 Highlands Trl**

City **Bristol** State **VA** Zip Code **24202-4971**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **3500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11Ai-CN41061**

Amount of Each Receipt this Period  
**900**

Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Douglas Kimmelman**

Mailing Address **130 Overleigh Rd**

City **Bernardsville** State **NJ** Zip Code **07924**

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

Name of Employer **Energy Capital Partners** Occupation **Investment Manager**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11Ai-CN40761**

Amount of Each Receipt this Period  
**2600**

**C.** Full Name (Last, First, Middle Initial)  
**Evans King**

Mailing Address **423 Stanley Ave**

City **Clarksburg** State **WV** Zip Code **26301**

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

Name of Employer **Step toe & Johnson** Occupation **Attorney**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 14 / 2014**

Transaction ID : **SA11Ai-CN39760**

Amount of Each Receipt this Period  
**500**

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

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

**3100.00**

0182643

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

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

FOR LINE NUMBER: PAGE 122 OF 442

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. James A. Kinsey**

Mailing Address **Rural Route One Box 169**

City **Flemington** State **WV** Zip Code **26347**

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

Name of Employer self-employed **Occupation Farmer**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt  
MM / DD / YYYY  
**02 / 14 / 2014**

Transaction ID : **SA11AI-CN39754**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**William J Kirby**

Mailing Address **3465 Savannah PI N**

City **Vero Beach** State **FL** Zip Code **32963**

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

Name of Employer **FMC Coporations** Occupation **Retired Executive**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000**

Date of Receipt  
MM / DD / YYYY  
**03 / 20 / 2014**

Transaction ID : **SA11AI-CN40035**

Amount of Each Receipt this Period  
**5000**

**C.** Full Name (Last, First, Middle Initial)  
**William J Kirby**

Mailing Address **3465 Savannah PI N**

City **Vero Beach** State **FL** Zip Code **32963**

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

Name of Employer **FMC Coporations** Occupation **Retired Executive**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
MM / DD / YYYY  
**03 / 21 / 2014**

Transaction ID : **SA11AI-CN41333**

Amount of Each Receipt this Period  
**-2400**

Redesignated to General 2014

**[MEMO ITEM]**  
Redesignated

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

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

**5500.00**

201302644

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 123 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**William J Kirby**

Mailing Address **3465 Savannah Pl N**

City **Vero Beach** State **FL** Zip Code **32963**

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

Name of Employer **FMC Coporations** Occupation **Retired Executive**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**03 / 21 / 2014**

Transaction ID : **SA11AI-CN41334**

Amount of Each Receipt this Period  
**2400**

Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Kenneth C Kirk**

Mailing Address **4407 Wildwood Sample Rd**

City **Allison Park** State **PA** Zip Code **15101**

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

Name of Employer **EQT** Occupation **Vice President**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40596**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Thomas T Kirk Jr**

Mailing Address **208 Myrtle Tree Rd**

City **Charleston** State **WV** Zip Code **25309**

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

Name of Employer **WV Intelligence Fusion Center** Occupation **Director**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40908**

Amount of Each Receipt this Period  
**2000**

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

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

**3000.00**

1310192941

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Oren Kitts**

Mailing Address 1509 Mount Vernon Rd

City Charleston State WV Zip Code 25314

FEC ID number of contributing federal political committee.

Name of Employer Alpha Natural Resources Occupation Vice President

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

Transaction ID : SA11AI-CN41059

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Oren Kitts**

Mailing Address 1509 Mount Vernon Rd

City Charleston State WV Zip Code 25314

FEC ID number of contributing federal political committee.

Name of Employer Alpha Natural Resources Occupation Vice President

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

Transaction ID : SA11AI-CN41064

Amount of Each Receipt this Period

Redesignated to General 2014

**[MEMO ITEM]**  
Redesignated

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Oren Kitts**

Mailing Address 1509 Mount Vernon Rd

City Charleston State WV Zip Code 25314

FEC ID number of contributing federal political committee.

Name of Employer Alpha Natural Resources Occupation Vice President

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 /  /

Transaction ID : SA11AI-CN41065

Amount of Each Receipt this Period

Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

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

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

14020192646



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**Mr. Oren Kitts**

A. Mailing Address 1509 Mount Vernon Rd

City Charleston State WV Zip Code 25314

FEC ID number of contributing federal political committee.  C

Name of Employer Alpha Natural Resources Occupation Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3000

Date of Receipt  
 MM / DD / YYYY  
 02 / 28 / 2014

Transaction ID : SA11AI-CN41214

Amount of Each Receipt this Period  
 250

B. Full Name (Last, First, Middle Initial)  
**Jan Kletter**

Mailing Address 273 Equestrian Cir

City Shenandoah Junction State WV Zip Code 25442

FEC ID number of contributing federal political committee.  C

Name of Employer west virginia university Occupation surgeon

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 350

Date of Receipt  
 MM / DD / YYYY  
 01 / 23 / 2014

Transaction ID : SA11AI-CN41005

Amount of Each Receipt this Period  
 250

C. Full Name (Last, First, Middle Initial)  
**Mr. David R Klug**

Mailing Address 20 Aaron Way

City Wheeling State WV Zip Code 26003

FEC ID number of contributing federal political committee.  C

Name of Employer David R Klug & Assoc. Occupation Owner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 500

Date of Receipt  
 MM / DD / YYYY  
 03 / 31 / 2014

Transaction ID : SA11AI-CN40929

Amount of Each Receipt this Period  
 250

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

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

750.00

0192647

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

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

FOR LINE NUMBER: (check only one)

11a    11b    11c    11d  
 12    13a    13b    14    15

PAGE 126 OF 442

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Emil Knutti**

Mailing Address **119 Grandview Ave**

City **Elkins** State **WV** Zip Code **26241**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**02 / 28 / 2014**

Transaction ID : **SA11AI-CN41198**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. T. Richard Koehler**

Mailing Address **204 Westminister Dr**

City **Wheeling** State **WV** Zip Code **26003-0236**

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

Name of Employer **self-employed** Occupation **President**

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40555**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Walet Koelbel Jr.**

Mailing Address **5291 Yale Ave E**

City **Denver** State **CO** Zip Code **80222**

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

Name of Employer **Koelbel & Company** Occupation **CEO**

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**02 / 15 / 2014**

Transaction ID : **SA11AI-CN39530**

Amount of Each Receipt this Period  
**1000**

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

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

**1750.00**

11920182648

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

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

FOR LINE NUMBER: PAGE 127 OF 442  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Mr. Michael C Koelbl**  
Mailing Address 219 Killarney Rd

City Winfield State WV Zip Code 25213

FEC ID number of contributing federal political committee.

Name of Employer Kokosing Construction Occupation Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt

/  /

03 / 31 / 2014

Transaction ID : SA11AI-CN40974

Amount of Each Receipt this Period

**B. Mr. Gregory A Kozera**  
Mailing Address 200 Willow St

City Elkview State WV Zip Code 25071

FEC ID number of contributing federal political committee.

Name of Employer Superior Well Service Occupation Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt

/  /

03 / 31 / 2014

Transaction ID : SA11AI-CN40609

Amount of Each Receipt this Period

**C. Mr. Don Kresen**  
Mailing Address 186 Glenwood Rd

City Wheeling State WV Zip Code 26003

FEC ID number of contributing federal political committee.

Name of Employer Self Employed Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt

/  /

02 / 13 / 2014

Transaction ID : SA11AI-CN39485

Amount of Each Receipt this Period

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Dorothy E Kugel**

Mailing Address **502 York Rd N**

City **Hinsdale** State **IL** Zip Code **60521**

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

Name of Employer **Retired** Occupation **Retired R.N.**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **600**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11Ai-CN40840**

Amount of Each Receipt this Period  
**300**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Muthusami Kuppusami**

Mailing Address **109 Windsor Cir Dr**

City **Bluefield** State **VA** Zip Code **24605**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 24 / 2014**

Transaction ID : **SA11Ai-CN41300**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Perry A Lacaria**

Mailing Address **3030 Andrew Pl**

City **Boca Raton** State **FL** Zip Code **33434**

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

Name of Employer **Landmark Bank NA** Occupation **Banker**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 28 / 2014**

Transaction ID : **SA11Ai-CN39833**

Amount of Each Receipt this Period  
**1000**

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

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

**1400.00**

140 20182659



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 130 OF 442
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Gordon Lane**

Mailing Address **9 Fern Rd E**

City **Charleston** State **WV** Zip Code **25301**

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

Name of Employer **Lane Law Offices PLLC** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 MM / DD / YYYY  
**02 / 13 / 2014**

Transaction ID : **SA11AI-CN39698**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Charles C. Lanham**

Mailing Address **1003 Simpson Pl**

City **Point Pleasant** State **WV** Zip Code **25550**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1450**

Date of Receipt  
 MM / DD / YYYY  
**03 / 07 / 2014**

Transaction ID : **SA11AI-CN39943**

Amount of Each Receipt this Period  
**200**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Charles C. Lanham**

Mailing Address **1003 Simpson Pl**

City **Point Pleasant** State **WV** Zip Code **25550**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1650**

Date of Receipt  
 MM / DD / YYYY  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40688**

Amount of Each Receipt this Period  
**200**

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

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

**900.00**

19020182652

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 131 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Michael D Larson**

Mailing Address **633 Oakland Dr**

City **Dekalb** State **IL** Zip Code **60115**

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

Name of Employer **Elmer Larson LLP** Occupation **President**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40795**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. William S Law Jr.**

Mailing Address **600 Kingfred Drive**

City **N Huntingdon** State **PA** Zip Code **15642**

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

Name of Employer **Sun Life Financial** Occupation **Senior Sales Executive**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 07 / 2014**

Transaction ID : **SA11AI-CN39980**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Michael Lawrence**

Mailing Address **120 Tiskelwah Ave**

City **Elkview** State **WV** Zip Code **25071-9219**

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

Name of Employer **West Virginia American Water** Occupation **Manager**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **800**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 13 / 2014**

Transaction ID : **SA11AI-CN39552**

Amount of Each Receipt this Period  
**200**

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

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

**800.00**

14520192653

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 132 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Richard Lee**

Mailing Address 1055 Brumley Rd

City Chuluota State FL Zip Code 32766

FEC ID number of contributing federal political committee.  C

Name of Employer Citizens Bank of Florida Occupation Banker

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 MM / DD / YYYY  
 02 / 15 / 2014

Transaction ID : SA11AI-CN39537

Amount of Each Receipt this Period  
 1000

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Richard H Lehman**

Mailing Address 310 Pointe Dr S

City Charleston State WV Zip Code 25314

FEC ID number of contributing federal political committee.  C

Name of Employer Wells Fargo Advisors Occupation Financial Advisors

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 1250

Date of Receipt  
 MM / DD / YYYY  
 02 / 13 / 2014

Transaction ID : SA11AI-CN39509

Amount of Each Receipt this Period  
 500

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Mary M Lemmon**

Mailing Address 284 Wildwood Lake

City Morgantown State WV Zip Code 26508-3541

FEC ID number of contributing federal political committee.  C

Name of Employer retired Occupation retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 300

Date of Receipt  
 MM / DD / YYYY  
 01 / 27 / 2014

Transaction ID : SA11AI-CN39353

Amount of Each Receipt this Period  
 100

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

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

1600.00

1010102054



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

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

FOR LINE NUMBER: PAGE 133 OF 442

(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**Ms. Mary M Lemmon**

Mailing Address **284 Wildwood Lake**

City **Morgantown** State **WV** Zip Code **26508-3541**

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

Name of Employer **retired** Occupation **retired**

Receipt For: 2014  
 Primary  General  
 Other (specify) Election Cycle-to-Date **400**

Date of Receipt  
MM / DD / YYYY  
**02 / 25 / 2014**

Transaction ID : **SA11AI-CN39851**

Amount of Each Receipt this Period  
**100**

Full Name (Last, First, Middle Initial)  
**Mr. Michael Lester**

Mailing Address **7338 Wayfarer Dr**

City **Fairfax Station** State **VA** Zip Code **22039**

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

Name of Employer **Self** Occupation **Consumer Leisure**

Receipt For: 2014  
 Primary  General  
 Other (specify) Election Cycle-to-Date **2000**

Date of Receipt  
MM / DD / YYYY  
**02 / 13 / 2014**

Transaction ID : **SA11AI-CN39450**

Amount of Each Receipt this Period  
**2000**

Full Name (Last, First, Middle Initial)  
**Mr. Joseph M Letnaunchyn**

Mailing Address **225 Ariel Heights**

City **Charleston** State **WV** Zip Code **25311**

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

Name of Employer **WV Hospital Association** Occupation **President**

Receipt For: 2014  
 Primary  General  
 Other (specify) Election Cycle-to-Date **3100**

Date of Receipt  
MM / DD / YYYY  
**02 / 14 / 2014**

Transaction ID : **SA11AI-CN39723**

Amount of Each Receipt this Period  
**500**

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

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

**2600.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 134 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

<b>A.</b> Full Name (Last, First, Middle Initial) Mrs. Rachel E Letourneau		Date of Receipt MM / DD / YYYY 03 / 22 / 2014	
Mailing Address 23 Foss Farm Lane		Transaction ID : SA11AI-CN40413	
City Rochester	State MA	Zip Code 02770	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 2600	
Name of Employer Letoumeau Products	Occupation Owner		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600		

<b>B.</b> Full Name (Last, First, Middle Initial) Mr. Fred M Lewton		Date of Receipt MM / DD / YYYY 03 / 31 / 2014	
Mailing Address 1724 Stoolfire Rd		Transaction ID : SA11AI-CN40841	
City Valley Grove	State WV	Zip Code 26060	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 250	
Name of Employer Requested	Occupation Requested		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250		

<b>C.</b> Full Name (Last, First, Middle Initial) Mario P Liberatore		Date of Receipt MM / DD / YYYY 03 / 31 / 2014	
Mailing Address 902 Main St		Transaction ID : SA11AI-CN40676	
City Point Pleasant	State WV	Zip Code 25550	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 500	
Name of Employer Ohio Valley Bank	Occupation Banker		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3350.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020192659

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 135 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Pete Lien**

Mailing Address **PO Box 440**

City **Rapid City** State **SD** Zip Code **57709**

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

Name of Employer **Pet Lien & Sons** Occupation **President**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 MM / DD / YYYY  
**02 / 13 / 2014**

Transaction ID : **SA11AI-CN39457**

Amount of Each Receipt this Period  
**2600**

**B.** Full Name (Last, First, Middle Initial)  
**Michael Lieving**

Mailing Address **PO Box 696**

City **New Haven** State **WV** Zip Code **25265**

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

Name of Employer **Farmers Bank** Occupation **President**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 MM / DD / YYYY  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40691**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Brenda E. Lilly**

Mailing Address **4501 Gulf Shore Blvd N**

City **Naples** State **FL** Zip Code **34103**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1300**

Date of Receipt  
 MM / DD / YYYY  
**02 / 14 / 2014**

Transaction ID : **SA11AI-CN39802**

Amount of Each Receipt this Period  
**300**

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

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

**3900.00**

14329182657

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 136 OF 442	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Gary Lilly**

Mailing Address **54 Faith Way**

City **Fayetteville** State **WV** Zip Code **25840**

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

Name of Employer Requested **Occupation Requested**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
MM / DD / YYYY  
**02 / 13 / 2014**

Transaction ID : **SA11AI-CN39645**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Kristopher Lilly**

Mailing Address **1047 Autumn Ave**

City **Morgantown** State **WV** Zip Code **26508**

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

Name of Employer Requested **Red Bone Mining Company** Occupation Requested **Mine Manager**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
MM / DD / YYYY  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40625**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Avis D Linger**

Mailing Address **274 Terrace Ave**

City **Weston** State **WV** Zip Code **26452**

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

Name of Employer Requested **retired** Occupation Requested **retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
MM / DD / YYYY  
**03 / 19 / 2014**

Transaction ID : **SA11AI-CN40180**

Amount of Each Receipt this Period  
**100**

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

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

**450.00**

1029192659

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

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

FOR LINE NUMBER: PAGE 137 OF 442  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Mr. Michael C Litman**  
Mailing Address 887 Poplar Road

City Charleston	State WV	Zip Code 25302
FEC ID number of contributing federal political committee. C		
Name of Employer Jones & Associate Law	Occupation Attorney	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

Date of Receipt

M M M 03	D D D 10	Y Y Y Y Y Y Y Y 2014
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Transaction ID : SA11AI-CN40004

Amount of Each Receipt this Period

250
-----

**B. Mrs. Macel I. Little**  
Mailing Address 303 Frederick St

City Nitro	State WV	Zip Code 25143
FEC ID number of contributing federal political committee. C		
Name of Employer Housewife	Occupation Housewife	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 275	

Date of Receipt

M M M 02	D D D 14	Y Y Y Y Y Y Y Y 2014
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Transaction ID : SA11AI-CN39765

Amount of Each Receipt this Period

50
----

**C. Mr. William H Lively Jr**  
Mailing Address 1409 Sweetbrier Rd

City Charleston	State WV	Zip Code 25314
FEC ID number of contributing federal political committee. C		
Name of Employer Kanawha Manufacturing Co.	Occupation Executive	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250	

Date of Receipt

M M M 02	D D D 13	Y Y Y Y Y Y Y Y 2014
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Transaction ID : SA11AI-CN39606

Amount of Each Receipt this Period

250
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**SUBTOTAL** of Receipts This Page (optional).....

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

550.00
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**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 138 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. C. Barton Loar**

Mailing Address 35 Kingston Dr

City Morgantown State WV Zip Code 26505

FEC ID number of contributing federal political committee.

Name of Employer WesBanco Mortgage Co Occupation Banker

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
  /   /

Transaction ID : SA11AI-CN40635

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Lee Lockard**

Mailing Address 87 Spencer Run

City Inwood State WV Zip Code 25428

FEC ID number of contributing federal political committee.

Name of Employer retired Occupation retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
  /   /

Transaction ID : SA11AI-CN39778

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Jason S Long**

Mailing Address PO Box 1850

City Lewisburg State WV Zip Code 24901

FEC ID number of contributing federal political committee.

Name of Employer Dinsmore & Stohl Occupation Attorney

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
  /   /

Transaction ID : SA11AI-CN40014

Amount of Each Receipt this Period

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

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

20192699

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 139 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Anthony E Lorber**

Mailing Address **23570 570th Ave**

City **Litchfield** State **MN** Zip Code **55355-5714**

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

Name of Employer **Southwest Airlines** Occupation **pilot**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 22 / 2014**

Transaction ID : **SA11AI-CN40286**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Christopher L Lowers**

Mailing Address **174 Greenland Pl**

City **Washington** State **WV** Zip Code **26181**

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

Name of Employer **SABIC** Occupation **Boiler Operator**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 13 / 2014**

Transaction ID : **SA11AI-CN39582**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Christopher L Lowers**

Mailing Address **174 Greenland Pl**

City **Washington** State **WV** Zip Code **26181**

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

Name of Employer **SABIC** Occupation **Boiler Operator**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40983**

Amount of Each Receipt this Period  
**100**

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

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

**450.00**

1103192691

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 140 OF 442
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Robert R Luchetti**

Mailing Address Pleasant Cove Farm  
145 Point Run Road

City Triadelphia State WV Zip Code 26059

FEC ID number of contributing federal political committee.

Name of Employer self-employed Occupation Farmer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
MM / DD / YYYY  
02 / 13 / 2014

Transaction ID : SA11AI-CN39685

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Robert R Luchetti**

Mailing Address Pleasant Cove Farm  
145 Point Run Road

City Triadelphia State WV Zip Code 26059

FEC ID number of contributing federal political committee.

Name of Employer self-employed Occupation Farmer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : SA11AI-CN40540

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Forest H Lynch**

Mailing Address 101 Sunset Dr

City Beckley State WV Zip Code 25801

FEC ID number of contributing federal political committee.

Name of Employer Requested Occupation Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
MM / DD / YYYY  
03 / 17 / 2014

Transaction ID : SA11AI-CN40047

Amount of Each Receipt this Period

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

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

14920182662



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 141 OF 442
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Bradley Maddox**

Mailing Address 1704 Jasmine Ct

City Pittsburgh State PA Zip Code 15237

FEC ID number of contributing federal political committee.  C

Name of Employer Requested Occupation Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : SA11Ai-CN40615

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**Charles Maddy III**

Mailing Address 530 Rolling Acers Dr

City Old Fields State WV Zip Code 26845-9183

FEC ID number of contributing federal political committee.  C

Name of Employer Requested Occupation Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
MM / DD / YYYY  
01 / 23 / 2014

Transaction ID : SA11Ai-CN41003

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Gregory B Maffei**

Mailing Address 4175 Humboldt St S

City Cherry Hills Village State CO Zip Code 80113

FEC ID number of contributing federal political committee.  C

Name of Employer Requested Occupation Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
MM / DD / YYYY  
02 / 06 / 2014

Transaction ID : SA11Ai-CN39423

Amount of Each Receipt this Period  
5200

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

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

7200.00

01092009

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 142 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Gregory B Maffei**

Mailing Address **4175 Humboldt St S**

City **Cherry Hills Village** State **CO** Zip Code **80113**

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

Name of Employer **Liberty Media** Occupation **CEO**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 MM / DD / YYYY  
**02 / 06 / 2014**

Transaction ID : **SA11AI-CN39435**

Amount of Each Receipt this Period  
**-2600**

Redesignated to General 2014

**[MEMO ITEM]**  
Redesignated

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Gregory B Maffei**

Mailing Address **4175 Humboldt St S**

City **Cherry Hills Village** State **CO** Zip Code **80113**

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

Name of Employer **Liberty Media** Occupation **CEO**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 MM / DD / YYYY  
**02 / 06 / 2014**

Transaction ID : **SA11AI-CN39436**

Amount of Each Receipt this Period  
**2600**

Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Edward J Majoris**

Mailing Address **236 N 10th St**

City **Weirton** State **WV** Zip Code **26062**

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

Name of Employer **Weirton Shopping Plaza** Occupation **President**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 MM / DD / YYYY  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40866**

Amount of Each Receipt this Period  
**250**

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

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

**250.00**

143020192094

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: (check only one)

PAGE 143 OF 442

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

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Douglas Malcolm**

Mailing Address 1512 Barbary Ln

City Charleston State WV Zip Code 25314

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

Name of Employer D.C. Malcolm Inc. Occupation engineer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt **02 / 13 / 2014**

Transaction ID : **SA11AI-CN39650**

Amount of Each Receipt this Period **500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Duncan C Malcolm**

Mailing Address 106 Basswood Rd

City Charleston State WV Zip Code 25314

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

Name of Employer self-employed Occupation Geologist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt **03 / 31 / 2014**

Transaction ID : **SA11AI-CN40605**

Amount of Each Receipt this Period **600**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Duncan C Malcolm**

Mailing Address 106 Basswood Rd

City Charleston State WV Zip Code 25314

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

Name of Employer self-employed Occupation Geologist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **4000**

Date of Receipt **03 / 31 / 2014**

Transaction ID : **SA11AI-CN40607**

Amount of Each Receipt this Period **1400**

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

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

**2500.00**

19102009

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 144 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Ann Margolin**

Mailing Address 10515 Lennox Ln

City Dallas State TX Zip Code 75229

FEC ID number of contributing federal political committee.  C

Name of Employer Requested Occupation Requested

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 500

Date of Receipt  
 MM / DD / YYYY  
 02 / 13 / 2014

Transaction ID : SA11AI-CN39444

Amount of Each Receipt this Period  
 500

**B.** Full Name (Last, First, Middle Initial)  
**Mr. James J Markowsky**

Mailing Address 46 Summit Ln

City North Falmouth State MA Zip Code 02556

FEC ID number of contributing federal political committee.  C

Name of Employer Requested Occupation Requested  
Retired Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 250

Date of Receipt  
 MM / DD / YYYY  
 02 / 06 / 2014

Transaction ID : SA11AI-CN39422

Amount of Each Receipt this Period  
 250

**C.** Full Name (Last, First, Middle Initial)  
**Millie Marshall**

Mailing Address 7006 Briarcliff Way

City Hurricane State WV Zip Code 25526

FEC ID number of contributing federal political committee.  C

Name of Employer Requested Occupation Requested  
Toyota Motors President

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 200

Date of Receipt  
 MM / DD / YYYY  
 01 / 24 / 2014

Transaction ID : SA11AI-CN41006

Amount of Each Receipt this Period  
 200

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

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

950.00

1301920000

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 145 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Millie Marshall**

Mailing Address **7006 Briarcliff Way**

City **Hurricane** State **WV** Zip Code **25526**

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

Name of Employer **Toyota Motors** Occupation **President**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt  
 MM / DD / YYYY  
**03 / 26 / 2014**

Transaction ID : **SA11AI-CN41282**

Amount of Each Receipt this Period  
**200**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Dan Mattoon**

Mailing Address **6344 Cavalier Corridor**

City **Falls Church** State **VA** Zip Code **22044**

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

Name of Employer **Mattoon & Associates** Occupation **President**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 MM / DD / YYYY  
**02 / 25 / 2014**

Transaction ID : **SA11AI-CN39862**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Mary Ellen Mauldin**

Mailing Address **PO Box 225**

City **Hendricks** State **WV** Zip Code **26271**

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

Name of Employer **Housewife** Occupation **Housewife**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **225**

Date of Receipt  
 MM / DD / YYYY  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40812**

Amount of Each Receipt this Period  
**25**

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

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

**725.00**

1002007



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 147 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Casey Ryan McCormick**

Mailing Address **211 Hillcrest Drive**

City **Logan** State **WV** Zip Code **25601**

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

Name of Employer **New York Life Insurance** Occupation **Agent**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 MM / DD / YYYY  
**03 / 07 / 2014**

Transaction ID : **SA11AI-CN39977**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Frank McCullough**

Mailing Address **1 Burkewood Pl**

City **Charleston** State **WV** Zip Code **25314-1148**

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

Name of Employer **Spring Creek Energy** Occupation **Managing Member**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 MM / DD / YYYY  
**02 / 06 / 2014**

Transaction ID : **SA11AI-CN39425**

Amount of Each Receipt this Period  
**5200**

**C.** Full Name (Last, First, Middle Initial)  
**Frank McCullough**

Mailing Address **1 Burkewood Pl**

City **Charleston** State **WV** Zip Code **25314-1148**

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

Name of Employer **Spring Creek Energy** Occupation **Managing Member**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 MM / DD / YYYY  
**02 / 07 / 2014**

Transaction ID : **SA11AI-CN39427**

Amount of Each Receipt this Period  
**-2600**  
 Reattributed to Kathy McCullough

**[MEMO ITEM]**  
 Reattributed

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

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

**5700.00**

140201020909

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 148 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Kathy L McCullough**

Mailing Address **1 Burkewood Pl**

City **Charleston** State **WV** Zip Code **25314-1148**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 MM / DD / YYYY  
**02 / 07 / 2014**

Transaction ID : **SA11Ai-CN39428**

Amount of Each Receipt this Period  
**2600**

Reattributed from **Frank McCullough**

**[MEMO ITEM]**  
Reattribution

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Kermit E. McGinnis**

Mailing Address **PO Box 1037**

City **Huntington** State **WV** Zip Code **25713**

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

Name of Employer **Huntington Federal Savings Bank** Occupation **Banker**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 MM / DD / YYYY  
**02 / 13 / 2014**

Transaction ID : **SA11Ai-CN39595**

Amount of Each Receipt this Period  
**50**

**C.** Full Name (Last, First, Middle Initial)  
**Steve McGowan**

Mailing Address **5203 Villa Pike**

City **Cross Lanes** State **WV** Zip Code **25313**

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

Name of Employer **Step toe & Johnson** Occupation **Attorney**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 MM / DD / YYYY  
**03 / 31 / 2014**

Transaction ID : **SA11Ai-CN40564**

Amount of Each Receipt this Period  
**1000**

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

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

**1050.00**

14920192679



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 149 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Kenneth R McGuire**

Mailing Address 40 Garvins Lane

City: Wheeling      State: WV      Zip Code: 26003

FEC ID number of contributing federal political committee:

Name of Employer: Retired      Occupation: Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date:

Date of Receipt: MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : SA11AI-CN40595

Amount of Each Receipt this Period:

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Jeffrey McIntyre**

Mailing Address 210 Kanawha Ave S

City: Nitro      State: WV      Zip Code: 25143-2430

FEC ID number of contributing federal political committee:

Name of Employer: West Virginia American Water      Occupation: President

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date:

Date of Receipt: MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : SA11AI-CN41247

Amount of Each Receipt this Period:

**C.** Full Name (Last, First, Middle Initial)  
**Mr. David L McKain**

Mailing Address 1225 Ann St

City: Parkersburg      State: WV      Zip Code: 26101

FEC ID number of contributing federal political committee:

Name of Employer: Parkersburg Tool Co.      Occupation: Vice President

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date:

Date of Receipt: MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : SA11AI-CN40832

Amount of Each Receipt this Period:

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

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

0192671

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 150 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Mildred McKenzie**

Mailing Address Rt 81 Box 27

City Peterstown State WV Zip Code 24963

FEC ID number of contributing federal political committee.

Name of Employer self-employed Occupation businesswoman

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 MM / DD / YYYY  
 02 / 14 / 2014

Transaction ID : SA11AI-CN39814

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Mildred McKenzie**

Mailing Address Rt 81 Box 27

City Peterstown State WV Zip Code 24963

FEC ID number of contributing federal political committee.

Name of Employer self-employed Occupation businesswoman

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 MM / DD / YYYY  
 03 / 22 / 2014

Transaction ID : SA11AI-CN40349

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**Paula McKinney**

Mailing Address 1618 Teter Rd

City Charleston State WV Zip Code 25314

FEC ID number of contributing federal political committee.

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 MM / DD / YYYY  
 03 / 31 / 2014

Transaction ID : SA11AI-CN41187

Amount of Each Receipt this Period

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

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

14020102672

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 151 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Timothy McLean**

Mailing Address **117 Whispering Woods Rd**

City **Charleston** State **WV** Zip Code **25304**

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

Name of Employer **Walker Machinery** Occupation **Executive**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2750**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 10 / 2014**

Transaction ID : **SA11AI-CN40021**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Daniel McNamara**

Mailing Address **811 Milestone Dr**

City **Silver Spring** State **MD** Zip Code **20904**

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

Name of Employer **Cassidy & Associates** Occupation **Consultant**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 13 / 2014**

Transaction ID : **SA11AI-CN41313**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. C Edward McVaney**

Mailing Address **1201 Green Oaks Dr**

City **Greenwood Village** State **CO** Zip Code **80121**

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

Name of Employer **JD Edwards & Co.** Occupation **President**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **10400**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 06 / 2014**

Transaction ID : **SA11AI-CN39424**

Amount of Each Receipt this Period  
**10400**

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

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

**11400.00**

1501032007

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 152 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.**

Full Name (Last, First, Middle Initial)  
**Mr. C Edward McVaney**

Mailing Address **1201 Green Oaks Dr**

City **Greenwood Village** State **CO** Zip Code **80121**

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

Name of Employer **JD Edwards & Co.** Occupation **President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 MM / DD / YYYY  
**02 / 06 / 2014**

Transaction ID : **SA11AI-CN39429**

Amount of Each Receipt this Period  
**-5200**  
 Reattributed to Carole McVaney

**[MEMO ITEM]**  
 Reattributed

**B.**

Full Name (Last, First, Middle Initial)  
**Mr. C Edward McVaney**

Mailing Address **1201 Green Oaks Dr**

City **Greenwood Village** State **CO** Zip Code **80121**

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

Name of Employer **JD Edwards & Co.** Occupation **President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 MM / DD / YYYY  
**02 / 06 / 2014**

Transaction ID : **SA11AI-CN39431**

Amount of Each Receipt this Period  
**-2600**  
 Redesignated to General 2014

**[MEMO ITEM]**  
 Redesignated

**C.**

Full Name (Last, First, Middle Initial)  
**Mr. C Edward McVaney**

Mailing Address **1201 Green Oaks Dr**

City **Greenwood Village** State **CO** Zip Code **80121**

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

Name of Employer **JD Edwards & Co.** Occupation **President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 MM / DD / YYYY  
**02 / 06 / 2014**

Transaction ID : **SA11AI-CN39432**

Amount of Each Receipt this Period  
**2600**  
 Redesignated from Primary 2014

**[MEMO ITEM]**  
 Redesignation

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

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

**0.00**

15020182674

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 153 OF 442

(check only one)

11a    11b    11c    11d  
 12    13a    13b    14    15

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)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Mrs. Carole McVaney**

Mailing Address 1201 Green Oaks Dr

City Greenwood Village State CO Zip Code 80121

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

Name of Employer Occupation  
 Housewife Housewife

Receipt For: 2014  
 Primary    General  
 Other (specify)  
 Election Cycle-to-Date 5200

Date of Receipt

**02 / 06 / 2014**

Transaction ID : SA11AI-CN39430

Amount of Each Receipt this Period

5200

Reattributed from C Edward McVaney

**[MEMO ITEM]**  
 Reattribution

**B. Mrs. Carole McVaney**

Mailing Address 1201 Green Oaks Dr

City Greenwood Village State CO Zip Code 80121

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

Name of Employer Occupation  
 Housewife Housewife

Receipt For: 2014  
 Primary    General  
 Other (specify)  
 Election Cycle-to-Date 2600

Date of Receipt

**02 / 06 / 2014**

Transaction ID : SA11AI-CN39433

Amount of Each Receipt this Period

-2600

Redesignated to General 2014

**[MEMO ITEM]**  
 Redesignated

**C. Mrs. Carole McVaney**

Mailing Address 1201 Green Oaks Dr

City Greenwood Village State CO Zip Code 80121

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

Name of Employer Occupation  
 Housewife Housewife

Receipt For: 2014  
 Primary    General  
 Other (specify)  
 Election Cycle-to-Date 5200

Date of Receipt

**02 / 06 / 2014**

Transaction ID : SA11AI-CN39434

Amount of Each Receipt this Period

2600

Redesignated from Primary 2014

**[MEMO ITEM]**  
 Redesignation

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

0.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 154 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Richard E. McWhorter**

Mailing Address **PO Box 328**

City <b>Huntington</b>	State <b>WV</b>	Zip Code <b>25708-0328</b>
---------------------------	--------------------	-------------------------------

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

Name of Employer <b>Retired</b>	Occupation <b>Retired</b>
------------------------------------	------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**1400**

Date of Receipt  
 MM / DD / YYYY  
**02 / 14 / 2014**

Transaction ID : **SA11AI-CN39708**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Richard E. McWhorter**

Mailing Address **PO Box 328**

City <b>Huntington</b>	State <b>WV</b>	Zip Code <b>25708-0328</b>
---------------------------	--------------------	-------------------------------

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

Name of Employer <b>Retired</b>	Occupation <b>Retired</b>
------------------------------------	------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**1500**

Date of Receipt  
 MM / DD / YYYY  
**03 / 07 / 2014**

Transaction ID : **SA11AI-CN39973**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Richard E. McWhorter**

Mailing Address **PO Box 328**

City <b>Huntington</b>	State <b>WV</b>	Zip Code <b>25708-0328</b>
---------------------------	--------------------	-------------------------------

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

Name of Employer <b>Retired</b>	Occupation <b>Retired</b>
------------------------------------	------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**1600**

Date of Receipt  
 MM / DD / YYYY  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40640**

Amount of Each Receipt this Period  
**100**

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

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

**300.00**

102101920979

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 155 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Jerry W Meadows**

Mailing Address **919 Adkins Dr**

City **Rainelle** State **WV** Zip Code **25962-1839**

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

Name of Employer **Retired** Occupation **retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **215**

Date of Receipt  
 MM / DD / YYYY  
**02 / 14 / 2014**

Transaction ID : **SA11AI-CN39759**

Amount of Each Receipt this Period  
**50**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Jerry W Meadows**

Mailing Address **919 Adkins Dr**

City **Rainelle** State **WV** Zip Code **25962-1839**

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

Name of Employer **Retired** Occupation **retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **265**

Date of Receipt  
 MM / DD / YYYY  
**03 / 18 / 2014**

Transaction ID : **SA11AI-CN40111**

Amount of Each Receipt this Period  
**50**

**C.** Full Name (Last, First, Middle Initial)  
**Daris Meeks**

Mailing Address **11413 Heritage Oak Ct**

City **Reston** State **VA** Zip Code **20194**

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

Name of Employer **Patton Boggs** Occupation **Attorney**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 MM / DD / YYYY  
**02 / 05 / 2014**

Transaction ID : **SA11AI-CN41080**

Amount of Each Receipt this Period  
**500**

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

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

**600.00**

14920182677

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 156 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Justin P Meeks**

Mailing Address **614 Trotters Ln**

City **Charleston** State **WV** Zip Code **25312**

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

Name of Employer **Meeks Law Firm** Occupation **Attorney**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40612**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Ms Jacqueline Y Meese**

Mailing Address **PO Box 368**

City **Weston** State **WV** Zip Code **26452-0368**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**02 / 13 / 2014**

Transaction ID : **SA11AI-CN39637**

Amount of Each Receipt this Period  
**70**

**C.** Full Name (Last, First, Middle Initial)  
**Ms Jacqueline Y Meese**

Mailing Address **PO Box 368**

City **Weston** State **WV** Zip Code **26452-0368**

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

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **420**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**03 / 18 / 2014**

Transaction ID : **SA11AI-CN40093**

Amount of Each Receipt this Period  
**70**

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

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

**1140.00**

1029192678



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 157 OF 442  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Lew Meibergen**

Mailing Address 1508 Oak Hill Circle

City Enid State OK Zip Code 73703

FEC ID number of contributing federal political committee. **C**

Name of Employer Johnson Enterprises Inc. Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 500

Date of Receipt  
MM / DD / YYYY  
02 / 14 / 2014

Transaction ID : SA11Ai-CN39707

Amount of Each Receipt this Period  
500

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Kelley Merelene**

Mailing Address 1185 Greenbrier Rd

City Salem State WV Zip Code 26426

FEC ID number of contributing federal political committee. **C**

Name of Employer United Hospital Center Occupation Nurse

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 350

Date of Receipt  
MM / DD / YYYY  
02 / 25 / 2014

Transaction ID : SA11Ai-CN39868

Amount of Each Receipt this Period  
100

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Richard H Merrill**

Mailing Address 1240 Staunton Rd

City Charleston State WV Zip Code 25314

FEC ID number of contributing federal political committee. **C**

Name of Employer Tyler Mountain Water Company Occupation President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 600

Date of Receipt  
MM / DD / YYYY  
03 / 17 / 2014

Transaction ID : SA11Ai-CN40045

Amount of Each Receipt this Period  
300

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

900.00

6192679



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 159 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Celesta Miracle**

Mailing Address **449 Pearl St**

City <b>Denver</b>	State <b>CO</b>	Zip Code <b>80203</b>
-----------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>PDC Energy</b>	Occupation <b>VP Gov't Relations</b>
---------------------------------------	---

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**1300**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 15 / 2014**

Transaction ID : **SA11AI-CN39529**

Amount of Each Receipt this Period  
**1300**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Raymond Mize**

Mailing Address **228 Riverview Way**

City <b>Elkview</b>	State <b>WV</b>	Zip Code <b>25071-9617</b>
------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>Massey Coal Services Inc</b>	Occupation <b>engineer</b>
---	-------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**1450**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 10 / 2014**

Transaction ID : **SA11AI-CN40027**

Amount of Each Receipt this Period  
**200**

**C.** Full Name (Last, First, Middle Initial)  
**J. Thomas Moore**

Mailing Address **PO Box 314**

City <b>Haverford</b>	State <b>PA</b>	Zip Code <b>19041-0314</b>
--------------------------	--------------------	-------------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>The Moore Company</b>	Occupation <b>Executive</b>
--	--------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**2600**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN41171**

Amount of Each Receipt this Period  
**600**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2100.00**

14920192691

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 160 OF 442

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>J. Thomas Moore</b>		Date of Receipt M M / D D / Y Y Y Y Y Y <b>03 / 31 / 2014</b>
Mailing Address <b>PO Box 314</b>		Transaction ID : <b>SA11Ai-CN41172</b>
City <b>Haverford</b>	State <b>PA</b>	
Zip Code <b>19041-0314</b>		Amount of Each Receipt this Period <b>1400</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1400</b>
Name of Employer <b>The Moore Company</b>	Occupation <b>Executive</b>	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>4000</b>	

Full Name (Last, First, Middle Initial) <b>Mr. John W Moore</b>		Date of Receipt M M / D D / Y Y Y Y Y Y <b>03 / 18 / 2014</b>
Mailing Address <b>1033 Hickory St</b>		Transaction ID : <b>SA11Ai-CN40114</b>
City <b>Wayne</b>	State <b>WV</b>	
Zip Code <b>25570</b>		Amount of Each Receipt this Period <b>100</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>100</b>
Name of Employer Requested	Occupation Requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>225</b>	

Full Name (Last, First, Middle Initial) <b>Mr. Rodney J. Moore</b>		Date of Receipt M M / D D / Y Y Y Y Y Y <b>03 / 18 / 2014</b>
Mailing Address <b>2019 Foley Ave</b>		Transaction ID : <b>SA11Ai-CN40151</b>
City <b>Parkersburg</b>	State <b>WV</b>	
Zip Code <b>26101-2551</b>		Amount of Each Receipt this Period <b>100</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>100</b>
Name of Employer <b>Self</b>	Occupation <b>Dentist</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>300</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1600.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

14020192692



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 162 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Ms Janice L. Morgan**

Mailing Address **311 Avis Ave W**

City **Man** State **WV** Zip Code **25635-1132**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **405**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 18 / 2014**

Transaction ID : **SA11AI-CN40083**

Amount of Each Receipt this Period  
**40**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. John Morgan**

Mailing Address **229 Pastoral Ct**

City **Martinsburg** State **WV** Zip Code **25401**

FEC ID number of contributing federal political committee. **C**

Name of Employer **retired** Occupation **retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 07 / 2014**

Transaction ID : **SA11AI-CN39937**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Paul V Morgan Sr.**

Mailing Address **376 Nursery Rd**

City **Elizabeth** State **WV** Zip Code **26143**

FEC ID number of contributing federal political committee. **C**

Name of Employer **retired** Occupation **Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **450**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**01 / 27 / 2014**

Transaction ID : **SA11AI-CN39375**

Amount of Each Receipt this Period  
**50**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**190.00**

1020102094

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 163 OF 442

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**Mr. Paul V Morgan Sr.**

Mailing Address 376 Nursery Rd

City State Zip Code  
Elizabeth WV 26143

FEC ID number of contributing federal political committee.

C

Name of Employer retired

Occupation Retired

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

500

Date of Receipt

MM / DD / YYYY  
02 / 25 / 2014

Transaction ID : SA11AI-CN39870

Amount of Each Receipt this Period

50

Full Name (Last, First, Middle Initial)

**Mr. Paul V Morgan Sr.**

Mailing Address 376 Nursery Rd

City State Zip Code  
Elizabeth WV 26143

FEC ID number of contributing federal political committee.

C

Name of Employer retired

Occupation Retired

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

550

Date of Receipt

MM / DD / YYYY  
03 / 22 / 2014

Transaction ID : SA11AI-CN40291

Amount of Each Receipt this Period

50

Full Name (Last, First, Middle Initial)

**Mr. Carlo Morgano Jr**

Mailing Address 1533 Parkview Blvd

City State Zip Code  
Pittsburgh PA 15217

FEC ID number of contributing federal political committee.

C

Name of Employer EQT

Occupation Chief Information Officer

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : SA11AI-CN40620

Amount of Each Receipt this Period

1000

**SUBTOTAL** of Receipts This Page (optional).....

1100.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 164 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Kirsten S Mork**

Mailing Address **4600 Kanawha Ave SE**

City **Charleston** State **WV** Zip Code **25304-1831**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Housewife** Occupation **Housewife**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 MM / DD / YYYY  
**02 / 06 / 2014**

Transaction ID : **SA11Ai-CN40065**

Amount of Each Receipt this Period  
**5200**

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Kirsten S Mork**

Mailing Address **4600 Kanawha Ave SE**

City **Charleston** State **WV** Zip Code **25304-1831**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Housewife** Occupation **Housewife**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 MM / DD / YYYY  
**02 / 07 / 2014**

Transaction ID : **SA11Ai-CN41066**

Amount of Each Receipt this Period  
**-2600**

Redesignated to General 2014

**[MEMO ITEM]**  
Redesignated

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Kirsten S Mork**

Mailing Address **4600 Kanawha Ave SE**

City **Charleston** State **WV** Zip Code **25304-1831**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Housewife** Occupation **Housewife**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 MM / DD / YYYY  
**02 / 07 / 2014**

Transaction ID : **SA11Ai-CN41067**

Amount of Each Receipt this Period  
**2600**

Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

**5200.00**

11020192696



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 165 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Donald J Morrison**

Mailing Address **108 Scenery Dr**

City **Morgantown** State **WV** Zip Code **26505**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt  
 MM / DD / YYYY  
**02 / 25 / 2014**

Transaction ID : **SA11AI-CN39902**

Amount of Each Receipt this Period  
**50**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Donald J Morrison**

Mailing Address **108 Scenery Dr**

City **Morgantown** State **WV** Zip Code **26505**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt  
 MM / DD / YYYY  
**02 / 27 / 2014**

Transaction ID : **SA11AI-CN41181**

Amount of Each Receipt this Period  
**50**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. William T Morrison**

Mailing Address **1723 Crestmont Dr**

City **Huntington** State **WV** Zip Code **25701**

FEC ID number of contributing federal political committee. **C**

Name of Employer **C.I. Thornburg Co.** Occupation **President**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **325**

Date of Receipt  
 MM / DD / YYYY  
**03 / 19 / 2014**

Transaction ID : **SA11AI-CN40236**

Amount of Each Receipt this Period  
**150**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**250.00**

169270102697

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 166 OF 442

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**Mr. Earl F Morton**

Mailing Address 687 Gordon Dr

City State Zip Code  
Charleston WV 25314

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : SA11AI-CN40737

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)

**Cindy Moskowitz**

Mailing Address 5915 Wammist

City State Zip Code  
Dallas TX 75248

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2014

Transaction ID : SA11AI-CN39516

Amount of Each Receipt this Period

500

Full Name (Last, First, Middle Initial)

**Mr. Stephen K Moss**

Mailing Address RR 1 Box 108

City State Zip Code  
Liberty WV 25124

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested  
Apex Pipeline Services Inc. President/CEO

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date  
2600

Date of Receipt

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : SA11AI-CN40544

Amount of Each Receipt this Period

2600

**SUBTOTAL** of Receipts This Page (optional).....

4100.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 167 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Bruce Mullett**

Mailing Address 1026 Forest Road

City Charleston State WV Zip Code 26314

FEC ID number of contributing federal political committee.

Name of Employer City National Bank Occupation Senior VP & Chief Legal Counsel

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
MM / DD / YYYY  
03 / 10 / 2014

Transaction ID : SA11AI-CN40024

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Rebecca Musgrave**

Mailing Address 3102 Kathnor Ln

City Point Pleasant State WV Zip Code 25550

FEC ID number of contributing federal political committee.

Name of Employer Requested Occupation Requested

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : SA11AI-CN40681

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**Mr. John B Myer**

Mailing Address PO Box 5157

City Vienna State WV Zip Code 26105

FEC ID number of contributing federal political committee.

Name of Employer Self Employed Occupation Real Estate Developer

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
MM / DD / YYYY  
02 / 25 / 2014

Transaction ID : SA11AI-CN39892

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

201901192699



**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 169 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Charles B Neely Jr**

Mailing Address **3065 Granville Dr**

City **Raleigh** State **NC** Zip Code **27609**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Williams Mullin** Occupation **Lawyer**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40774**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Jerry Neely**

Mailing Address **PO Box 1119**

City **San Juan Lapistrand** State **CA** Zip Code **92693**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Requested** Occupation **Requested**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 27 / 2014**

Transaction ID : **SA11AI-CN39822**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Don E. Nehlen**

Mailing Address **2008 Magnolia Dr**

City **Morgantown** State **WV** Zip Code **26508-4467**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 13 / 2014**

Transaction ID : **SA11AI-CN39486**

Amount of Each Receipt this Period  
**100**

**TSUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1350.00**

110302001

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 170 OF 442

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**Mrs. Lynette L Neilson**

Mailing Address 15 Fairview Heights

City Parkersburg State WV Zip Code 26101

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify) Election Cycle-to-Date 250

Date of Receipt

MM	DD	YYYY
02	13	2014

Transaction ID : SA11AI-CN39473

Amount of Each Receipt this Period

100
-----

Full Name (Last, First, Middle Initial)

**Ms. Patricia S Nelson**

Mailing Address 7816 Coco Bay Ct

City Naples State FL Zip Code 34108

FEC ID number of contributing federal political committee. **C**

Name of Employer housewife Occupation Housewife

Receipt For: 2014  
 Primary  General  
 Other (specify) Election Cycle-to-Date 250

Date of Receipt

MM	DD	YYYY
03	31	2014

Transaction ID : SA11AI-CN40578

Amount of Each Receipt this Period

100
-----

Full Name (Last, First, Middle Initial)

**Ms. Valerie S Nelson**

Mailing Address 649 C Street SE # 106

City Washington State DC Zip Code 20003

FEC ID number of contributing federal political committee. **C**

Name of Employer Dentons US LLP Occupation Senior Managing Director

Receipt For: 2014  
 Primary  General  
 Other (specify) Election Cycle-to-Date 500

Date of Receipt

MM	DD	YYYY
03	20	2014

Transaction ID : SA11AI-CN40272

Amount of Each Receipt this Period

500
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**SUBTOTAL** of Receipts This Page (optional).....

700.00
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**TOTAL** This Period (last page this line number only).....

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**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 171 OF 442

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**Sheila Netzer**

Mailing Address **9821 Meadowbrook Dr**

City State Zip Code  
**Dallas TX 75220**

FEC ID number of contributing federal political committee.

C

Name of Employer  
**Self Employed**

Occupation  
**Real Estate**

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

1000

Date of Receipt

M /  D /  Y  
**02 / 15 / 2014**

Transaction ID : **SA11AI-CN39518**

Amount of Each Receipt this Period

1000

Full Name (Last, First, Middle Initial)  
**Mr. Stephen C. Newton**

Mailing Address **2834 Waverly Rd**

City State Zip Code  
**Williamstown WV 26187-7930**

FEC ID number of contributing federal political committee.

C

Name of Employer  
**Retired**

Occupation  
**Retired**

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

200

Date of Receipt

M /  D /  Y  
**02 / 13 / 2014**

Transaction ID : **SA11AI-CN39597**

Amount of Each Receipt this Period

50

Full Name (Last, First, Middle Initial)  
**Mr. Roger L Nicholson**

Mailing Address **1557 Quarrier St**

City State Zip Code  
**Charleston WV 25311**

FEC ID number of contributing federal political committee.

C

Name of Employer  
**Jackson Kelly PLLC**

Occupation  
**Attorney**

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

750

Date of Receipt

M /  D /  Y  
**03 / 25 / 2014**

Transaction ID : **SA11AI-CN41296**

Amount of Each Receipt this Period

250

1103192693

**SUBTOTAL** of Receipts This Page (optional).....

1300.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 172 OF 442

11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Mr. John Nicolozakes**

Mailing Address 62920 Georgetown Rd

City State Zip Code  
Cambridge OH 43725

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation  
Rayle Coal Mining

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2014

Transaction ID : SA11AI-CN39674

Amount of Each Receipt this Period

500

Full Name (Last, First, Middle Initial)

**B. Mrs. Sally Niezgoda**

Mailing Address 1469 Middletown Rd

City State Zip Code  
Shinnston WV 26431

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date  
200

Date of Receipt

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : SA11AI-CN40781

Amount of Each Receipt this Period

100

Full Name (Last, First, Middle Initial)

**C. Ms. Barbara Nolan**

Mailing Address 1507 Barberrry Ln

City State Zip Code  
Charleston WV 25314

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation  
housewife Housewife

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date  
550

Date of Receipt

MM / DD / YYYY  
03 / 19 / 2014

Transaction ID : SA11AI-CN40181

Amount of Each Receipt this Period

300

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

900.00







**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 175 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Lawrence A Olson**

Mailing Address 45 Mackenzie Ct

City Milton State WV Zip Code 25541

FEC ID number of contributing federal political committee.  C

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 1500

Date of Receipt  
 MM / DD / YYYY  
 03 / 22 / 2014

Transaction ID : SA11AI-CN40397

Amount of Each Receipt this Period  
 500

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Liam Oneil**

Mailing Address 441 West End Ave  
5B

City New York State NY Zip Code 10024

FEC ID number of contributing federal political committee.  C

Name of Employer Bank Of America Merrill Lynch Occupation Managing Director

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
 MM / DD / YYYY  
 03 / 24 / 2014

Transaction ID : SA11AI-CN41303

Amount of Each Receipt this Period  
 1000

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Bill Oshel**

Mailing Address 728 Bunker Hill Cir

City Newport News State VA Zip Code 23602

FEC ID number of contributing federal political committee.  C

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 375

Date of Receipt  
 MM / DD / YYYY  
 03 / 22 / 2014

Transaction ID : SA11AI-CN40388

Amount of Each Receipt this Period  
 10

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1510.00

0320102007

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 176 OF 442  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Dale Oxley**

Mailing Address **PO Box 884**

City **Hurricane** State **WV** Zip Code **25526**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Modern Home Concepts** Occupation **Owner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40673**

Amount of Each Receipt this Period  
**200**

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Ashley L Pack**

Mailing Address **905 Crestmont Rd**

City **Hurricane** State **WV** Zip Code **25526-6231**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Dinsmore & Shohl** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
**03 / 10 / 2014**

Transaction ID : **SA11AI-CN39992**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Michael Pacyna**

Mailing Address **8 Elgin St**

City **Morgantown** State **WV** Zip Code **26501**

FEC ID number of contributing federal political committee. **C**

Name of Employer **U.S. Cellular** Occupation **Project Manager**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN41203**

Amount of Each Receipt this Period  
**50**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**500.00**

110920182699



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: (check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Billy L Pauley**

Mailing Address **9004 Maryland Ave**

City **Marmet** State **WV** Zip Code **25315**

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested \_\_\_\_\_ Occupation Requested \_\_\_\_\_

Receipt For: 2014  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **200**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**03 / 19 / 2014**

Transaction ID : **SA11Ai-CN40208**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. John Pauley**

Mailing Address **1707 Clark Rd**

City **Charleston** State **WV** Zip Code **25314**

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested **New York Life Insurance Compan** Occupation Requested **Insurance Agent**

Receipt For: 2014  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **200**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**03 / 07 / 2014**

Transaction ID : **SA11Ai-CN39975**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Lee C Paull III**

Mailing Address **183 Stonebridge Way**

City **Wheeling** State **WV** Zip Code **26003**

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested **Paull Associates** Occupation Requested **Executive**

Receipt For: 2014  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11Ai-CN40554**

Amount of Each Receipt this Period  
**500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**700.00**

14929192709

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 179 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**William Pauls**

Mailing Address **270 St Paul St**

City **Denver** State **CO** Zip Code **80206**

FEC ID number of contributing federal political committee. **C**

Name of Employer **The Pauls Corporation** Occupation **Chairman**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 15 / 2014**

Transaction ID : **SA11AI-CN39528**

Amount of Each Receipt this Period  
**1500**

**B.** Full Name (Last, First, Middle Initial)  
**Edward Payne**

Mailing Address **29 Tradd St**

City **Charleston** State **SC** Zip Code **29401**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Piney Land Co** Occupation **President**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2400**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 28 / 2014**

Transaction ID : **SA11AI-CN41215**

Amount of Each Receipt this Period  
**2400**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Hal S Payne**

Mailing Address **365 County House Ln**

City **Marietta** State **OH** Zip Code **45750**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Ken Miller Supply Co.** Occupation **Manager**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40613**

Amount of Each Receipt this Period  
**1000**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**4900.00**

0192701

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 180 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Ernest N Pennington**

Mailing Address **111 Brooks St**

City **Charleston** State **WV** Zip Code **25301**

FEC ID number of contributing federal political committee. **C**

Name of Employer self-employed Occupation  
**Dentist**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**1000**

Date of Receipt  
 MM / DD / YYYY  
**02 / 13 / 2014**

Transaction ID : **SA11AI-CN39480**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**David Perdue**

Mailing Address **307 Whitaker Blvd**

City **Huntington** State **WV** Zip Code **25701**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**Salomon Smith Barney Inc Investment Advisor**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
 MM / DD / YYYY  
**02 / 13 / 2014**

Transaction ID : **SA11AI-CN39644**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Catherine Perez**

Mailing Address **81 Seagate Dr Season  
Apt 1603**

City **Naples** State **FL** Zip Code **34103**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**Retired Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**5000**

Date of Receipt  
 MM / DD / YYYY  
**02 / 17 / 2014**

Transaction ID : **SA11AI-CN41338**

Amount of Each Receipt this Period  
**5000**

Reattributed from William Perez

**[MEMO ITEM]**  
Reattribution

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1000.00**

1920192792



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 181 OF 442  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Catherine Perez**

Mailing Address **81 Seagate Dr Season  
Apt 1603**

City **Naples** State **FL** Zip Code **34103**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
**02 / 17 / 2014**

Transaction ID : **SA11AI-CN41341**

Amount of Each Receipt this Period  
**-2400**

Redesignated to General 2014

**[MEMO ITEM]**  
Redesignated

**B.** Full Name (Last, First, Middle Initial)  
**Catherine Perez**

Mailing Address **81 Seagate Dr Season  
Apt 1603**

City **Naples** State **FL** Zip Code **34103**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000**

Date of Receipt  
**02 / 17 / 2014**

Transaction ID : **SA11AI-CN41342**

Amount of Each Receipt this Period  
**2400**

Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

**C.** Full Name (Last, First, Middle Initial)  
**Patricio Perez**

Mailing Address **801 Brickell Ave  
Ste 1500**

City **Miami** State **FL** Zip Code **33131**

FEC ID number of contributing federal political committee. **C**

Name of Employer **McGladrey** Occupation **CPA**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
**03 / 03 / 2014**

Transaction ID : **SA11AI-CN39830**

Amount of Each Receipt this Period  
**500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**500.00**

18010192703

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 182 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**William Perez**

Mailing Address **81 Seagate Dr Season  
Apt 1603**

City **Naples** State **FL** Zip Code **34103**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **10000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 15 / 2014**

Transaction ID : **SA11AI-CN39534**

Amount of Each Receipt this Period  
**10000**

**B.** Full Name (Last, First, Middle Initial)  
**William Perez**

Mailing Address **81 Seagate Dr Season  
Apt 1603**

City **Naples** State **FL** Zip Code **34103**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **10200**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 15 / 2014**

Transaction ID : **SA11AI-CN39535**

Amount of Each Receipt this Period  
**200**

**C.** Full Name (Last, First, Middle Initial)  
**William Perez**

Mailing Address **81 Seagate Dr Season  
Apt 1603**

City **Naples** State **FL** Zip Code **34103**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 17 / 2014**

Transaction ID : **SA11AI-CN41337**

Amount of Each Receipt this Period  
**-5000**  
 Reattributed to Catherine Perez

**[MEMO ITEM]**  
 Reattributed

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

**10200.00**

1829192794

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 183 OF 442

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**William Perez**

Mailing Address **81 Seagate Dr Season  
Apt 1603**

City **Naples** State **FL** Zip Code **34103**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date **2800**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y Y
02		17		2014

Transaction ID : **SA11AI-CN41339**

Amount of Each Receipt this Period

-2400
-------

Redesignated to General 2014

**[MEMO ITEM]**  
Redesignated

Full Name (Last, First, Middle Initial)  
**William Perez**

Mailing Address **81 Seagate Dr Season  
Apt 1603**

City **Naples** State **FL** Zip Code **34103**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date **5200**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y Y
02		17		2014

Transaction ID : **SA11AI-CN41340**

Amount of Each Receipt this Period

2400
------

Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

Full Name (Last, First, Middle Initial)  
**Cyndi Persily**

Mailing Address **126 Whispering Wood Rd**

City **Charleston** State **WV** Zip Code **25304**

FEC ID number of contributing federal political committee. **C**

Name of Employer **West Virginia University** Occupation **professor**

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date **500**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y Y
03		22		2014

Transaction ID : **SA11AI-CN40293**

Amount of Each Receipt this Period

500
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1103020192705

**SUBTOTAL** of Receipts This Page (optional).....

500.00
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**TOTAL** This Period (last page this line number only).....

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**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 184 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Stanley Peskind**

Mailing Address **5200 Keller Spgs Rd**  
**Apt 723**

City **Dallas** State **TX** Zip Code **75248**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 15 / 2014**

Transaction ID : **SA11AI-CN39519**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Don H Peterson**

Mailing Address **6581 Us Hwy 33 E**

City **Horner** State **WV** Zip Code **26372-9734**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self Employed** Occupation **Farm Owner**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 19 / 2014**

Transaction ID : **SA11AI-CN40237**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Patricia R Petitt**

Mailing Address **1011 Wintercress Ln**

City **Bowling Green** State **KY** Zip Code **42104-8604**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Requested** Occupation **Requested**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 25 / 2014**

Transaction ID : **SA11AI-CN39895**

Amount of Each Receipt this Period  
**30**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**630.00**

1029192706



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 186 OF 442

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Angus Peyton**

Mailing Address 1559 Virginia Street E

City Charleston State WV Zip Code 25311-2416

FEC ID number of contributing federal political committee.  C

Name of Employer Salomon Smith Barney Inc Occupation Investor

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 750

Date of Receipt

MM / DD / YYYY  
03 / 10 / 2014

Transaction ID : SA11AI-CN40002

Amount of Each Receipt this Period

250

**B. Mr. Charles W Peyton**

Mailing Address 859 Chestnut St

City Charleston State WV Zip Code 25309-2035

FEC ID number of contributing federal political committee.  C

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 315

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2014

Transaction ID : SA11AI-CN39631

Amount of Each Receipt this Period

100

**C. Mr. Charles W Peyton**

Mailing Address 859 Chestnut St

City Charleston State WV Zip Code 25309-2035

FEC ID number of contributing federal political committee.  C

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 365

Date of Receipt

MM / DD / YYYY  
03 / 19 / 2014

Transaction ID : SA11AI-CN40245

Amount of Each Receipt this Period

50

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

400.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 187 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Craig Pfeiffer**

Mailing Address **14 Auserehl Ct**

City **Huntington** State **NY** Zip Code **11743**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Advisors Ahead** Occupation **CEO/Founder**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**03 / 18 / 2014**

Transaction ID : **SA11Ai-CN40078**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. R. C. Phares**

Mailing Address **PO Box 1092**

City **Onego** State **WV** Zip Code **26886**

FEC ID number of contributing federal political committee. **C**

Name of Employer **R. C. Phares** Occupation **Owner**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **320**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**03 / 19 / 2014**

Transaction ID : **SA11Ai-CN40196**

Amount of Each Receipt this Period  
**150**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Michael J Phipps**

Mailing Address **200 Briarwood Lane**

City **Beaver** State **WV** Zip Code **25813**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**03 / 22 / 2014**

Transaction ID : **SA11Ai-CN40471**

Amount of Each Receipt this Period  
**250**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1400.00**

11020192709

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 188 OF 442  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Betty M Pifer**

Mailing Address **50 Windermere Way**

City **Aiken** State **SC** Zip Code **29803**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
**02 / 06 / 2014**

Transaction ID : **SA11AI-CN39400**

Amount of Each Receipt this Period  
**2600**

**B.** Full Name (Last, First, Middle Initial)  
**Lillian Pinkus**

Mailing Address **7040 Teakwood Dr**

City **Dallas** State **TX** Zip Code **75240**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self Employed** Occupation **Investments**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
**02 / 15 / 2014**

Transaction ID : **SA11AI-CN39520**

Amount of Each Receipt this Period  
**2600**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Susan B. Plant**

Mailing Address **420 Stonecrest Dr**

City **Napa** State **CA** Zip Code **94558**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt  
**02 / 14 / 2014**

Transaction ID : **SA11AI-CN39764**

Amount of Each Receipt this Period  
**100**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**5300.00**

11020192719



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

11a  11b  11c  11d  12  13a  13b  14  15

PAGE 189 OF 442

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**Todd Platt**

A. Mailing Address **28 Glen Abbey**

City **Dallas** State **TX** Zip Code **75248**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Hillwood** Occupation **CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
MM / DD / YYYY  
**02 / 15 / 2014**

Transaction ID : **SA11AI-CN39521**

Amount of Each Receipt this Period  
**500**

Full Name (Last, First, Middle Initial)  
**Mr. David L Porges**

B. Mailing Address **5725 Aylesboro Ave**

City **Pittsburgh** State **PA** Zip Code **15217**

FEC ID number of contributing federal political committee. **C**

Name of Employer **EQT** Occupation **Chairman**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt  
MM / DD / YYYY  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40634**

Amount of Each Receipt this Period  
**2500**

Full Name (Last, First, Middle Initial)  
**Mr. Christopher B Power**

C. Mailing Address **1511 Bedford Rd**

City **Charleston** State **WV** Zip Code **25314**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Dinsmore & Shahl LLP** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2250**

Date of Receipt  
MM / DD / YYYY  
**03 / 18 / 2014**

Transaction ID : **SA11AI-CN40119**

Amount of Each Receipt this Period  
**1000**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**4000.00**

110929182711

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Betty M. Preast**

Mailing Address **PO Box 603**

City **Ansted** State **WV** Zip Code **25812**

FEC ID number of contributing federal political committee. **C**

Name of Employer **housewife** Occupation **Housewife**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600**

Date of Receipt **03 / 19 / 2014**

Transaction ID : **SA11AI-CN40253**

Amount of Each Receipt this Period **75**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Homer K Preece**

Mailing Address **2615 Mount Vernon Ave**

City **Point Pleasant** State **WV** Zip Code **25550**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Marshall University** Occupation **Teacher**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt **02 / 25 / 2014**

Transaction ID : **SA11AI-CN39899**

Amount of Each Receipt this Period **100**

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Linda G Proudfoot**

Mailing Address **PO Box 268**

City **Phillippi** State **WV** Zip Code **26416**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Requested** Occupation **Requested**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt **03 / 22 / 2014**

Transaction ID : **SA11AI-CN40328**

Amount of Each Receipt this Period **1000**

**SUBTOTAL** of Receipts This Page (optional)..... **1175.00**

**TOTAL** This Period (last page this line number only).....

11020182712

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 191 OF 442
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Betty J Puskar**

Mailing Address 1140 Cheat Rd

City Morgantown	State WV	Zip Code 26508
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee.  C

Name of Employer Homemaker	Occupation Homemaker
-------------------------------	-------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
MM / DD / YYYY  
03 / 22 / 2014

Transaction ID : SA11AI-CN40357

Amount of Each Receipt this Period  
500

**B.** Full Name (Last, First, Middle Initial)  
**Tim Quinlan**

Mailing Address 209 Parkview Dr

City Saint Albans	State WV	Zip Code 25177
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee.  C

Name of Employer City National Bank	Occupation Banker
--	----------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
MM / DD / YYYY  
03 / 18 / 2014

Transaction ID : SA11AI-CN40101

Amount of Each Receipt this Period  
250

**C.** Full Name (Last, First, Middle Initial)  
**Stanley Rabin**

Mailing Address 24 Downs Lake Cir

City Dallas	State TX	Zip Code 75230
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FEC ID number of contributing federal political committee.  C

Name of Employer Retired	Occupation Retired Executive
-----------------------------	---------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
MM / DD / YYYY  
02 / 15 / 2014

Transaction ID : SA11AI-CN39522

Amount of Each Receipt this Period  
1000

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1750.00

13 271 192 019 2

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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11a     11b     11c     11d  
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**Mr. J.C. Raffety**

Mailing Address 235 Knollwood Dr

City State Zip Code  
Buckhannon WV 26201-6627

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Upshur Co WV County Commissioner

Receipt For: 2014  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date **600**

Date of Receipt

MM / DD / YYYY  
02 / 28 / 2014

Transaction ID : SA11AI-CN41219

Amount of Each Receipt this Period

**500**

Full Name (Last, First, Middle Initial)

**Bruce Ramer**

Mailing Address 132 Rodeo Dr S

City State Zip Code  
Beverly Hills CA 90212

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Gang Tye Ramer & Brown Attorney

Receipt For: 2014  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date **2600**

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2014

Transaction ID : SA11AI-CN39533

Amount of Each Receipt this Period

**2600**

Full Name (Last, First, Middle Initial)

**Ms. Barbara M Raynes**

Mailing Address PO Box 166

City State Zip Code  
Buffalo WV 25033

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Self Funeral Home Owner

Receipt For: 2014  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date **500**

Date of Receipt

MM / DD / YYYY  
03 / 19 / 2014

Transaction ID : SA11AI-CN40215

Amount of Each Receipt this Period

**200**

14020192714

SUBTOTAL of Receipts This Page (optional).....

**3300.00**

TOTAL This Period (last page this line number only).....

**3300.00**

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 193 OF 442
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Scott Reed**

Mailing Address 1 Damian Rd

City Wheeling State WV Zip Code 26003

FEC ID number of contributing federal political committee. **C**

Name of Employer Linsley School Occupation Teacher

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 1250

Date of Receipt  
 03 / 31 / 2014

Transaction ID : SA11Ai-CN40541

Amount of Each Receipt this Period  
 250

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Robert I Reich**

Mailing Address 74 Little Harbor Way

City Deerfield Beach State FL Zip Code 33441

FEC ID number of contributing federal political committee. **C**

Name of Employer Community Loans Of America Occupation Executive

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 1500

Date of Receipt  
 02 / 13 / 2014

Transaction ID : SA11Ai-CN39453

Amount of Each Receipt this Period  
 1500

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Robert I Reich**

Mailing Address 74 Little Harbor Way

City Deerfield Beach State FL Zip Code 33441

FEC ID number of contributing federal political committee. **C**

Name of Employer Community Loans Of America Occupation Executive

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 4000

Date of Receipt  
 02 / 13 / 2014

Transaction ID : SA11Ai-CN39454

Amount of Each Receipt this Period  
 2500

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4250.00

1103  
 0109  
 02715

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

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<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 11c
<input type="checkbox"/> 14	<input type="checkbox"/> 11d
<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Evan Reichard**

Mailing Address 156 Lois Ln

City Berkeley Springs State WV Zip Code 25411

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **315**

Date of Receipt  
 MM / DD / YYYY  
**01 / 27 / 2014**

Transaction ID : **SA11AI-CN39373**

Amount of Each Receipt this Period  
**70**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Evan Reichard**

Mailing Address 156 Lois Ln

City Berkeley Springs State WV Zip Code 25411

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **615**

Date of Receipt  
 MM / DD / YYYY  
**02 / 25 / 2014**

Transaction ID : **SA11AI-CN39865**

Amount of Each Receipt this Period  
**300**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Evan Reichard**

Mailing Address 156 Lois Ln

City Berkeley Springs State WV Zip Code 25411

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **665**

Date of Receipt  
 MM / DD / YYYY  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40783**

Amount of Each Receipt this Period  
**50**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**420.00**

19029192719

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**Dr. John Reifsteck**

Mailing Address **2145 Presidential Dr**

City State Zip Code  
**Charleston WV 25314**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
associated radiologists physician

Receipt For: 2014  
 Primary  General  
 Other (specify) Election Cycle-to-Date **500**

Date of Receipt

**03 / 07 / 2014**

Transaction ID : **SA11AI-CN39956**

Amount of Each Receipt this Period

**50**

Full Name (Last, First, Middle Initial)

**Mr. Robert S Reishman**

Mailing Address **1409 Somerlayton Rd**

City State Zip Code  
**Charleston WV 25314**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
self-employed Executive

Receipt For: 2014  
 Primary  General  
 Other (specify) Election Cycle-to-Date **500**

Date of Receipt

**02 / 13 / 2014**

Transaction ID : **SA11AI-CN39585**

Amount of Each Receipt this Period

**250**

Full Name (Last, First, Middle Initial)

**Dr. Stephen Rerych**

Mailing Address **1142 Ridgewood Dr**

City State Zip Code  
**Point Pleasant WV 25550**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Pleasant Valley Hospital Physician

Receipt For: 2014  
 Primary  General  
 Other (specify) Election Cycle-to-Date **1000**

Date of Receipt

**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40684**

Amount of Each Receipt this Period

**1000**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1300.00**

149 29192717

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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 11a     11b     11c     11d  
 12     13a     13b     14     15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Jill C Rice**

Mailing Address **2045 Natalie Drive**

City **Bridgeport** State **WV** Zip Code **26330**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Dinsmore** Occupation **Partner**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 10 / 2014**

Transaction ID : **SA11Ai-CN40025**

Amount of Each Receipt this Period  
**350**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Ronald E Rice**

Mailing Address **212 Gabriel Dr**

City **Martinsburg** State **WV** Zip Code **25401**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self** Occupation **Real Estate Agent**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 13 / 2014**

Transaction ID : **SA11Ai-CN39628**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Michael Richardson**

Mailing Address **686 Creek Side Lane**

City **Tomado** State **WV** Zip Code **25202**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 25 / 2014**

Transaction ID : **SA11Ai-CN41297**

Amount of Each Receipt this Period  
**500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**950.00**

101010102719



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Frank Risch**

Mailing Address **3540 Colgate Ave**

City **Dallas** State **TX** Zip Code **75225**

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested Occupation Requested

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 15 / 2014**

Transaction ID : **SA11AI-CN39523**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Margaret M Ritchie**

Mailing Address **809 Cypress St**

City **Ravenswood** State **WV** Zip Code **26164**

FEC ID number of contributing federal political committee. **C**

Name of Employer requested Occupation retired

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 22 / 2014**

Transaction ID : **SA11AI-CN40290**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Douglas Roach**

Mailing Address **110 Rosemont Ave N**

City **Martinsburg** State **WV** Zip Code **25401**

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 13 / 2014**

Transaction ID : **SA11AI-CN39681**

Amount of Each Receipt this Period  
**500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1100.00**

0192710

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 198 OF 442  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**Mr. Stephen Roberts**

Mailing Address **1326 Morningside Dr**

City State Zip Code  
**Charleston WV 25314**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**WV Chamber of Commerce Executive**

Receipt For: 2014  
 Primary    General  
 Other (specify)  
Election Cycle-to-Date  
**1000**

Date of Receipt  
MM / DD / YYYY  
**03 / 10 / 2014**

Transaction ID : **SA11AI-CN40010**

Amount of Each Receipt this Period  
**500**

Full Name (Last, First, Middle Initial)  
**Mrs. Lizbeth P Robey**

Mailing Address **1409 Woodmere Dr**

City State Zip Code  
**Charleston WV 25314**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**Housewife Housewife**

Receipt For: 2014  
 Primary    General  
 Other (specify)  
Election Cycle-to-Date  
**200**

Date of Receipt  
MM / DD / YYYY  
**03 / 22 / 2014**

Transaction ID : **SA11AI-CN40428**

Amount of Each Receipt this Period  
**100**

Full Name (Last, First, Middle Initial)  
**Mr. Nelson Robinson**

Mailing Address **2210 Washington Street E**

City State Zip Code  
**Charleston WV 25311**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**Compensation Strategies President**

Receipt For: 2014  
 Primary    General  
 Other (specify)  
Election Cycle-to-Date  
**1000**

Date of Receipt  
MM / DD / YYYY  
**02 / 14 / 2014**

Transaction ID : **SA11AI-CN39718**

Amount of Each Receipt this Period  
**500**

1980192729

**SUBTOTAL** of Receipts This Page (optional).....

**1100.00**

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 199 OF 442

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**Mr. Jerry Roseberry**

Mailing Address PO Box 1298

City State Zip Code  
Huntington WV 25545

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Quantum Properties Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
550

Date of Receipt

MM	DD	YYYY
02	13	2014

Transaction ID : SA11AI-CN41097

Amount of Each Receipt this Period

250
-----

Full Name (Last, First, Middle Initial)

**Mr. Frank Rotruck**

Mailing Address 912 Suncrest Place

City State Zip Code  
Morgantown WV 26505

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Spilman Thomas & Battle PLLC Director Of Enery & Transportation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250

Date of Receipt

MM	DD	YYYY
03	31	2014

Transaction ID : SA11AI-CN41212

Amount of Each Receipt this Period

250
-----

Full Name (Last, First, Middle Initial)

**Ms. Alice S Rowzee**

Mailing Address 170 Potomac Ave

City State Zip Code  
Romney WV 26757

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
Retired retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
300

Date of Receipt

MM	DD	YYYY
03	07	2014

Transaction ID : SA11AI-CN39935

Amount of Each Receipt this Period

100
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191919192721

SUBTOTAL of Receipts This Page (optional).....

600.00
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TOTAL This Period (last page this line number only).....

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**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Ruth H Roy**

Mailing Address **307 Stoup Rd**

City **Mars** State **PA** Zip Code **16046**

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested \_\_\_\_\_ Occupation Requested \_\_\_\_\_

Receipt For: 2014  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **250**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40787**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**William J Rucker Jr.**

Mailing Address **244 Lee Ave**

City **Beckley** State **WV** Zip Code **25801**

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested **Mt. Eagle Inc.** Occupation Requested **Beer Distributor**

Receipt For: 2014  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **1000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**03 / 17 / 2014**

Transaction ID : **SA11AI-CN40032**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Michael Rudge**

Mailing Address **2003 Overy Dr**

City **St Albans** State **WV** Zip Code **25177**

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested **Loop Pharmacy** Occupation Requested **COO**

Receipt For: 2014  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **300**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**03 / 02 / 2014**

Transaction ID : **SA11AI-CN41268**

Amount of Each Receipt this Period  
**100**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1350.00**

19182722

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 201 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Edward W Rugeley Jr**

Mailing Address **1407 Sweetbrier Rd**

City **Charleston** State **WV** Zip Code **25314**

FEC ID number of contributing federal political committee. **C**

Name of Employer **retired** Occupation **retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40892**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Donald Rumsfeld**

Mailing Address **PO Box 1710**

City **El Prado** State **NM** Zip Code **87529**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self** Occupation **Author**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 05 / 2014**

Transaction ID : **SA11AI-CN41082**

Amount of Each Receipt this Period  
**2600**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Thaddeus Rupp**

Mailing Address **2300 Early St N**

City **Alexandria** State **VA** Zip Code **22302**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Targeted Victory** Occupation **Analyst**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **251**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**01 / 27 / 2014**

Transaction ID : **SA11AI-CN41026**

Amount of Each Receipt this Period  
**1**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3601.00**

9192723

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 202 OF 442  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**Mr. Thaddeus Rupp**

Mailing Address **2300 Early St N**

City State Zip Code  
**Alexandria VA 22302**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**Targeted Victory Analyst**

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date **252**

Date of Receipt

**01 / 28 / 2014**

Transaction ID : **SA11AI-CN41031**

Amount of Each Receipt this Period

**1**

**B.**

Full Name (Last, First, Middle Initial)  
**Ms. Kimberly L Sachse**

Mailing Address **1326 Terrace Dr**

City State Zip Code  
**Pittsburgh PA 15228**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**EQT Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date **1000**

Date of Receipt

**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40604**

Amount of Each Receipt this Period

**1000**

**C.**

Full Name (Last, First, Middle Initial)  
**Mrs. Elizabeth F Sagui**

Mailing Address **750 West Lake Cook Road**

City State Zip Code  
**Buffalo Grove IL 60089**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**Housewife Housewife**

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date **5200**

Date of Receipt

**03 / 10 / 2014**

Transaction ID : **SA11AI-CN40060**

Amount of Each Receipt this Period

**5200**

Reattributed from Gary Sagui

**[MEMO ITEM]**  
Reattribution

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1001.00**

19020192724

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: (check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15  
 PAGE 203 OF 442

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Elizabeth F Sagui**

Mailing Address **750 West Lake Cook Road**

City **Buffalo Grove** State **IL** Zip Code **60089**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Housewife** Occupation **Housewife**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 MM / DD / YYYY  
**03 / 10 / 2014**

Transaction ID : **SA11Ai-CN40063**

Amount of Each Receipt this Period  
**-2600**

Redesignated to General 2014

**[MEMO ITEM]**  
Redesignated

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Elizabeth F Sagui**

Mailing Address **750 West Lake Cook Road**

City **Buffalo Grove** State **IL** Zip Code **60089**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Housewife** Occupation **Housewife**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 MM / DD / YYYY  
**03 / 10 / 2014**

Transaction ID : **SA11Ai-CN40064**

Amount of Each Receipt this Period  
**2600**

Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Gary V Sagui**

Mailing Address **920 Romona Rd**

City **Wilmette** State **IL** Zip Code **60091**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Templar Securities** Occupation **Executive**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **10400**

Date of Receipt  
 MM / DD / YYYY  
**02 / 28 / 2014**

Transaction ID : **SA11Ai-CN39839**

Amount of Each Receipt this Period  
**10400**

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

**10400.00**

14020182725

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 204 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Gary V Sagui**

Mailing Address 920 Romona Rd

City Wilmette State IL Zip Code 60091

FEC ID number of contributing federal political committee. **C**

Name of Employer Templar Securities Occupation Executive

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 5200

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 10 / 2014

Transaction ID : SA11AI-CN40059

Amount of Each Receipt this Period  
 -5200

Reattributed to Elizabeth Sagui

**[MEMO ITEM]**  
Reattributed

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Gary V Sagui**

Mailing Address 920 Romona Rd

City Wilmette State IL Zip Code 60091

FEC ID number of contributing federal political committee. **C**

Name of Employer Templar Securities Occupation Executive

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 2600

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 10 / 2014

Transaction ID : SA11AI-CN40061

Amount of Each Receipt this Period  
 -2600

Redesignated to General 2014

**[MEMO ITEM]**  
Redesignated

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Gary V Sagui**

Mailing Address 920 Romona Rd

City Wilmette State IL Zip Code 60091

FEC ID number of contributing federal political committee. **C**

Name of Employer Templar Securities Occupation Executive

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 5200

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 10 / 2014

Transaction ID : SA11AI-CN40062

Amount of Each Receipt this Period  
 2600

Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00

1520182726



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 205 OF 442  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Hossein Sakhai**

Mailing Address **3006 Staunton Rd**

City **Huntington** State **WV** Zip Code **25702**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self-employed** Occupation **Physician**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 07 / 2014**

Transaction ID : **SA11Ai-CN39959**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Fleary P Samples**

Mailing Address **1014 Shawnee Trl**

City **Elkview** State **WV** Zip Code **25071**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 19 / 2014**

Transaction ID : **SA11Ai-CN40174**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**John Sang**

Mailing Address **2015 Mount Vernon Ave**

City **Point Pleasant** State **WV** Zip Code **25550**

FEC ID number of contributing federal political committee. **C**

Name of Employer **self-employed** Occupation **Car Dealer**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 13 / 2014**

Transaction ID : **SA11Ai-CN39592**

Amount of Each Receipt this Period  
**500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**700.00**

0192727

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 206 OF 442  
 (check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. John Sanson**

Mailing Address **PO Box 53**

City **Eleanor** State **WV** Zip Code **25070**

FEC ID number of contributing federal political committee. **C**

Name of Employer **retired** Occupation **retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt **03 / 07 / 2014**

Transaction ID : **SA11Ai-CN39951**

Amount of Each Receipt this Period **150**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Douglas B. Sayre**

Mailing Address **138 Jordan Ln**

City **Daniels** State **WV** Zip Code **25832**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Rock And Coal Construction Inc.** Occupation **Executive**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt **02 / 25 / 2014**

Transaction ID : **SA11Ai-CN39872**

Amount of Each Receipt this Period **500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Douglas B. Sayre**

Mailing Address **138 Jordan Ln**

City **Daniels** State **WV** Zip Code **25832**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Rock And Coal Construction Inc.** Occupation **Executive**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt **03 / 31 / 2014**

Transaction ID : **SA11Ai-CN40746**

Amount of Each Receipt this Period **500**

**SUBTOTAL** of Receipts This Page (optional)..... **1150.00**

**TOTAL** This Period (last page this line number only).....

00000192729

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 207 OF 442

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**Mr. David E Schlosser Jr**

Mailing Address **207 Warwick Dr**

City State Zip Code  
**Pittsburgh PA 15241**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**EQT Engineer**

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **1000**

Date of Receipt

**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40606**

Amount of Each Receipt this Period

**1000**

Full Name (Last, First, Middle Initial)  
**Mr. Steven T Schlotterbeck**

Mailing Address **5640 N Montour Rd**

City State Zip Code  
**Gibsonia PA 15044**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**EQT Executive Vice President**

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **1000**

Date of Receipt

**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40631**

Amount of Each Receipt this Period

**1000**

Full Name (Last, First, Middle Initial)  
**Mrs. Margaret T Schmidt**

Mailing Address **HC 40 Box 30D**

City State Zip Code  
**Lewisburg WV 24901**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**self-employed businesswoman**

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **300**

Date of Receipt

**02 / 14 / 2014**

Transaction ID : **SA11AI-CN39793**

Amount of Each Receipt this Period

**200**

14029192729

**SUBTOTAL** of Receipts This Page (optional).....

**2200.00**

**TOTAL** This Period (last page this line number only).....

**2200.00**



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 209 OF 442

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**Mychal Schulz**

Mailing Address **460 Forest Cir**

City State Zip Code  
**South Charleston WV 25303**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**Dinsmore Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date **750**

Date of Receipt

**03 / 10 / 2014**

Transaction ID : **SA11AI-CN39998**

Amount of Each Receipt this Period

**500**

Full Name (Last, First, Middle Initial)  
**Lynn Schusterman**

Mailing Address **PO Box 699**

City State Zip Code  
**Tulsa OK 74101**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**Self Employed Philanthropy**

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date **1000**

Date of Receipt

**02 / 15 / 2014**

Transaction ID : **SA11AI-CN39524**

Amount of Each Receipt this Period

**1000**

Full Name (Last, First, Middle Initial)  
**Stacy Schusterman**

Mailing Address **PO Box 699**

City State Zip Code  
**Tulsa OK 74101**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**Samson Energy Company LLC Chairman & CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date **1000**

Date of Receipt

**02 / 15 / 2014**

Transaction ID : **SA11AI-CN39525**

Amount of Each Receipt this Period

**1000**

11092731

**SUBTOTAL** of Receipts This Page (optional).....

**2500.00**

**TOTAL** This Period (last page this line number only).....

**2500.00**

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 210 OF 442  
 (check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Aland D Schwartz**

Mailing Address **330 Madison Avenue**

City **New York** State **NY** Zip Code **10017**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Guggenheim Partners** Occupation **Executive Chairman**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
**03 / 18 / 2014**

Transaction ID : **SA11Ai-CN40074**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Nick Seremetis**

Mailing Address **208 Prospect St**

City **Morgantown** State **WV** Zip Code **26505**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Spruce Street Apartments** Occupation **Manager/organizer**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
**03 / 19 / 2014**

Transaction ID : **SA11Ai-CN40219**

Amount of Each Receipt this Period  
**50**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Kathleen M Severino**

Mailing Address **680 Strawberry Hill Rd**

City **Concord** State **MA** Zip Code **01742**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
**01 / 22 / 2014**

Transaction ID : **SA11Ai-CN39336**

Amount of Each Receipt this Period  
**2600**  
 Reattributed from Paul Severino

**[MEMO ITEM]**  
 Reattribution

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1050.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 211 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Paul J Severino**

Mailing Address **680 Strawberry Hill Rd**

City **Concord** State **MA** Zip Code **01742**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**01 / 22 / 2014**

Transaction ID : **SA11AI-CN39333**

Amount of Each Receipt this Period  
**5200**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Paul J Severino**

Mailing Address **680 Strawberry Hill Rd**

City **Concord** State **MA** Zip Code **01742**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**01 / 22 / 2014**

Transaction ID : **SA11AI-CN39335**

Amount of Each Receipt this Period  
**-2600**

Reattributed to Kathleen Severino

**[MEMO ITEM]**  
Reattributed

**C.** Full Name (Last, First, Middle Initial)  
**Mr H G Shaffer**

Mailing Address **131 Greystone Dr**

City **Beaver** State **WV** Zip Code **25813-9145**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Shaffer and Shaffer** Occupation **Attorney**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**03 / 22 / 2014**

Transaction ID : **SA11AI-CN40285**

Amount of Each Receipt this Period  
**100**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**5300.00**

1103101927

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**Dr. Michael Shahan**

Mailing Address **PO Box 127**

City **Bramwell** State **WV** Zip Code **24715**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Professional Imaging Inc.** Occupation **Physician**

Receipt For: 2014  
 Primary  General  
 Other (specify) Election Cycle-to-Date **200**

Date of Receipt

**03** / **22** / **2014**

Transaction ID : **SA11AI-CN40463**

Amount of Each Receipt this Period

**100**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Terrance Shallenberger Jr**

Mailing Address **195 Enterprise Ln**

City **Connellsville** State **PA** Zip Code **15425**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Shallenberger Construction** Occupation **CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify) Election Cycle-to-Date **2000**

Date of Receipt

**03** / **31** / **2014**

Transaction ID : **SA11AI-CN40627**

Amount of Each Receipt this Period

**2000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Randy M Shayler**

Mailing Address **150 School St**

City **Wellsville** State **NY** Zip Code **14895**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Otis Eastern Service LLC** Occupation **Director Resource Management**

Receipt For: 2014  
 Primary  General  
 Other (specify) Election Cycle-to-Date **2600**

Date of Receipt

**03** / **31** / **2014**

Transaction ID : **SA11AI-CN40658**

Amount of Each Receipt this Period

**2600**

**SUBTOTAL** of Receipts This Page (optional).....

**4700.00**

**TOTAL** This Period (last page this line number only).....

**4700.00**



**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 213 OF 442  
 (check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Erie Sheets**

Mailing Address **768 Leeson Run**

City **Greenwood** State **WV** Zip Code **26415**

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested \_\_\_\_\_ Occupation Requested \_\_\_\_\_

Receipt For: 2014  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **200**

Date of Receipt  
**03 / 18 / 2014**

Transaction ID : **SA11AI-CN40129**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Erie D Sheets**

Mailing Address **RR 1 Box 514**

City **Pennsboro** State **WV** Zip Code **26415**

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested \_\_\_\_\_ Occupation Requested \_\_\_\_\_

Receipt For: 2014  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **200**

Date of Receipt  
**02 / 14 / 2014**

Transaction ID : **SA11AI-CN39798**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Suratkal Shenoy**

Mailing Address **PO Box 929**

City **Keyser** State **WV** Zip Code **26726**

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested **self-employed** Occupation Requested **Physician**

Receipt For: 2014  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **750**

Date of Receipt  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40655**

Amount of Each Receipt this Period  
**250**

**16929182735**

**11** SUBTOTAL of Receipts This Page (optional).....

**11** TOTAL This Period (last page this line number only).....

**450.00**

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 214 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Tom Sheppard**

Mailing Address **116 Evergreen Pl**

City **Bristol** State **TN** Zip Code **37620**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Tranco Services Inc.** Occupation **President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 MM / DD / YYYY  
**02 / 28 / 2014**

Transaction ID : **SA11AI-CN41217**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. P. Dwight Sherman**

Mailing Address **2101 Christian Ln Apt 8s**

City **Johnson City** State **TN** Zip Code **37601-3254**

FEC ID number of contributing federal political committee. **C**

Name of Employer **retired** Occupation **retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt  
 MM / DD / YYYY  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40794**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Robert Sherman**

Mailing Address **PO Box 273**

City **Oxford** State **OH** Zip Code **45056-0273**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt  
 MM / DD / YYYY  
**02 / 13 / 2014**

Transaction ID : **SA11AI-CN39701**

Amount of Each Receipt this Period  
**100**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**300.00**

14929182736

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 215 OF 442</span>
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 11c
<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Stephen C Sherrill**

Mailing Address **765 Park Ave**  
**Apt 48**

City **New York** State **NY** Zip Code **10021**

FEC ID number of contributing federal political committee.

Name of Employer **Bruckmann Rossem Sherrill** Occupation **Private Equity**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
MM / DD / YYYY  
 /  /

Transaction ID : **SA11AI-CN40762**

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Debby Shondrick**

Mailing Address **86 27th St**

City **Wheeling** State **WV** Zip Code **26003**

FEC ID number of contributing federal political committee.

Name of Employer **Self** Occupation **Veterinarian**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
MM / DD / YYYY  
 /  /

Transaction ID : **SA11AI-CN39487**

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**Mr. David Terrence Shorr**

Mailing Address **PO Box 1068**

City **Charleston** State **WV** Zip Code **25324**

FEC ID number of contributing federal political committee.

Name of Employer **Cabelas** Occupation **Cashier**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
MM / DD / YYYY  
 /  /

Transaction ID : **SA11AI-CN40996**

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

14020192737

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 216 OF 442  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**Mr. Howard Shouffler**

Mailing Address 213 Morton Grove Rd

City State Zip Code  
Berkeley Springs WV 25411

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify) Election Cycle-to-Date 220

Date of Receipt

MM / DD / YYYY  
03 / 26 / 2014

Transaction ID : SA11AI-CN41277

Amount of Each Receipt this Period

25

**B.**

Full Name (Last, First, Middle Initial)  
**Mr. Howard Shouffler**

Mailing Address 213 Morton Grove Rd

City State Zip Code  
Berkeley Springs WV 25411

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify) Election Cycle-to-Date 245

Date of Receipt

MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : SA11AI-CN41138

Amount of Each Receipt this Period

25

**C.**

Full Name (Last, First, Middle Initial)  
**Allan Shulkin**

Mailing Address 7777 Fercal Ln

City State Zip Code  
Dallas TX 75230

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation  
A N Shulkin MD Physician

Receipt For: 2014  
 Primary  General  
 Other (specify) Election Cycle-to-Date 1000

Date of Receipt

MM / DD / YYYY  
02 / 15 / 2014

Transaction ID : SA11AI-CN39526

Amount of Each Receipt this Period

1000

**SUBTOTAL** of Receipts This Page (optional).....

1050.00

**TOTAL** This Period (last page this line number only).....

182799

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 217 OF 442  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Dennis R Shumaker**

Mailing Address 701 Beech St

City Grafton State WV Zip Code 26354-1807

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation  
W.V.D.O.T./D.O.H./Const. Dr Supervisor/Inspector

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 200

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
03 / 31 / 2014

Transaction ID : SA11AI-CN40608

Amount of Each Receipt this Period  
100

**B.** Full Name (Last, First, Middle Initial)  
**Dr. Stephen Shy**

Mailing Address 3174 Route 75

City Huntington State WV Zip Code 25704

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation  
Ohio Valley Physicians Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1800

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
01 / 27 / 2014

Transaction ID : SA11AI-CN41029

Amount of Each Receipt this Period  
100

**C.** Full Name (Last, First, Middle Initial)  
**Dr. Stephen Shy**

Mailing Address 3174 Route 75

City Huntington State WV Zip Code 25704

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation  
Ohio Valley Physicians Physician

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1900

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
02 / 25 / 2014

Transaction ID : SA11AI-CN41113

Amount of Each Receipt this Period  
100

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

300.00

14020192739

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 218 OF 442

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**Dr. Stephen Shy**

Mailing Address **3174 Route 75**

City **Huntington** State **WV** Zip Code **25704**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Ohio Valley Physicians** Occupation **Physician**

Receipt For: 2014  
 Primary  General  
 Other (specify) Election Cycle-to-Date **2000**

Date of Receipt

**03 / 31 / 2014**

Transaction ID : **SA11AI-CN41266**

Amount of Each Receipt this Period

**100**

**B.** Full Name (Last, First, Middle Initial)  
**Andrew Sieg**

Mailing Address **269 Round Hill Rd**

City **Greenwich** State **CT** Zip Code **06831**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CitiGroup** Occupation **Director**

Receipt For: 2014  
 Primary  General  
 Other (specify) Election Cycle-to-Date **5200**

Date of Receipt

**03 / 26 / 2014**

Transaction ID : **SA11AI-CN40489**

Amount of Each Receipt this Period

**5200**

**C.** Full Name (Last, First, Middle Initial)  
**Andrew Sieg**

Mailing Address **269 Round Hill Rd**

City **Greenwich** State **CT** Zip Code **06831**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CitiGroup** Occupation **Director**

Receipt For: 2014  
 Primary  General  
 Other (specify) Election Cycle-to-Date **2600**

Date of Receipt

**03 / 27 / 2014**

Transaction ID : **SA11AI-CN40490**

Amount of Each Receipt this Period

**-2600**

Redesignated to General 2014

**[MEMO ITEM]**  
Redesignated

**SUBTOTAL** of Receipts This Page (optional).....

**5300.00**

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 219 OF 442	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Andrew Sieg**

Mailing Address **269 Round Hill Rd**

City **Greenwich** State **CT** Zip Code **06831**

FEC ID number of contributing federal political committee. **C**

Name of Employer **CitiGroup** Occupation **Director**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 27 / 2014**

Transaction ID : **SA11AI-CN40491**

Amount of Each Receipt this Period  
**2600**

Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Harry Siegel**

Mailing Address **1643 Vineyard Rd**

City **Falling Waters** State **WV** Zip Code **25419**

FEC ID number of contributing federal political committee. **C**

Name of Employer **self-employed** Occupation **businessman**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN41141**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Michael Simonds**

Mailing Address **20 Nevada Ave**

City **Long Beach** State **NY** Zip Code **11561**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Bank of America/Merrill Lynch** Occupation **Complex Director**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 27 / 2014**

Transaction ID : **SA11AI-CN40487**

Amount of Each Receipt this Period  
**1000**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1100.00**

14929192741

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 220 OF 442

(check only one)

11a     11b     11c     11d  
 12     13a     13b     14     15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**Marion Sinclair**

Mailing Address **1204 Colonial Way**

City State Zip Code  
**Charleston WV 25314**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**retired retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date **250**

Date of Receipt

/  /   
**02 / 25 / 2014**

Transaction ID : **SA11AI-CN39897**

Amount of Each Receipt this Period

**250**

Full Name (Last, First, Middle Initial)  
**Mr Marvin R. Sine**

Mailing Address **HC 71 Box 91.**

City State Zip Code  
**Capon Bridge WV 26711**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**Retired Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date **550**

Date of Receipt

/  /   
**02 / 14 / 2014**

Transaction ID : **SA11AI-CN39797**

Amount of Each Receipt this Period

**75**

Full Name (Last, First, Middle Initial)  
**Mr Marvin R. Sine**

Mailing Address **HC 71 Box 91.**

City State Zip Code  
**Capon Bridge WV 26711**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**Retired Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)  
 Election Cycle-to-Date **625**

Date of Receipt

/  /   
**03 / 22 / 2014**

Transaction ID : **SA11AI-CN40320**

Amount of Each Receipt this Period

**75**

1920192742

**SUBTOTAL** of Receipts This Page (optional).....

**400.00**

**TOTAL** This Period (last page this line number only).....

**400.00**



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 221 OF 442

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**Ms. Jennifer Sirk**

Mailing Address **5650 Ivydale Rd**

City State Zip Code  
**Clay WV 25043**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**Retired Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date **300**

Date of Receipt

**MM** / **DD** / **YYYY**  
**02** / **08** / **2014**

Transaction ID : **SA11AI-CN41086**

Amount of Each Receipt this Period

**100**

Full Name (Last, First, Middle Initial)  
**Mr. James D Sizemore**

Mailing Address **4 Cherokee Trl.**

City State Zip Code  
**Elkview WV 25071**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**retired retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date **450**

Date of Receipt

**MM** / **DD** / **YYYY**  
**03** / **31** / **2014**

Transaction ID : **SA11AI-CN40923**

Amount of Each Receipt this Period

**100**

Full Name (Last, First, Middle Initial)  
**Dr. Kimberly L Skaff**

Mailing Address **1879 Loudon Heights Rd**

City State Zip Code  
**Charleston WV 25314**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**self-employed Physician**

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date **1000**

Date of Receipt

**MM** / **DD** / **YYYY**  
**03** / **31** / **2014**

Transaction ID : **SA11AI-CN40710**

Amount of Each Receipt this Period

**500**

**SUBTOTAL** of Receipts This Page (optional).....

**700.00**

**TOTAL** This Period (last page this line number only).....

**700.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 222 OF 442

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Paul Alex Skaff**

Mailing Address **28 Norwood Rd**

City **Charleston** State **WV** Zip Code **25314**

FEC ID number of contributing federal political committee. **C**

Name of Employer **General Anesthesia Services** Occupation **Physician**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt **03 / 10 / 2014**

Transaction ID : **SA11AI-CN39993**

Amount of Each Receipt this Period **500**

**B.** Full Name (Last, First, Middle Initial)  
**Shawn Smeallie**

Mailing Address **1310 Bishop Ln**

City **Alexandria** State **VA** Zip Code **22302**

FEC ID number of contributing federal political committee. **C**

Name of Employer **American Continental Group** Occupation **Consultant**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt **03 / 12 / 2014**

Transaction ID : **SA11AI-CN41305**

Amount of Each Receipt this Period **1000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. David M Smick**

Mailing Address **220 I St NE # 200**

City **Washignton** State **DC** Zip Code **20002**

FEC ID number of contributing federal political committee. **C**

Name of Employer **JSI** Occupation **Fiance/Publishing**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt **03 / 18 / 2014**

Transaction ID : **SA11AI-CN40071**

Amount of Each Receipt this Period **2600**

14020182744

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**4100.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 223 OF 442
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Vickie Smick**

Mailing Address **220 I St NE**  
**# 200**

City **Washington** State **DC** Zip Code **20002**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Housewife** Occupation **Housewife**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2600**

Date of Receipt  
MM / DD / YYYY  
**03 / 18 / 2014**

Transaction ID : **SA11AI-CN40072**

Amount of Each Receipt this Period  
**2600**

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Barbara A Smith**

Mailing Address **4 Rae Pl**

City **Charleston** State **WV** Zip Code **25314**

FEC ID number of contributing federal political committee. **C**

Name of Employer **retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt  
MM / DD / YYYY  
**03 / 19 / 2014**

Transaction ID : **SA11AI-CN40218**

Amount of Each Receipt this Period  
**200**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Carl O. Smith**

Mailing Address **12 Red Oak Ln**

City **Moorefield** State **WV** Zip Code **26836**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**300**

Date of Receipt  
MM / DD / YYYY  
**02 / 14 / 2014**

Transaction ID : **SA11AI-CN39808**

Amount of Each Receipt this Period  
**100**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2900.00**

14920192745

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

11a  11b  11c  11d  15  
 12  13a  13b  14

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**Mr. Carl O. Smith**

Mailing Address **12 Red Oak Ln**

City State Zip Code  
**Moorefield WV 26836**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**Retired Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify) Election Cycle-to-Date **400**

Date of Receipt

**03 / 07 / 2014**

Transaction ID : **SA11AI-CN39939**

Amount of Each Receipt this Period

**100**

Full Name (Last, First, Middle Initial)  
**Mr. Carl E Smith**

Mailing Address **1045 Saint Ives Dr**

City State Zip Code  
**Hurricane WV 25526**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**Retired Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify) Election Cycle-to-Date **200**

Date of Receipt

**03 / 18 / 2014**

Transaction ID : **SA11Ai-CN40087**

Amount of Each Receipt this Period

**50**

Full Name (Last, First, Middle Initial)  
**Mr. Charles Keith Smith**

Mailing Address **471 Riverbend Blvd**

City State Zip Code  
**Saint Albans WV 25177**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**EXPN Consultant**

Receipt For: 2014  
 Primary  General  
 Other (specify) Election Cycle-to-Date **250**

Date of Receipt

**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40687**

Amount of Each Receipt this Period

**250**

**SUBTOTAL** of Receipts This Page (optional).....

**400.00**

**TOTAL** This Period (last page this line number only).....

**400.00**

10010182746

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 225 OF 442	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Hunter Smith**

Mailing Address **PO Box 204**

City **Talcott** State **WV** Zip Code **24981-0204**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Salomon Smith Barney Inc** Occupation **financial consultant**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
MM / DD / YYYY  
**02 / 13 / 2014**

Transaction ID : **SA11Ai-CN39682**

Amount of Each Receipt this Period  
**200**

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Judith Smith**

Mailing Address **325 53rd St E**

City **New York** State **NY** Zip Code **10022**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Homemaker** Occupation **Homemaker**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt  
MM / DD / YYYY  
**03 / 22 / 2014**

Transaction ID : **SA11Ai-CN40403**

Amount of Each Receipt this Period  
**2600**

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Judith Smith**

Mailing Address **325 53rd St E**

City **New York** State **NY** Zip Code **10022**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Homemaker** Occupation **Homemaker**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5600**

Date of Receipt  
MM / DD / YYYY  
**03 / 22 / 2014**

Transaction ID : **SA11Ai-CN40404**

Amount of Each Receipt this Period  
**2600**

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

**5400.00**

192747

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 226 OF 442  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Richard D Smith**

Mailing Address **29 Brittany Woods Rd**

City **Charleston** State **WV** Zip Code **25314**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self Employed** Occupation **Dentist**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt  
**03 / 10 / 2014**

Transaction ID : **SA11AI-CN40020**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Kennis F Snyder**

Mailing Address **PO Box 1950**

City **Romney** State **WV** Zip Code **26757**

FEC ID number of contributing federal political committee. **C**

Name of Employer **KF Snyder & Associates** Occupation **Land Surveyor**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
**02 / 14 / 2014**

Transaction ID : **SA11AI-CN39780**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Kennis F Snyder**

Mailing Address **PO Box 1950**

City **Romney** State **WV** Zip Code **26757**

FEC ID number of contributing federal political committee. **C**

Name of Employer **KF Snyder & Associates** Occupation **Land Surveyor**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
**03 / 22 / 2014**

Transaction ID : **SA11AI-CN40402**

Amount of Each Receipt this Period  
**100**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**700.00**

1020102740

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 227 OF 442	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Carol L Solich**

Mailing Address **4073 Iris Ct E**

City **Greenwood Village** State **CO** Zip Code **80121**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Four Point Energy LLC** Occupation **President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 12 / 2014**

Transaction ID : **SA11AI-CN39408**

Amount of Each Receipt this Period  
**2600**

Reattributed from **George Solich**

**[MEMO ITEM]**  
Reattribution

**B.** Full Name (Last, First, Middle Initial)  
**Mr. George E Solich**

Mailing Address **4073 Iris Ct E**

City **Greenwood Village** State **CO** Zip Code **80121**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Four Point Energy LLC** Occupation **CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 06 / 2014**

Transaction ID : **SA11AI-CN39399**

Amount of Each Receipt this Period  
**5200**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. George E Solich**

Mailing Address **4073 Iris Ct E**

City **Greenwood Village** State **CO** Zip Code **80121**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Four Point Energy LLC** Occupation **CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 12 / 2014**

Transaction ID : **SA11AI-CN39407**

Amount of Each Receipt this Period  
**-2600**

Reattributed to **Carol Solich**

**[MEMO ITEM]**  
Reattributed

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

**5200.00**

20182749

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 228 OF 442 (check only one) <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. Elizabeth Spangler**

Mailing Address **839 Gordon Dr**

City **Charleston** State **WV** Zip Code **25303**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Carelink** Occupation **Director**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2100**

Date of Receipt  
 MM / DD / YYYY  
**03 / 31 / 2014**

Transaction ID : **SA11Ai-CN40752**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Jerry I Speyer**

Mailing Address **45 Rockefeller Plaza**  
**7th Floor**

City **New York** State **NY** Zip Code **10111**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Tishman Speyer** Occupation **Real Estate**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 MM / DD / YYYY  
**03 / 31 / 2014**

Transaction ID : **SA11Ai-CN40760**

Amount of Each Receipt this Period  
**2600**

**C.** Full Name (Last, First, Middle Initial)  
**Susan Stafford**

Mailing Address **1227 Lowell Rd**

City **Concord** State **MA** Zip Code **01742**

FEC ID number of contributing federal political committee. **C**

Name of Employer **University of Mass. Hospital** Occupation **Physician**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 MM / DD / YYYY  
**01 / 28 / 2014**

Transaction ID : **SA11Ai-CN41032**

Amount of Each Receipt this Period  
**500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**4100.00**

14020192750



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 229 OF 442
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Alan Stagg**

Mailing Address 106 Beechvale Dr

City Charleston State WV Zip Code 25313

FEC ID number of contributing federal political committee.

Name of Employer Stagg & Associates Occupation Geologist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
 03 / 31 / 2014

Transaction ID : SA11AI-CN41139

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Charlotte Stallard**

Mailing Address 16 Foxchase Rd

City Charleston State WV Zip Code 25304

FEC ID number of contributing federal political committee.

Name of Employer housewife Occupation Housewife

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
 02 / 13 / 2014

Transaction ID : SA11AI-CN39562

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**Mr. James S Stalnaker Jr**

Mailing Address PO Box 883

City San Antonio State FL Zip Code 33576

FEC ID number of contributing federal political committee.

Name of Employer Florida Traditions Bank Occupation Banker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
 02 / 13 / 2014

Transaction ID : SA11AI-CN39460

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

15020192751

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 230 OF 442
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Mark Stalnecker**

Mailing Address 11 Carriage Rd

City Greenville State DE Zip Code 19807

FEC ID number of contributing federal political committee.

Name of Employer University Of Delaware Occupation Investment Manager

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
 03 / 31 / 2014

Transaction ID : SA11Ai-CN41158

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Jimmy D Staton**

Mailing Address 4 Cameron Rd

City Clarksburg State WV Zip Code 26301

FEC ID number of contributing federal political committee.

Name of Employer NiSource Inc Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
 02 / 13 / 2014

Transaction ID : SA11Ai-CN39609

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**Heliane Steden**

Mailing Address 269 Round Hill Rd

City Greenwich State CT Zip Code 06831

FEC ID number of contributing federal political committee.

Name of Employer Merrill Lynch Occupation Banker

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
 03 / 31 / 2014

Transaction ID : SA11Ai-CN41345

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

1020192752

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 231 OF 442  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Gwen Steeley**

Mailing Address **PO Box 734**

City **Charles Town** State **WV** Zip Code **25414**

FEC ID number of contributing federal political committee. **C**

Name of Employer **housewife** Occupation **Housewife**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 18 / 2014**

Transaction ID : **SA11AI-CN40079**

Amount of Each Receipt this Period  
**600**

**B.** Full Name (Last, First, Middle Initial)  
**Sheldon Stein**

Mailing Address **9338 Meadowbrook Dr**

City **Dallas** State **TX** Zip Code **75220**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Requested** Occupation **Requested**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 27 / 2014**

Transaction ID : **SA11AI-CN39825**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Warren Stephens**

Mailing Address **111 Center St  
PO Box 3507**

City **Little Rock** State **AR** Zip Code **72203**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Stephens Inc.** Occupation **President & CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 06 / 2014**

Transaction ID : **SA11AI-CN39389**

Amount of Each Receipt this Period  
**2600**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3700.00**

20102753

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 232 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Richard D Stevens**

Mailing Address **65 Castle Pine Ln**

City **South Charleston** State **WV** Zip Code **25309**

FEC ID number of contributing federal political committee. **C**

Name of Employer **WV Pharmacists Assoc & Dental Assoc.** Occupation **Governmental Affairs**

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **750**

Date of Receipt  
 MM / DD / YYYY  
**02 / 14 / 2014**

Transaction ID : **SA11AI-CN39720**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. James Stevenson**

Mailing Address **232 Lebanon St**

City **Morgantown** State **WV** Zip Code **26505**

FEC ID number of contributing federal political committee. **C**

Name of Employer **retired** Occupation **retired**

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 MM / DD / YYYY  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40619**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Robert Stief**

Mailing Address **3637 Pompano Ct**

City **Johns Island** State **SC** Zip Code **29455**

FEC ID number of contributing federal political committee. **C**

Name of Employer **retired** Occupation **retired**

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 MM / DD / YYYY  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40726**

Amount of Each Receipt this Period  
**500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2000.00**

1020102754



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 234 OF 442	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Anna Lou Sturgeon**

Mailing Address 1901 Mount Vernon Ave

City Point Pleasant State WV Zip Code 25550

FEC ID number of contributing federal political committee.  C

Name of Employer housewife Occupation Housewife

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 200

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : SA11Ai-CN40672

Amount of Each Receipt this Period  
200

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Lewis B Subelsky**

Mailing Address 123 Lookout Ridge

City Hedgesville State WV Zip Code 25427

FEC ID number of contributing federal political committee.  C

Name of Employer U.S. Government Occupation Requested

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 250

Date of Receipt  
MM / DD / YYYY  
02 / 13 / 2014

Transaction ID : SA11Ai-CN39513

Amount of Each Receipt this Period  
100

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Linda L. Suson**

Mailing Address 36 Birch Tree Ln

City Charleston State WV Zip Code 25314-2274

FEC ID number of contributing federal political committee.  C

Name of Employer None Occupation Housewife

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 700

Date of Receipt  
MM / DD / YYYY  
03 / 17 / 2014

Transaction ID : SA11Ai-CN40046

Amount of Each Receipt this Period  
200

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

500.00

11020182756

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 235 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Sanjay Swani**

Mailing Address **350 E 79th St**  
**Apt 29A**

City **New York** State **NY** Zip Code **10075**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Welsh Carson** Occupation **Partner**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11Ai-CN41343**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Douglas Tansill**

Mailing Address **1271 Rockrimmon Rd**

City **Stratford** State **CT** Zip Code **06903**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 15 / 2014**

Transaction ID : **SA11Ai-CN39539**

Amount of Each Receipt this Period  
**2000**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Thomas Tatterson Sr**

Mailing Address **176 Castanea Dr**

City **Martinsburg** State **WV** Zip Code **25401-9745**

FEC ID number of contributing federal political committee. **C**

Name of Employer **retired** Occupation **retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **650**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 18 / 2014**

Transaction ID : **SA11Ai-CN40127**

Amount of Each Receipt this Period  
**250**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3250.00**

14020192757

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 236 OF 442						
	(check only one)	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14

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)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Charlotte H Taylor**

Mailing Address 364 Mulberry St

City Morgantown State WV Zip Code 26505

FEC ID number of contributing federal political committee.

Name of Employer housewife Occupation Housewife

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 31 / 2014

Transaction ID : SA11AI-CN40624

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Virginia Tennant**

Mailing Address 301 Bills St

City Saint Marys State WV Zip Code 26170

FEC ID number of contributing federal political committee.

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
02 / 14 / 2014

Transaction ID : SA11AI-CN39744

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Benjamin R Thomas**

Mailing Address 86 Abney Cir

City Charleston State WV Zip Code 25314

FEC ID number of contributing federal political committee.

Name of Employer Bowles Rice McDavid Graff & Love LLP Occupation Attorney

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
M M / D D / Y Y Y Y  
01 / 30 / 2014

Transaction ID : SA11AI-CN41038

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

19 2010 27 59



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 237 OF 442

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Paul Thomas**

Mailing Address **4584 Hileman Rd**

City **Bruceton Mills** State **WV** Zip Code **26525**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Stacy Lynn LLC** Occupation **consultant**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **335**

Date of Receipt  
MM / DD / YYYY  
**03 / 19 / 2014**

Transaction ID : **SA11AI-CN40213**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Roger D Thomas Sr**

Mailing Address **1709 Carol Dr**

City **Marion** State **IL** Zip Code **62959**

FEC ID number of contributing federal political committee. **C**

Name of Employer **American Coal** Occupation **Supervisor**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **325**

Date of Receipt  
MM / DD / YYYY  
**02 / 25 / 2014**

Transaction ID : **SA11AI-CN39894**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Chris Thompson**

Mailing Address **2450 Alameda Ave E  
Unit 17**

City **Denver** State **CO** Zip Code **80209**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **7000**

Date of Receipt  
MM / DD / YYYY  
**02 / 06 / 2014**

Transaction ID : **SA11AI-CN39398**

Amount of Each Receipt this Period  
**7000**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**7200.00**

0102759

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 238 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Chris Thompson**

Mailing Address **2450 Alameda Ave E**  
**Unit 17**

City **Denver** State **CO** Zip Code **80209**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3500**

Date of Receipt  
MM / DD / YYYY  
**02 / 07 / 2014**

Transaction ID : **SA11Ai-CN39413**

Amount of Each Receipt this Period  
**-3500**  
Reattributed to Colleen Thompson

**[MEMO ITEM]**  
Reattributed

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Chris Thompson**

Mailing Address **2450 Alameda Ave E**  
**Unit 17**

City **Denver** State **CO** Zip Code **80209**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
MM / DD / YYYY  
**02 / 07 / 2014**

Transaction ID : **SA11Ai-CN39415**

Amount of Each Receipt this Period  
**-900**  
Redesignated to General 2014

**[MEMO ITEM]**  
Redesignated

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Chris Thompson**

Mailing Address **2450 Alameda Ave E**  
**Unit 17**

City **Denver** State **CO** Zip Code **80209**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3500**

Date of Receipt  
MM / DD / YYYY  
**02 / 07 / 2014**

Transaction ID : **SA11Ai-CN39416**

Amount of Each Receipt this Period  
**900**  
Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

**0.00**

14920192759

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 239 OF 442

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Colleen Thompson**

Mailing Address **2450 Alameda Ave E**  
**Unit 17**

City **Denver** State **CO** Zip Code **80209**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Housewife** Occupation **Housewife**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3500**

Date of Receipt

**02 / 07 / 2014**

Transaction ID : **SA11AI-CN39414**

Amount of Each Receipt this Period

**3500**

Reattributed from **Chris Thompson**

**[MEMO ITEM]**

Reattribution

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Colleen Thompson**

Mailing Address **2450 Alameda Ave E**  
**Unit 17**

City **Denver** State **CO** Zip Code **80209**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Housewife** Occupation **Housewife**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt

**02 / 07 / 2014**

Transaction ID : **SA11AI-CN39417**

Amount of Each Receipt this Period

**-900**

Redesignated to General 2014

**[MEMO ITEM]**

Redesignated

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Colleen Thompson**

Mailing Address **2450 Alameda Ave E**  
**Unit 17**

City **Denver** State **CO** Zip Code **80209**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Housewife** Occupation **Housewife**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3500**

Date of Receipt

**02 / 07 / 2014**

Transaction ID : **SA11AI-CN39418**

Amount of Each Receipt this Period

**900**

Redesignated from Primary 2014

**[MEMO ITEM]**

Redesignation

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**0.00**

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 240 OF 442

(check only one)

11a  11b  11c  11d  12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**Mr. Robert H. Thompson**

Mailing Address **5 Bel Manor Dr**

City State Zip Code  
**Fairmont WV 26554**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**W. S. Thompson Transfer Inc Owner**

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date **500**

Date of Receipt

**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40930**

Amount of Each Receipt this Period

**200**

Full Name (Last, First, Middle Initial)  
**Don Thorn**

Mailing Address **26933 Eckel Rd**

City State Zip Code  
**Perrysburg OH 43551**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**Welded Construction Construction Manager**

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date **500**

Date of Receipt

**03 / 31 / 2014**

Transaction ID : **SA11AI-CN41134**

Amount of Each Receipt this Period

**500**

Full Name (Last, First, Middle Initial)  
**Wally Thornhill**

Mailing Address **PO Box 340**

City State Zip Code  
**Pecks Mill WV 22547**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**Thornhill Chevrolet Car Dealer**

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date **1000**

Date of Receipt

**02 / 14 / 2014**

Transaction ID : **SA11AI-CN39719**

Amount of Each Receipt this Period

**1000**

**SUBTOTAL** of Receipts This Page (optional).....

**1700.00**

**TOTAL** This Period (last page this line number only).....

**1700.00**

1029192792

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 241 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. H. Wood Thrasher**

Mailing Address 30 Columbia Blvd

City Clarksburg      State WV      Zip Code 26301

FEC ID number of contributing federal political committee.

Name of Employer Thrasher Engineering Inc      Occupation President

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014

Transaction ID : SA11AI-CN40598

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Andre P Tillman Jr**

Mailing Address 1131 Ridgefield Dr

City Bishop      State GA      Zip Code 30621

FEC ID number of contributing federal political committee.

Name of Employer Self Employed      Occupation Sales & Marketing Consultant

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 18 / 2014

Transaction ID : SA11AI-CN40073

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Edward S. Tincher**

Mailing Address 195 Edgefield Dr

City Milton      State WV      Zip Code 25541-9346

FEC ID number of contributing federal political committee.

Name of Employer Self Employed      Occupation Engineer

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 13 / 2014

Transaction ID : SA11AI-CN39593

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

14029192703

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 242 OF 442	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Robert Tissue**

Mailing Address **Post Office Box 1822**

City **Lewisburg** State **WV** Zip Code **24901**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Summit Financial Group** Occupation **Vice President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 28 / 2014**

Transaction ID : **SA11AI-CN41221**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Victoria Toensing**

Mailing Address **5807 Hillborne Way**

City **Chevy Chase** State **MD** Zip Code **20815**

FEC ID number of contributing federal political committee. **C**

Name of Employer **diGenova & Toensing** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40868**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Robert G Tointon**

Mailing Address **6305 26th St W**

City **Greeley** State **CO** Zip Code **80634**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Phelps-Tointon Inc.** Occupation **Executive**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 06 / 2014**

Transaction ID : **SA11AI-CN39397**

Amount of Each Receipt this Period  
**2000**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2600.00**

20182764

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 243 OF 442
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Drexel Tomlinson**

Mailing Address **14 Kenna Dr**

City **Charleston** State **WV** Zip Code **25309**

FEC ID number of contributing federal political committee. **C**

Name of Employer **retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
M / M / Y  
**01 / 27 / 2014**

Transaction ID : **SA11Ai-CN39361**

Amount of Each Receipt this Period  
**200**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Roger F Topping**

Mailing Address **PO Box 5311**

City **Princeton** State **WV** Zip Code **24740**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Princeton Health Care Center** Occupation **Administrator**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2100**

Date of Receipt  
M / M / Y  
**03 / 07 / 2014**

Transaction ID : **SA11Ai-CN39944**

Amount of Each Receipt this Period  
**600**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Charlotte Travis**

Mailing Address **14210 Country Hills Dr**

City **Brighton** State **CO** Zip Code **80601**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Housewife** Occupation **Housewife**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **-2600**

Date of Receipt  
M / M / Y  
**02 / 06 / 2014**

Transaction ID : **SA11Ai-CN39409**

Amount of Each Receipt this Period  
**-2600**  
Redesignated to General 2014

**[MEMO ITEM]**  
Redesignated

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**800.00**

14020102765

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 244 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Charlotte Travis**

Mailing Address 14210 Country Hills Dr

City Brighton State CO Zip Code 80601

FEC ID number of contributing federal political committee. **C**

Name of Employer Housewife Occupation Housewife

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 MM / DD / YYYY  
 02 / 06 / 2014

Transaction ID : SA11Ai-CN39410

Amount of Each Receipt this Period  
 2600

Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Charlotte Travis**

Mailing Address 14210 Country Hills Dr

City Brighton State CO Zip Code 80601

FEC ID number of contributing federal political committee. **C**

Name of Employer Housewife Occupation Housewife

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 MM / DD / YYYY  
 02 / 06 / 2014

Transaction ID : SA11Ai-CN39396

Amount of Each Receipt this Period  
 5200

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Timothy J Travis**

Mailing Address 14210 Country Hills Dr

City Brighton State CO Zip Code 80601

FEC ID number of contributing federal political committee. **C**

Name of Employer Batem Metal Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 MM / DD / YYYY  
 02 / 06 / 2014

Transaction ID : SA11Ai-CN39395

Amount of Each Receipt this Period  
 5200

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

10400.00

14929182766



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 245 OF 442
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Timothy J Travis**

Mailing Address 14210 Country Hills Dr

City Brighton State CO Zip Code 80601

FEC ID number of contributing federal political committee. **C**

Name of Employer Batem Metal Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2600

Date of Receipt  
 MM / DD / YYYY  
 02 / 07 / 2014

Transaction ID : SA11AI-CN39411

Amount of Each Receipt this Period  
 -2600  
 Redesignated to General 2014

**[MEMO ITEM]**  
Redesignated

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Timothy J Travis**

Mailing Address 14210 Country Hills Dr

City Brighton State CO Zip Code 80601

FEC ID number of contributing federal political committee. **C**

Name of Employer Batem Metal Occupation Executive

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5200

Date of Receipt  
 MM / DD / YYYY  
 02 / 07 / 2014

Transaction ID : SA11AI-CN39412

Amount of Each Receipt this Period  
 2600  
 Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Samuel R Tuckwiller**

Mailing Address 220 McElheny Dr

City Lewisburg State WV Zip Code 24901

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Beef Cattle Farmer

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 600

Date of Receipt  
 MM / DD / YYYY  
 02 / 13 / 2014

Transaction ID : SA11AI-CN39483

Amount of Each Receipt this Period  
 500

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

500.00

140219182767

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 246 OF 442

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**Mr. Thomas E Tuft**

Mailing Address **101 Central Park W**

City State Zip Code  
**New York NY 10023**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**Lazard Investment Banker**

Receipt For: 2014  
 Primary  General  
 Other (specify) Election Cycle-to-Date **2600**

Date of Receipt

**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40759**

Amount of Each Receipt this Period

**2600**

Full Name (Last, First, Middle Initial)  
**Ms. Sydney Turnbull**

Mailing Address **655 Whitaker Blvd W**

City State Zip Code  
**Huntington WV 25701**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**Retired Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify) Election Cycle-to-Date **230**

Date of Receipt

**01 / 30 / 2014**

Transaction ID : **SA11AI-CN41044**

Amount of Each Receipt this Period

**100**

Full Name (Last, First, Middle Initial)  
**Ms. Sydney Turnbull**

Mailing Address **655 Whitaker Blvd W**

City State Zip Code  
**Huntington WV 25701**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**Retired Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify) Election Cycle-to-Date **255**

Date of Receipt

**03 / 01 / 2014**

Transaction ID : **SA11AI-CN41259**

Amount of Each Receipt this Period

**25**

**SUBTOTAL** of Receipts This Page (optional) .....

**2725.00**

**TOTAL** This Period (last page this line number only) .....

**2725.00**

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

11a  11b  11c  11d  12  13a  13b  14  15

PAGE 247 OF 442

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Sydney Turnbull**

Mailing Address **655 Whitaker Blvd W**

City **Huntington** State **WV** Zip Code **25701**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **305**

Date of Receipt  
**03 / 06 / 2014**

Transaction ID : **SA11AI-CN41273**

Amount of Each Receipt this Period  
**50**

**B.** Full Name (Last, First, Middle Initial)  
**Mr Ned Turner**

Mailing Address **117 Mobile Ct**

City **Falling Waters** State **WV** Zip Code **25419-4628**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Enervest LTD** Occupation **CFO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1140**

Date of Receipt  
**02 / 14 / 2014**

Transaction ID : **SA11AI-CN39809**

Amount of Each Receipt this Period  
**300**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Bernard P Twigg**

Mailing Address **204 12th St**

City **Glen Dale** State **WV** Zip Code **26038**

FEC ID number of contributing federal political committee. **C**

Name of Employer **WesBanc** Occupation **Banker**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **700**

Date of Receipt  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40548**

Amount of Each Receipt this Period  
**500**

**14** SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

**850.00**

20182769

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 248 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Scott J Ulm**

Mailing Address 10710 Stacumny Dr

City State Zip Code  
Vero Beach FL 32963

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Armour Management Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
MM / DD / YYYY  
01 / 22 / 2014

Transaction ID : SA11AI-CN39332

Amount of Each Receipt this Period

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Scott J Ulm**

Mailing Address 10710 Stacumny Dr

City State Zip Code  
Vero Beach FL 32963

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Armour Management Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
MM / DD / YYYY  
01 / 22 / 2014

Transaction ID : SA11AI-CN39343

Amount of Each Receipt this Period

Reattributed to Pamela Wilton

**[MEMO ITEM]**  
Reattributed

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Scott J Ulm**

Mailing Address 10710 Stacumny Dr

City State Zip Code  
Vero Beach FL 32963

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
Armour Management Partner

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
MM / DD / YYYY  
01 / 23 / 2014

Transaction ID : SA11AI-CN39345

Amount of Each Receipt this Period

Redesignated to General 2014

**[MEMO ITEM]**  
Redesignated

**14929182779**  
SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 249 OF 442

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**Mr. Scott J Ulm**

Mailing Address **10710 Stacumny Dr**

City State Zip Code  
**Vero Beach FL 32963**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**Armour Management Partner**

Receipt For: 2014 Election Cycle-to-Date  
 Primary  General  
 Other (specify) **5100**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y Y
01		23		2014

Transaction ID : **SA11AI-CN39346**

Amount of Each Receipt this Period

<b>2500</b>
-------------

Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

Full Name (Last, First, Middle Initial)  
**Mr. David M. Underwood**

Mailing Address **909 Fannin  
Suite 850**

City State Zip Code  
**Houston TX 77010**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**Wells Fargo financial advisor**

Receipt For: 2014 Election Cycle-to-Date  
 Primary  General  
 Other (specify) **1500**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y Y
03		31		2014

Transaction ID : **SA11AI-CN40600**

Amount of Each Receipt this Period

<b>500</b>
------------

Full Name (Last, First, Middle Initial)  
**Mr. Herbert Underwood**

Mailing Address **600 Kemberry Dr**

City State Zip Code  
**Bridgeport WV 26330**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**Retired Retired**

Receipt For: 2014 Election Cycle-to-Date  
 Primary  General  
 Other (specify) **1000**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y Y
03		17		2014

Transaction ID : **SA11AI-CN40040**

Amount of Each Receipt this Period

<b>500</b>
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1040192771

**SUBTOTAL** of Receipts This Page (optional).....

<b>1000.00</b>
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**TOTAL** This Period (last page this line number only).....

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**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 250 OF 442  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Roberto C Valenzuela**

Mailing Address **PO Box 1387**

City **Dellslow** State **WV** Zip Code **26531**

FEC ID number of contributing federal political committee. **C**

Name of Employer **self-employed** Occupation **Physician**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
**02 / 14 / 2014**

Transaction ID : **SA11Ai-CN39801**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. George Vance**

Mailing Address **112 Pinridge Dr**

City **Beckley** State **WV** Zip Code **26801**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Saber Supply Co Inc.** Occupation **President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1800**

Date of Receipt  
**03 / 07 / 2014**

Transaction ID : **SA11Ai-CN39946**

Amount of Each Receipt this Period  
**800**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Nancy Allen Varlas**

Mailing Address **8 Sandy Ave**

City **Moundsville** State **WV** Zip Code **26041-1020**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1350**

Date of Receipt  
**02 / 13 / 2014**

Transaction ID : **SA11Ai-CN39557**

Amount of Each Receipt this Period  
**400**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1300.00**

1020192772

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 251 OF 442

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**Mr. Leo Vecellio**

Mailing Address **589 Country Rd N**

City State Zip Code  
**Palm Beach FL 33480**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**Retired Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date  
**2000**

Date of Receipt

MM	DD	YYYY
02	13	2014

Transaction ID : **SA11Ai-CN39580**

Amount of Each Receipt this Period

<b>2000</b>
-------------

Full Name (Last, First, Middle Initial)  
**J F Viar**

Mailing Address **7827 Southdown Rd**

City State Zip Code  
**Alexandria VA 22308**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**Retired Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date  
**500**

Date of Receipt

MM	DD	YYYY
02	16	2014

Transaction ID : **SA11Ai-CN39543**

Amount of Each Receipt this Period

<b>500</b>
------------

Full Name (Last, First, Middle Initial)  
**Mrs. Janet S Vineyard**

Mailing Address **114 Summit Ridge Rd**

City State Zip Code  
**Hurricane WV 25526**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**OMEGA Executive Director**

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date  
**2000**

Date of Receipt

MM	DD	YYYY
02	14	2014

Transaction ID : **SA11Ai-CN39724**

Amount of Each Receipt this Period

<b>500</b>
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**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

<b>3000.00</b>
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201302773

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 252 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Martha N Wable**

Mailing Address 109 Chelsea St S

City State Zip Code  
Sistersville WV 26175

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation  
Wable Ford Mercury Inc. Secretary

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
400

Date of Receipt  
MM / DD / YYYY  
03 / 19 / 2014

Transaction ID : SA11AI-CN40167

Amount of Each Receipt this Period  
100

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Mary Beth Wafer**

Mailing Address 923 Bymwyck Rd NE

City State Zip Code  
Atlanta GA 30319

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation  
Salomon Smith Barney Inc Executive

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt  
MM / DD / YYYY  
03 / 22 / 2014

Transaction ID : SA11AI-CN40359

Amount of Each Receipt this Period  
500

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Don A Wagenheim**

Mailing Address 35 Floral Dr

City State Zip Code  
Wheeling WV 26003

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation  
H.E. Neumann Company President

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
2500

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : SA11AI-CN40552

Amount of Each Receipt this Period  
500

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

1100.00

14929192774



**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 253 OF 442

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Don A Wagenheim**

Mailing Address 35 Floral Dr

City: Wheeling State: WV Zip Code: 26003

FEC ID number of contributing federal political committee: **C**

Name of Employer: H.E. Neumann Company Occupation: President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 3500

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : SA11AI-CN40553

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Don A Wagenheim**

Mailing Address 35 Floral Dr

City: Wheeling State: WV Zip Code: 26003

FEC ID number of contributing federal political committee: **C**

Name of Employer: H.E. Neumann Company Occupation: President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2600

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : SA11AI-CN41072

Amount of Each Receipt this Period  
-900

Redesignated to General 2014

**[MEMO ITEM]**  
Redesignated

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Don A Wagenheim**

Mailing Address 35 Floral Dr

City: Wheeling State: WV Zip Code: 26003

FEC ID number of contributing federal political committee: **C**

Name of Employer: H.E. Neumann Company Occupation: President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 3500

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : SA11AI-CN41073

Amount of Each Receipt this Period  
900

Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

**1** SUBTOTAL of Receipts This Page (optional).....

**2** TOTAL This Period (last page this line number only).....

1000.00

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 254 OF 442

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. James P Wagner**

Mailing Address **423 Ridgewood Dr**

City **Point Pleasant** State **WV** Zip Code **25550**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self** Occupation **Physican**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11Ai-CN40669**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Stephen Waldman**

Mailing Address **7729 Yamini Dr**

City **Dallas** State **TX** Zip Code **75230**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Waldman Brothers LLC** Occupation **Insurance Agent**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y Y Y  
**02 / 15 / 2014**

Transaction ID : **SA11Ai-CN39527**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Ann H Walker**

Mailing Address **13 Underwood Rd**

City **Lewisburg** State **WV** Zip Code **24901**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y Y Y  
**03 / 18 / 2014**

Transaction ID : **SA11Ai-CN40102**

Amount of Each Receipt this Period  
**400**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1900.00**

182776

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 255 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Cecil Walker**

Mailing Address 1617 Kirklee Rd

City Charleston State WV Zip Code 25314

FEC ID number of contributing federal political committee.  C

Name of Employer Walker Machinery Occupation Vice President

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5200

Date of Receipt  
 MM / DD / YYYY  
 03 / 22 / 2014

Transaction ID : SA11AI-CN40287

Amount of Each Receipt this Period  
 2600

**B.** Full Name (Last, First, Middle Initial)  
**Mr. James B Wallace**

Mailing Address 475 17th St Ste 1300

City Denver State CO Zip Code 80202

FEC ID number of contributing federal political committee.  C

Name of Employer Self Employed Occupation Self Employed

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2600

Date of Receipt  
 MM / DD / YYYY  
 02 / 06 / 2014

Transaction ID : SA11AI-CN39394

Amount of Each Receipt this Period  
 2600

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Alan S Ward**

Mailing Address 17024 Cadbury Cir Unit 229

City Lewes State DE Zip Code 19958-7051

FEC ID number of contributing federal political committee.  C

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 350

Date of Receipt  
 MM / DD / YYYY  
 02 / 13 / 2014

Transaction ID : SA11AI-CN41095

Amount of Each Receipt this Period  
 100

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

5300.00

14820192777

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 256 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Elizabeth Ann Warner**

Mailing Address **PO Box 129**

City **Ocracoke** State **NC** Zip Code **27960**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Howard's Pub** Occupation **Restaurant**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
**01 / 09 / 2014**

Transaction ID : **SA11AI-CN39386**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Jean M. Warren**

Mailing Address **2410 Grand Cir NW**

City **Oklahoma City** State **OK** Zip Code **73116**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **3000**

Date of Receipt  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40814**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Jean M. Warren**

Mailing Address **2410 Grand Cir NW**

City **Oklahoma City** State **OK** Zip Code **73116**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN41068**

Amount of Each Receipt this Period  
**-400**  
Redesignated to General 2014

**[MEMO ITEM]**  
Redesignated

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

**1500.00**

14020192779

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 257 OF 442

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**Ms. Jean M. Warren**

Mailing Address **2410 Grand Cir NW**

City State Zip Code  
**Oklahoma City OK 73116**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**Retired Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **3000**

Date of Receipt

**03 / 31 / 2014**

Transaction ID : **SA11Ai-CN41069**

Amount of Each Receipt this Period

**400**

Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

Full Name (Last, First, Middle Initial)

**Mr. John R Warsinsky Sr**

Mailing Address **1436 Marshall St**

City State Zip Code  
**Benwood WV 26031-1218**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**Retired Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **200**

Date of Receipt

**02 / 14 / 2014**

Transaction ID : **SA11Ai-CN39736**

Amount of Each Receipt this Period

**50**

Full Name (Last, First, Middle Initial)

**Mr. John R Warsinsky Sr**

Mailing Address **1436 Marshall St**

City State Zip Code  
**Benwood WV 26031-1218**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**Retired Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)  
 Election Cycle-to-Date **250**

Date of Receipt

**03 / 18 / 2014**

Transaction ID : **SA11Ai-CN40126**

Amount of Each Receipt this Period

**50**

0219192779

**SUBTOTAL** of Receipts This Page (optional).....

**100.00**

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 258 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Glen Washington**

Mailing Address **14267 State Rt 243**

City **Chesapeake** State **OH** Zip Code **45619**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Pleasant Valley Hospital** Occupation **CEO**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40682**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. H. B. Wehrle III**

Mailing Address **1622 Louden Heights Rd**

City **Charleston** State **WV** Zip Code **25314**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 M M / D D / Y Y Y Y  
**02 / 28 / 2014**

Transaction ID : **SA11AI-CN39843**

Amount of Each Receipt this Period  
**5200**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. H. B. Wehrle III**

Mailing Address **1622 Louden Heights Rd**

City **Charleston** State **WV** Zip Code **25314**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 03 / 2014**

Transaction ID : **SA11AI-CN39920**

Amount of Each Receipt this Period  
**-2600**  
 Redesignated to General 2014

**[MEMO ITEM]**  
 Redesignated

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**5700.00**

14920192799

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 259 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. H. B. Wehrle III**

Mailing Address 1622 Louden Heights Rd

City Charleston State WV Zip Code 25314

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5200

Date of Receipt  
 03 / 03 / 2014

Transaction ID : SA11Ai-CN39921

Amount of Each Receipt this Period  
 2600

Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Mary Patricia Weiss**

Mailing Address 5209 Westwood Drive

City Bethesda State MD Zip Code 20816

FEC ID number of contributing federal political committee. **C**

Name of Employer Dentons US LLP Occupation Principal

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 500

Date of Receipt  
 03 / 20 / 2014

Transaction ID : SA11Ai-CN40270

Amount of Each Receipt this Period  
 500

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Carl E Welch**

Mailing Address 1403 Bedford Rd

City Charleston State WV Zip Code 25314

FEC ID number of contributing federal political committee. **C**

Name of Employer Retired Occupation Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 400

Date of Receipt  
 02 / 13 / 2014

Transaction ID : SA11Ai-CN39590

Amount of Each Receipt this Period  
 100

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

600.00

11030192701

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 260 OF 442
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Linda Wellings**

Mailing Address **38 Old Pritt Rd**

City **Buckhannon** State **WV** Zip Code **26201**

FEC ID number of contributing federal political committee. **C**

Name of Employer **MPL Corporation** Occupation **President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 13 / 2014**

Transaction ID : **SA11AI-CN39589**

Amount of Each Receipt this Period  
**200**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Robert Wells**

Mailing Address **PO Box 340**

City **Ansted** State **WV** Zip Code **25812-0340**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**01 / 27 / 2014**

Transaction ID : **SA11AI-CN39376**

Amount of Each Receipt this Period  
**50**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Robert Wells**

Mailing Address **PO Box 340**

City **Ansted** State **WV** Zip Code **25812-0340**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 17 / 2014**

Transaction ID : **SA11AI-CN40504**

Amount of Each Receipt this Period  
**50**

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

**300.00**

14929182792



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 261 OF 442

(check only one)

11a  11b  11c  11d  12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Sally R Wells**

Mailing Address **210 High St**

City **Fayetteville** State **WV** Zip Code **25840-1150**

FEC ID number of contributing federal political committee. **C**

Name of Employer **United Coal Company** Occupation **Mining Engineer**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **700**

Date of Receipt **02 / 14 / 2014**

Transaction ID : **SA11AI-CN39749**

Amount of Each Receipt this Period **100**

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Uala Puckett Wells**

Mailing Address **888 Chester Rd**

City **Charleston** State **WV** Zip Code **25302**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt **02 / 25 / 2014**

Transaction ID : **SA11AI-CN39858**

Amount of Each Receipt this Period **50**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Charles H Wendell**

Mailing Address **P.O. Drawer 359**  
**123 North Court St.**

City **Fayetteville** State **WV** Zip Code **25840**

FEC ID number of contributing federal political committee. **C**

Name of Employer **VIM Inc.** Occupation **Land Developer**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt **02 / 14 / 2014**

Transaction ID : **SA11AI-CN39816**

Amount of Each Receipt this Period **1600**

**SUBTOTAL** of Receipts This Page (optional)..... **1750.00**

**TOTAL** This Period (last page this line number only).....

14020192703

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 262 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. W. Doyle West**

Mailing Address **30 Electric Dr W**

City **Morgantown** State **WV** Zip Code **26508**

FEC ID number of contributing federal political committee. **C**

Name of Employer **retired** Occupation **retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 MM / DD / YYYY  
**03 / 07 / 2014**

Transaction ID : **SA11Ai-CN39964**

Amount of Each Receipt this Period  
**200**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. W. Doyle West**

Mailing Address **30 Electric Dr W**

City **Morgantown** State **WV** Zip Code **26508**

FEC ID number of contributing federal political committee. **C**

Name of Employer **retired** Occupation **retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 MM / DD / YYYY  
**03 / 31 / 2014**

Transaction ID : **SA11Ai-CN40869**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Ryan Westerman**

Mailing Address **1 Quail Cove Rd**

City **Charleston** State **WV** Zip Code **25314-1634**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self Employed** Occupation **Owner Of Artistic Promotions**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt  
 MM / DD / YYYY  
**02 / 25 / 2014**

Transaction ID : **SA11Ai-CN39880**

Amount of Each Receipt this Period  
**500**

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

**800.00**

182709

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 263 OF 442

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Dr. Lewis Whaley</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2014	
Mailing Address 3 Maple Leaf Ln		Transaction ID : SA11AI-CN41146	
City Charleston	State WV	Zip Code 25314	Amount of Each Receipt this Period 100
FEC ID number of contributing federal political committee. C	Name of Employer self-employed Occupation Physician	Election Cycle-to-Date 2600	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>Dr. Lewis Whaley</b>		Date of Receipt MM / DD / YYYY 03 / 31 / 2014	
Mailing Address 3 Maple Leaf Ln		Transaction ID : SA11AI-CN41147	
City Charleston	State WV	Zip Code 25314	Amount of Each Receipt this Period 900
FEC ID number of contributing federal political committee. C	Name of Employer self-employed Occupation Physician	Election Cycle-to-Date 3500	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>Mr. R. L. Wharton</b>		Date of Receipt MM / DD / YYYY 03 / 19 / 2014	
Mailing Address 1040 Scenic Hwy		Transaction ID : SA11AI-CN40168	
City Summersville	State WV	Zip Code 26651	Amount of Each Receipt this Period 200
FEC ID number of contributing federal political committee. C	Name of Employer CRST Supply co. Occupation Executive	Election Cycle-to-Date 200	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1200.00
<b>TOTAL</b> This Period (last page this line number only).....	

140 20192795

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 264 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Paul B Whipple**

Mailing Address 780 Oak Leaf Ln

City Harrisburg State PA Zip Code 17111

FEC ID number of contributing federal political committee. **C**

Name of Employer Dawood Engineering Occupation Vice President

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 MM / DD / YYYY  
**03 / 31 / 2014**

Transaction ID : **SA11Ai-CN40589**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Patrick Whitacre**

Mailing Address 51 Ambassador Cir

City Martinsburg State WV Zip Code 25401

FEC ID number of contributing federal political committee. **C**

Name of Employer self-employed Occupation consultant

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **515**

Date of Receipt  
 MM / DD / YYYY  
**03 / 17 / 2014**

Transaction ID : **SA11Ai-CN40520**

Amount of Each Receipt this Period  
**50**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Gil White**

Mailing Address 1810 National Rd

City Wheeling State WV Zip Code 26003

FEC ID number of contributing federal political committee. **C**

Name of Employer State of WV Occupation legislator

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **450**

Date of Receipt  
 MM / DD / YYYY  
**02 / 14 / 2014**

Transaction ID : **SA11Ai-CN39722**

Amount of Each Receipt this Period  
**200**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1250.00**

14020182799

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 265 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Glenn I White**

Mailing Address **218 2nd Ave**

City **Logan** State **WV** Zip Code **25601**

FEC ID number of contributing federal political committee. **C**

Name of Employer **retired** Occupation **Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt  
 MM / DD / YYYY  
**02 / 14 / 2014**

Transaction ID : **SA11AI-CN39788**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Glenn I White**

Mailing Address **218 2nd Ave**

City **Logan** State **WV** Zip Code **25601**

FEC ID number of contributing federal political committee. **C**

Name of Employer **retired** Occupation **Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 MM / DD / YYYY  
**03 / 19 / 2014**

Transaction ID : **SA11AI-CN40158**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Jo A White**

Mailing Address **1643 Woodvale Dr**

City **Charleston** State **WV** Zip Code **25314**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self Employed** Occupation **Businesswoman**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **700**

Date of Receipt  
 MM / DD / YYYY  
**03 / 07 / 2014**

Transaction ID : **SA11AI-CN39982**

Amount of Each Receipt this Period  
**200**

**TSUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

**400.00**

0192797

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 266 OF 442			
	(check only one)	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
		<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Raye White**

Mailing Address **20 Bridlewood Rd**

City **Charleston** State **WV** Zip Code **25314**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Commercial Insurance Services** Occupation **President**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 15 / 2014**

Transaction ID : **SA11AI-CN41321**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Thomas W White**

Mailing Address **RR2 Box 247 A7**

City **Lewisburg** State **WV** Zip Code **24901**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Dinsmore & Stohl** Occupation **Attorney**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 10 / 2014**

Transaction ID : **SA11AI-CN40013**

Amount of Each Receipt this Period  
**250**

**C.** Full Name (Last, First, Middle Initial)  
**Walter W. White**

Mailing Address **1466 Snake Hill Rd**

City **Masontown** State **WV** Zip Code **26542**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 23 / 2014**

Transaction ID : **SA11AI-CN40056**

Amount of Each Receipt this Period  
**250**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1500.00**

148 29192799

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 267 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Christine T Whitman**

Mailing Address **116 Village Blvd**  
**# 200**

City **Princeton** State **NJ** Zip Code **08540**

FEC ID number of contributing federal political committee. **C**

Name of Employer **The Whitman Strategy Group** Occupation **President**

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
**02 / 28 / 2014**

Transaction ID : **SA11Ai-CN39838**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. John Wick**

Mailing Address **300 Virginia Ave**

City **Richmond** State **VA** Zip Code **23226**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Dickinson Fuel Co. Inc.** Occupation **VP**

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **2600**

Date of Receipt  
**01 / 27 / 2014**

Transaction ID : **SA11Ai-CN39377**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Linda Wickstrom**

Mailing Address **334 Virginia Ter**

City **Newell** State **WV** Zip Code **26050**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Wixlin Inc.** Occupation **Accountant**

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
**03 / 22 / 2014**

Transaction ID : **SA11Ai-CN40360**

Amount of Each Receipt this Period  
**250**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**1750.00**

030102709

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 268 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Linda Wickstrom**

Mailing Address **334 Virginia Ter**

City **Newell** State **WV** Zip Code **26050**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Wixlin Inc.** Occupation **Accountant**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **550**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40791**

Amount of Each Receipt this Period  
**300**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Larry D Williams**

Mailing Address **828 Bridge Rd**

City **Charleston** State **WV** Zip Code **25314**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40637**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Leah A. Williams**

Mailing Address **322 Horseshoe Rd**

City **Morgantown** State **WV** Zip Code **26508**

FEC ID number of contributing federal political committee. **C**

Name of Employer **WVU-Biology** Occupation **Retired Professor**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**01 / 24 / 2014**

Transaction ID : **SA11AI-CN41018**

Amount of Each Receipt this Period  
**50**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**850.00**

11020192709



**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 269 OF 442  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Leah A. Williams**

Mailing Address **322 Horseshoe Rd**

City **Morgantown** State **WV** Zip Code **26508**

FEC ID number of contributing federal political committee. **C**

Name of Employer **WVU-Biology** Occupation **Retired Professor**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350**

Date of Receipt  
**02 / 13 / 2014**

Transaction ID : **SA11AI-CN39549**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Leah A. Williams**

Mailing Address **322 Horseshoe Rd**

City **Morgantown** State **WV** Zip Code **26508**

FEC ID number of contributing federal political committee. **C**

Name of Employer **WVU-Biology** Occupation **Retired Professor**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **450**

Date of Receipt  
**02 / 13 / 2014**

Transaction ID : **SA11AI-CN41096**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Leah A. Williams**

Mailing Address **322 Horseshoe Rd**

City **Morgantown** State **WV** Zip Code **26508**

FEC ID number of contributing federal political committee. **C**

Name of Employer **WVU-Biology** Occupation **Retired Professor**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **550**

Date of Receipt  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN41177**

Amount of Each Receipt this Period  
**100**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**300.00**

1020102791

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 270 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Lowell T Williams**

Mailing Address **106 Ellis Ave**

City **Elkins** State **WV** Zip Code **26241-3223**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Retired** Occupation **Retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 13 / 2014**

Transaction ID : **SA11AI-CN39479**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Marian Williams**

Mailing Address **1450 Honeysuckle Dr NE**

City **Albuquerque** State **NM** Zip Code **87122**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Weems Gallery** Occupation **Director**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **600**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 14 / 2014**

Transaction ID : **SA11AI-CN39785**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Judy D Williamson**

Mailing Address **17170 Kanawha Valley Rd**

City **Southside** State **WV** Zip Code **25187**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Mason Co. Schools** Occupation **Teacher**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40679**

Amount of Each Receipt this Period  
**200**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**800.00**

14920192792

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 271 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Dr. James S Wilson**

Mailing Address 426 8th St

City State Zip Code  
Glen Dale WV 26038

FEC ID number of contributing federal political committee.  C

Name of Employer self-employed Occupation  
Dentist

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750

Date of Receipt  
MM / DD / YYYY  
03 / 22 / 2014

Transaction ID : SA11AI-CN40288

Amount of Each Receipt this Period  
250

**B.** Full Name (Last, First, Middle Initial)  
**James F Wilson**

Mailing Address PO Box 1277

City State Zip Code  
Elkins WV 26241-1277

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation  
Frank E. Wilson Lumber Co. Inc. Lumberman

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
600

Date of Receipt  
MM / DD / YYYY  
02 / 14 / 2014

Transaction ID : SA11AI-CN39752

Amount of Each Receipt this Period  
500

**C.** Full Name (Last, First, Middle Initial)  
**Ms. Pamela B Wilton**

Mailing Address 10710 Stacumny Dr

City State Zip Code  
Vero Beach FL 32963

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation  
Retired Retired

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5100

Date of Receipt  
MM / DD / YYYY  
01 / 22 / 2014

Transaction ID : SA11AI-CN39344

Amount of Each Receipt this Period  
5100  
Reattributed from Scott Ulm

**[MEMO ITEM]**  
Reattribution

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

750.00

14920192703

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 272 OF 442

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**Ms. Pamela B Wilton**

Mailing Address **10710 Stacumny Dr**

City State Zip Code  
**Vero Beach FL 32963**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**Retired Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date  
**2600**

Date of Receipt

MM	DD	YYYY
01	23	2014

Transaction ID : **SA11AI-CN39347**

Amount of Each Receipt this Period

-2500
-------

Redesignated to General 2014

**[MEMO ITEM]**  
Redesignated

Full Name (Last, First, Middle Initial)  
**Ms. Pamela B Wilton**

Mailing Address **10710 Stacumny Dr**

City State Zip Code  
**Vero Beach FL 32963**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**Retired Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date  
**5100**

Date of Receipt

MM	DD	YYYY
01	23	2014

Transaction ID : **SA11AI-CN39348**

Amount of Each Receipt this Period

2500
------

Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

Full Name (Last, First, Middle Initial)  
**Mr. Mark Wimer**

Mailing Address **647 Wimer Rd**

City State Zip Code  
**Franklin WV 26807**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**retired retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date  
**200**

Date of Receipt

MM	DD	YYYY
03	19	2014

Transaction ID : **SA11AI-CN40259**

Amount of Each Receipt this Period

50
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14020182794

**SUBTOTAL** of Receipts This Page (optional).....

50.00
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**TOTAL** This Period (last page this line number only).....

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**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 273 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Jane-Calvert Winkler-Kimble**

Mailing Address **1216 Village Dr E**

City **South Charleston** State **WV** Zip Code **25309-1933**

FEC ID number of contributing federal political committee. **C**

Name of Employer **retired** Occupation **retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 MM / DD / YYYY  
**03 / 31 / 2014**

Transaction ID : **SA11Ai-CN41152**

Amount of Each Receipt this Period  
**50**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. William E Witschey**

Mailing Address **155 North St**

City **New Martinsville** State **WV** Zip Code **26155-1399**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Witschey's Market Inc.** Occupation **Retailer**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 MM / DD / YYYY  
**03 / 31 / 2014**

Transaction ID : **SA11Ai-CN40754**

Amount of Each Receipt this Period  
**500**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Luther E Woods**

Mailing Address **PO Box 1330**

City **Huntington** State **WV** Zip Code **25714**

FEC ID number of contributing federal political committee. **C**

Name of Employer **retired** Occupation **retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 MM / DD / YYYY  
**02 / 25 / 2014**

Transaction ID : **SA11Ai-CN39856**

Amount of Each Receipt this Period  
**1000**

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

**1550.00**

1019270

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 274 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Dwight Woosley**

Mailing Address **99 Belmont Dr**

City **Huntington** State **WV** Zip Code **25705**

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested \_\_\_\_\_ Occupation Requested \_\_\_\_\_

Receipt For: 2014  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **250**

Date of Receipt  
 MM / DD / YYYY  
**02 / 14 / 2014**

Transaction ID : **SA11AI-CN39761**

Amount of Each Receipt this Period  
**100**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Dwight Woosley**

Mailing Address **99 Belmont Dr**

City **Huntington** State **WV** Zip Code **25705**

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested \_\_\_\_\_ Occupation Requested \_\_\_\_\_

Receipt For: 2014  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **300**

Date of Receipt  
 MM / DD / YYYY  
**03 / 19 / 2014**

Transaction ID : **SA11AI-CN40169**

Amount of Each Receipt this Period  
**50**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Gerald Workman**

Mailing Address **515 Havana Dr**

City **Charleston** State **WV** Zip Code **25311**

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested **Self Employed** Occupation Requested **Businessman**

Receipt For: 2014  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **400**

Date of Receipt  
 MM / DD / YYYY  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40671**

Amount of Each Receipt this Period  
**200**

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

**350.00**

010102709

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 275 OF 442  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Zenovy S Wowczuk**

Mailing Address **204 Morgan Dr**  
**Apt B**

City **Morgantown** State **WV** Zip Code **26505**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Shieldsmith** Occupation **CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11AI-CN40632**

Amount of Each Receipt this Period  
**500**

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Fay Wright**

Mailing Address **PO Box 357 87 Fieldstone**

City **Bunker Hill** State **WV** Zip Code **25413**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Requested** Occupation **Requested**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 22 / 2014**

Transaction ID : **SA11AI-CN40407**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Roxanne Wurtzbacher**

Mailing Address **328 Serenity Rd**

City **Wheeling** State **WV** Zip Code **26003**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Requested** Occupation **Requested**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 13 / 2014**

Transaction ID : **SA11AI-CN39556**

Amount of Each Receipt this Period  
**100**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**700.00**

14029182797

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 276 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mary Wutke**

Mailing Address **6 Shefford Cir**

City **Madison** State **WI** Zip Code **53719**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self** Occupation **Finance**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 03 / 2014**

Transaction ID : **SA11AI-CN41270**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Robert Wymer**

Mailing Address **PO Box 334**

City **Pratt** State **WV** Zip Code **25162**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Globe Meallurgical Inc.** Occupation **Corporate Manager-Facilities**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **450**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**03 / 22 / 2014**

Transaction ID : **SA11AI-CN40294**

Amount of Each Receipt this Period  
**100**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Willard Wynne**

Mailing Address **473 Nancy Jack Rd**

City **Gerrardstown** State **WV** Zip Code **25420**

FEC ID number of contributing federal political committee. **C**

Name of Employer **retired** Occupation **retired**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **400**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**02 / 28 / 2014**

Transaction ID : **SA11AI-CN41213**

Amount of Each Receipt this Period  
**100**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**450.00**

192709



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 277 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Ms. Ivy Yoak**

Mailing Address **Post Office Box 386**

City <b>Grantsville</b>	State <b>WV</b>	Zip Code <b>26147</b>
----------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer Requested	Occupation Requested
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <input type="text"/> 200

Date of Receipt  
MM / DD / YYYY  
**03 / 18 / 2014**

Transaction ID : **SA11AI-CN40103**

Amount of Each Receipt this Period  
 100

**B.** Full Name (Last, First, Middle Initial)  
**Ms. Barbara A Young**

Mailing Address **1125 Lyndale Dr**

City <b>Charleston</b>	State <b>WV</b>	Zip Code <b>25314</b>
---------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>Valley Home Cleaning</b>	Occupation <b>Executive</b>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <input type="text"/> 1100

Date of Receipt  
MM / DD / YYYY  
**02 / 13 / 2014**

Transaction ID : **SA11AI-CN39461**

Amount of Each Receipt this Period  
 150

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Gary Young**

Mailing Address **311 9th St**

City <b>Glen Dale</b>	State <b>WV</b>	Zip Code <b>26038</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>Youngs Care Home</b>	Occupation <b>Owner</b>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <input type="text"/> 235

Date of Receipt  
MM / DD / YYYY  
**03 / 18 / 2014**

Transaction ID : **SA11AI-CN40098**

Amount of Each Receipt this Period  
 100

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

350.00

0192799

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 278 OF 442  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Sandy C Zando**

Mailing Address **PO Box 11248**

City **Charleston** State **WV** Zip Code **25339**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Thomas Memorial Hospital** Occupation **Adminrator**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **200**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 13 / 2014**

Transaction ID : **SA11Ai-CN39603**

Amount of Each Receipt this Period  
**200**

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Jeffrey J Zimmer**

Mailing Address **3005 Hammock Way**

City **Vero Beach** State **FL** Zip Code **32963**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Armour LLC** Occupation **Partner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **10400**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 28 / 2014**

Transaction ID : **SA11Ai-CN39841**

Amount of Each Receipt this Period  
**10400**

**C.** Full Name (Last, First, Middle Initial)  
**Mr. Jeffrey J Zimmer**

Mailing Address **3005 Hammock Way**

City **Vero Beach** State **FL** Zip Code **32963**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Armour LLC** Occupation **Partner**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 28 / 2014**

Transaction ID : **SA11Ai-CN39922**

Amount of Each Receipt this Period  
**-5200**  
 Reattributed to Susan Zimmer

**[MEMO ITEM]**  
Reattributed

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**10600.00**

14820182900

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 279 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mr. Jerffrey J Zimmer**

Mailing Address 3005 Hammock Way

City: Vero Beach    State: FL    Zip Code: 32963

FEC ID number of contributing federal political committee. **C**

Name of Employer: Armour LLC    Occupation: Partner

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date: 2600

Date of Receipt: 03 / 03 / 2014

Transaction ID : SA11AI-CN39924

Amount of Each Receipt this Period: -2600

Redesignated to General 2014

**[MEMO ITEM]**  
Redesignated

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Jerffrey J Zimmer**

Mailing Address 3005 Hammock Way

City: Vero Beach    State: FL    Zip Code: 32963

FEC ID number of contributing federal political committee. **C**

Name of Employer: Armour LLC    Occupation: Partner

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date: 5200

Date of Receipt: 03 / 03 / 2014

Transaction ID : SA11AI-CN39925

Amount of Each Receipt this Period: 2600

Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

**C.** Full Name (Last, First, Middle Initial)  
**Mrs. Susan Zimmer**

Mailing Address 3005 Hammock Way

City: Vero Beach    State: FL    Zip Code: 32963

FEC ID number of contributing federal political committee. **C**

Name of Employer: Retired    Occupation: Retired

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date: 5200

Date of Receipt: 02 / 28 / 2014

Transaction ID : SA11AI-CN39923

Amount of Each Receipt this Period: 5200

Reattributed from Jeffrey Zimmer

**[MEMO ITEM]**  
Reattribution

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00

1020102901

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 280 OF 442
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mrs. Susan Zimmer**

Mailing Address 3005 Hammock Way

City: **Vero Beach** State: **FL** Zip Code: **32963**

FEC ID number of contributing federal political committee: **C**

Name of Employer: **Retired** Occupation: **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **2600**

Date of Receipt: **03 / 03 / 2014**

Transaction ID : **SA11AI-CN39926**

Amount of Each Receipt this Period: **-2600**

Redesignated to General 2014

**[MEMO ITEM]**  
Redesignated

**B.** Full Name (Last, First, Middle Initial)  
**Mrs. Susan Zimmer**

Mailing Address 3005 Hammock Way

City: **Vero Beach** State: **FL** Zip Code: **32963**

FEC ID number of contributing federal political committee: **C**

Name of Employer: **Retired** Occupation: **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: **5200**

Date of Receipt: **03 / 03 / 2014**

Transaction ID : **SA11AI-CN39927**

Amount of Each Receipt this Period: **2600**

Redesignated from Primary 2014

**[MEMO ITEM]**  
Redesignation

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee: **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**0.00**

**555142.00**

20102802

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 281 OF 442

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**Wellpoint PAC**

Mailing Address 120 Monument Circle

City State Zip Code  
Indianapolis IN 46204

FEC ID number of contributing federal political committee. **C** C00197228

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500

Date of Receipt

MM / DD / YYYY  
03 / 10 / 2014

Transaction ID : SA11C-CN40017

Amount of Each Receipt this Period

2500

**B.**

Full Name (Last, First, Middle Initial)  
**AFSA Pac**

Mailing Address 919 18th St NW

City State Zip Code  
Washington DC 20006

FEC ID number of contributing federal political committee. **C** C00038604

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000

Date of Receipt

MM / DD / YYYY  
02 / 13 / 2014

Transaction ID : SA11C-CN39455

Amount of Each Receipt this Period

2750

**C.**

Full Name (Last, First, Middle Initial)  
**Airlines For America PAC**

Mailing Address 1301 Pennsylvania Ave NW  
Ste 1100

City State Zip Code  
Washington DC 20004

FEC ID number of contributing federal political committee. **C** C00114694

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2500

Date of Receipt

MM / DD / YYYY  
03 / 20 / 2014

Transaction ID : SA11C-CN40273

Amount of Each Receipt this Period

1500

**SUBTOTAL** of Receipts This Page (optional).....

6750.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 282 OF 442
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Allstate Insurance Co PAC**

Mailing Address **2775 Sanders Rd**  
**Ste A5**

City **Northbrook** State **IL** Zip Code **60062**

FEC ID number of contributing federal political committee. **C C00040253**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **2000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 05 / 2014**

Transaction ID : **SA11C-CN39917**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**American Forest & Paper Assoc. Pac**

Mailing Address **1101 K St NW**  
**Ste 700**

City **Washington** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00029348**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **5000**

Date of Receipt  
 M M / D D / Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11C-CN40769**

Amount of Each Receipt this Period  
**2500**

**C.** Full Name (Last, First, Middle Initial)  
**American Occupational Therapy Assn PAC**

Mailing Address **4720 Montgomery Ln**

City **Bethesda** State **MD** Zip Code **20814**

FEC ID number of contributing federal political committee. **C C00089086**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **2500**

Date of Receipt  
 M M / D D / Y Y Y Y  
**01 / 22 / 2014**

Transaction ID : **SA11C-CN39331**

Amount of Each Receipt this Period  
**2500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**6000.00**

1020182804

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 283 OF 442	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**American Resort Development Assn PAC**

Mailing Address 1201 15th St NW

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00358663

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt  
MM / DD / YYYY  
03 / 22 / 2014

Transaction ID : SA11C-CN40419

Amount of Each Receipt this Period  
2000

**B.** Full Name (Last, First, Middle Initial)  
**AmerisourceBergen Corp PAC**

Mailing Address 1300 Morris Drive Ste 100

City Chesterbrook State PA Zip Code 19087

FEC ID number of contributing federal political committee. **C** C00400929

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000

Date of Receipt  
MM / DD / YYYY  
03 / 20 / 2014

Transaction ID : SA11C-CN40268

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**Amgen Inc. Pac**

Mailing Address 601 13th St NW 12th Floor

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00251876

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000

Date of Receipt  
MM / DD / YYYY  
03 / 31 / 2014

Transaction ID : SA11C-CN40721

Amount of Each Receipt this Period  
2000

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

5000.00

140 20102005

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 284 OF 442			
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Anadarko Petroleum Corp PAC**

Mailing Address 1201 Lake Robbins Dr

City State Zip Code  
The Woodlands TX 77380

FEC ID number of contributing federal political committee. **C** C00231951

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000

Date of Receipt  
 M M M / D D D / Y Y Y Y  
 03 / 22 / 2014

Transaction ID : SA11C-CN40424

Amount of Each Receipt this Period  
2000

**B.** Full Name (Last, First, Middle Initial)  
**APSCU PAC**

Mailing Address 1101 Connecticut Ave NW  
Ste 900

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00213066

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
 M M M / D D D / Y Y Y Y  
 02 / 13 / 2014

Transaction ID : SA11C-CN39445

Amount of Each Receipt this Period  
1000

**C.** Full Name (Last, First, Middle Initial)  
**APSCU PAC**

Mailing Address 1101 Connecticut Ave NW  
Ste 900

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00213066

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3500

Date of Receipt  
 M M M / D D D / Y Y Y Y  
 03 / 18 / 2014

Transaction ID : SA11C-CN40076

Amount of Each Receipt this Period  
1500

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4500.00

14020102000



**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 285 OF 442
	<input type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input checked="" type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A. Full Name (Last, First, Middle Initial)**  
**Arkansas For Leadership PAC**

Mailing Address **PO Box 1672**

City **Alexandria** State **VA** Zip Code **22313**

FEC ID number of contributing federal political committee. **C00413948**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt  
 MM / DD / YYYY  
**03 / 31 / 2014**

Transaction ID : **SA11C-CN40723**

Amount of Each Receipt this Period  
**2500**

**B. Full Name (Last, First, Middle Initial)**  
**Arnall Golden Gregory LLP PAC**

Mailing Address **171 17th St Ste 2100**

City **Atlanta** State **GA** Zip Code **30363**

FEC ID number of contributing federal political committee. **C00525873**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500**

Date of Receipt  
 MM / DD / YYYY  
**02 / 13 / 2014**

Transaction ID : **SA11C-CN39458**

Amount of Each Receipt this Period  
**1500**

**C. Full Name (Last, First, Middle Initial)**  
**Asian American Hotel Owners Association**

Mailing Address **228 S. Washington St. Ste 115**

City **Alexandria** State **VA** Zip Code **22314**

FEC ID number of contributing federal political committee. **C00336743**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000**

Date of Receipt  
 MM / DD / YYYY  
**03 / 05 / 2014**

Transaction ID : **SA11C-CN39916**

Amount of Each Receipt this Period  
**5000**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**9000.00**

10920907





**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 288 OF 442			
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Boeing Company PAC**

Mailing Address 1200 Wilson Blvd

City State Zip Code  
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00142711

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 22 / 2014

Transaction ID : SA11C-CN40426

Amount of Each Receipt this Period  
1000

**B.** Full Name (Last, First, Middle Initial)  
**Build PAC**

Mailing Address 1201 15th St NW

City State Zip Code  
Washington DC 20005

FEC ID number of contributing federal political committee. **C** C00000901

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 31 / 2014

Transaction ID : SA11C-CN40694

Amount of Each Receipt this Period  
5000

**C.** Full Name (Last, First, Middle Initial)  
**Checksmart Financial PAC**

Mailing Address 7001 Post Rd  
Ste 200

City State Zip Code  
Dublin OH 43016

FEC ID number of contributing federal political committee. **C** C00433805

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
4000

Date of Receipt  
 M M / D D / Y Y Y Y  
 02 / 13 / 2014

Transaction ID : SA11C-CN39452

Amount of Each Receipt this Period  
4000

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

10000.00

20102010

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 289 OF 442
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>Chevron Employees PAC</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 05 / 2014	
Mailing Address PO Box 6016		<b>Transaction ID : SA11C-CN39912</b>	
City San Ramon	State CA	Zip Code 94583	
FEC ID number of contributing federal political committee. <input checked="" type="checkbox"/> C00035006		Amount of Each Receipt this Period 1000	
Name of Employer Occupation		Election Cycle-to-Date 3000	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>Citizens For Prosperity In America Today PAC</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 31 / 2014	
Mailing Address 228 S Washington St Ste 115		<b>Transaction ID : SA11C-CN40772</b>	
City Alexandria	State VA	Zip Code 22314	
FEC ID number of contributing federal political committee. <input checked="" type="checkbox"/> C00491654		Amount of Each Receipt this Period 5000	
Name of Employer Occupation		Election Cycle-to-Date 5000	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>Citizens For Prosperity In America Today PAC</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 31 / 2014	
Mailing Address 228 S Washington St Ste 115		<b>Transaction ID : SA11C-CN40773</b>	
City Alexandria	State VA	Zip Code 22314	
FEC ID number of contributing federal political committee. <input checked="" type="checkbox"/> C00491654		Amount of Each Receipt this Period 5000	
Name of Employer Occupation		Election Cycle-to-Date 10000	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11000.00
<b>TOTAL</b> This Period (last page this line number only).....	11000.00

11030102011

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 290 OF 442
	<input type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input checked="" type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Civic Forum PAC**

Mailing Address **PO Box 365**

City **Mc Lean** State **VA** Zip Code **22101**

FEC ID number of contributing federal political committee. **C C00461145**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11C-CN40722**

Amount of Each Receipt this Period  
**250**

**B.** Full Name (Last, First, Middle Initial)  
**Comerica Inc. PAC**

Mailing Address **PO Box 75000**

City **Detroit** State **MI** Zip Code **48275**

FEC ID number of contributing federal political committee. **C C00393173**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**02 / 28 / 2014**

Transaction ID : **SA11C-CN39837**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Dentons US LLP PAC**

Mailing Address **233 S Wacker Drive**  
**Ste 7800**

City **Chicago** State **IL** Zip Code **60606**

FEC ID number of contributing federal political committee. **C C00216127**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**03 / 20 / 2014**

Transaction ID : **SA11C-CN40271**

Amount of Each Receipt this Period  
**2500**

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

**3750.00**

1020102812

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**Discover Financial Services Pac**

Mailing Address **500 8th St NW  
Suite 210**

City State Zip Code  
**Washington DC 20004**

FEC ID number of contributing federal political committee. **C C00438051**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**8000**

Date of Receipt

**03 / 20 / 2014**

Transaction ID : **SA11C-CN40274**

Amount of Each Receipt this Period

**2000**

Full Name (Last, First, Middle Initial)  
**Doddridge Co. Republican Exec. Committee**

Mailing Address **2018 WV Route 23**

City State Zip Code  
**Salem WV 26426**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**500**

Date of Receipt

**01 / 27 / 2014**

Transaction ID : **SA11C-CN39378**

Amount of Each Receipt this Period

**500**

Made using federally permissible funds

Full Name (Last, First, Middle Initial)  
**Dow Chemical Co. Employees PAC**

Mailing Address **2030 Dow Center**

City State Zip Code  
**Midland MI 48674**

FEC ID number of contributing federal political committee. **C C00074096**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5000**

Date of Receipt

**03 / 22 / 2014**

Transaction ID : **SA11C-CN40422**

Amount of Each Receipt this Period

**3000**

201309192013

**SUBTOTAL** of Receipts This Page (optional).....

**5500.00**

**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 292 OF 442
	<input type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input checked="" type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Dow Chemical Co. Employees PAC**

Mailing Address 2030 Dow Center

City Midland State MI Zip Code 48674

FEC ID number of contributing federal political committee. **C** C00074096

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 10000

Date of Receipt  
 MM / DD / YYYY  
 03 / 31 / 2014

Transaction ID : SA11C-CN40701

Amount of Each Receipt this Period  
 5000

**B.** Full Name (Last, First, Middle Initial)  
**Emerson Electric Co Good Govt Fund**

Mailing Address 8000 Florissant Ave W

City St Louis State MO Zip Code 63136

FEC ID number of contributing federal political committee. **C** C00080515

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 3000

Date of Receipt  
 MM / DD / YYYY  
 03 / 31 / 2014

Transaction ID : SA11C-CN40641

Amount of Each Receipt this Period  
 1000

**C.** Full Name (Last, First, Middle Initial)  
**Energy Transfer Partners PAC**

Mailing Address 711 Louisiana St Ste 900

City Houston State TX Zip Code 77002

FEC ID number of contributing federal political committee. **C** C00438754

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt  
 MM / DD / YYYY  
 02 / 14 / 2014

Transaction ID : SA11C-CN39705

Amount of Each Receipt this Period  
 2500

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

8500.00

14029182914





**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 294 OF 442
	<input type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input checked="" type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A. Fund For A Conservative Future**

Full Name (Last, First, Middle Initial)  
 Mailing Address PO Box 96

City Alexandria State VA Zip Code 22313

FEC ID number of contributing federal political committee. **C** C00326082

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt  
 MM / DD / YYYY  
 02 / 25 / 2014

Transaction ID : SA11C-CN39875

Amount of Each Receipt this Period  
 5000

**B. Goldman Sachs Group Inc. Pac**

Full Name (Last, First, Middle Initial)  
 Mailing Address 101 Constitution Ave NW Ste.1000 E

City Washington State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00350744

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 10000

Date of Receipt  
 MM / DD / YYYY  
 03 / 28 / 2014

Transaction ID : SA11C-CN40529

Amount of Each Receipt this Period  
 1500

**C. Hardwood Federation Pac**

Full Name (Last, First, Middle Initial)  
 Mailing Address 6830 Raleigh-LaGrange Rd

City Memphis State TN Zip Code 38134

FEC ID number of contributing federal political committee. **C** C00396671

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt  
 MM / DD / YYYY  
 03 / 31 / 2014

Transaction ID : SA11C-CN40703

Amount of Each Receipt this Period  
 2000

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

8500.00

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 295 OF 442  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Heartland Values PAC**

Mailing Address **PO Box 505**

City **Sioux Falls** State **SD** Zip Code **57101**

FEC ID number of contributing federal political committee. **C00409003**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **10000**

Date of Receipt  
**03 / 31 / 2014**

Transaction ID : **SA11C-CN40534**

Amount of Each Receipt this Period  
**5000**

**B.** Full Name (Last, First, Middle Initial)  
**Housing PAC**

Mailing Address **PO Box 2182**

City **Charleston** State **WV** Zip Code **26328**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
**01 / 27 / 2014**

Transaction ID : **SA11C-CN39380**

Amount of Each Receipt this Period  
**1000**

Contribution made using federally permis

**C.** Full Name (Last, First, Middle Initial)  
**Iberiabank PAC**

Mailing Address **200 Congress St W**

City **Lafayette** State **LA** Zip Code **70501**

FEC ID number of contributing federal political committee. **C00406066**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500**

Date of Receipt  
**02 / 28 / 2014**

Transaction ID : **SA11C-CN39831**

Amount of Each Receipt this Period  
**500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**6500.00**

14929182817

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 296 OF 442			
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Insured Retirement Institute Inc. PAC**

Mailing Address **1101 New York Ave NW**  
**Ste 825**

City **Washington** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00490474**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **7500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**03 / 05 / 2014**

Transaction ID : **SA11C-CN39915**

Amount of Each Receipt this Period  
**2500**

**B.** Full Name (Last, First, Middle Initial)  
**INSURPAC**

Mailing Address **412 First Street SE**  
**Suite 300**

City **Washington** State **DC** Zip Code **20003**

FEC ID number of contributing federal political committee. **C C00022343**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **7500**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11C-CN40531**

Amount of Each Receipt this Period  
**2500**

**C.** Full Name (Last, First, Middle Initial)  
**IPHFHA Inc. PAC**

Mailing Address **7829 East Rockhill**  
**Suite 201**

City **Wichita** State **KS** Zip Code **67206**

FEC ID number of contributing federal political committee. **C C00251447**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **4000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : **SA11C-CN40639**

Amount of Each Receipt this Period  
**2000**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**7000.00**

199 2019 2019

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: (check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Jobs Economy & Budget Fund**

Mailing Address **PO Box 30844**

City **Bethesda** State **MD** Zip Code **20824**

FEC ID number of contributing federal political committee. **C00420695**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000**

Date of Receipt  
 M / M / Y  
**03 / 31 / 2014**

Transaction ID : **SA11C-CN40750**

Amount of Each Receipt this Period  
**5000**

**B.** Full Name (Last, First, Middle Initial)  
**Laboratory Corp Of America Holdings PAC**

Mailing Address **231 Maple Ave**

City **Burlington** State **NC** Zip Code **27215**

FEC ID number of contributing federal political committee. **C00314997**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000**

Date of Receipt  
 M / M / Y  
**03 / 22 / 2014**

Transaction ID : **SA11C-CN40411**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Lincoln PAC**

Mailing Address **PO Box A3968**

City **Chicago** State **IL** Zip Code **60690**

FEC ID number of contributing federal political committee. **C00491241**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000**

Date of Receipt  
 M / M / Y  
**03 / 31 / 2014**

Transaction ID : **SA11C-CN40533**

Amount of Each Receipt this Period  
**2500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**8500.00**

10  
11  
12  
13  
14  
15

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 298 OF 442	
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Locke Lord Bissell & LKiddell PAC**

Mailing Address **600 Travis  
Suite 3400**

City **Houston** State **TX** Zip Code **77002**

FEC ID number of contributing federal political committee. **C C00117861**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **1000**

Date of Receipt  
**02 / 13 / 2014**

Transaction ID : **SA11C-CN39449**

Amount of Each Receipt this Period  
**1000**

**B.** Full Name (Last, First, Middle Initial)  
**Majority Committee PAC**

Mailing Address **PO Box 10134**

City **Bakersfield** State **CA** Zip Code **93389**

FEC ID number of contributing federal political committee. **C C00428052**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **10000**

Date of Receipt  
**03 / 31 / 2014**

Transaction ID : **SA11C-CN40724**

Amount of Each Receipt this Period  
**5000**

**C.** Full Name (Last, First, Middle Initial)  
**Making Business Excel PAC**

Mailing Address **PO Box 3241**

City **Cheyenne** State **WY** Zip Code **82003**

FEC ID number of contributing federal political committee. **C C00392134**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **5000**

Date of Receipt  
**02 / 25 / 2014**

Transaction ID : **SA11C-CN39861**

Amount of Each Receipt this Period  
**5000**

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

**11000.00**

11029192929

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 299 OF 442

(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A. Marathon Oil Co. Employees PAC**

Full Name (Last, First, Middle Initial)  
 Mailing Address 5555 San Felipe St  
 Ste 4148  
 City Houston State TX Zip Code 77056

Date of Receipt: 03 / 20 / 2014  
 Transaction ID : SA11C-CN40269

FEC ID number of contributing federal political committee: C00040568

Amount of Each Receipt this Period: 1000

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2000

**B. Marathon Petroleum Corp. Employees PAC**

Full Name (Last, First, Middle Initial)  
 Mailing Address 539 Main St S  
 City Findlay State OH Zip Code 45840

Date of Receipt: 02 / 14 / 2014  
 Transaction ID : SA11C-CN39728

FEC ID number of contributing federal political committee: C00496307

Amount of Each Receipt this Period: 5000

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 10000

**C. Markwest Energy PAC**

Full Name (Last, First, Middle Initial)  
 Mailing Address 1515 Arapahoe St  
 Tower I  
 City Denver State CO Zip Code 80202

Date of Receipt: 03 / 31 / 2014  
 Transaction ID : SA11C-CN40594

FEC ID number of contributing federal political committee: C00489468

Amount of Each Receipt this Period: 1000

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2000

**SUBTOTAL** of Receipts This Page (optional)..... 7000.00

**TOTAL** This Period (last page this line number only).....

29192921

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 300 OF 442

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**Marsh & McLennan Companies PAC**

Mailing Address 1166 Avenue of the Americas

City State Zip Code  
New York NY 10036

FEC ID number of contributing federal political committee. **C** C00457234

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt

M M M	D D D	Y Y Y Y Y Y Y Y
03	17	2014

Transaction ID : SA11C-CN40522

Amount of Each Receipt this Period

2000
------

Full Name (Last, First, Middle Initial)  
**Mav6 Edgefighter PAC**

Mailing Address PO Box 16059

City State Zip Code  
Alexandria VA 22302

FEC ID number of contributing federal political committee. **C** C00507764

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500

Date of Receipt

M M M	D D D	Y Y Y Y Y Y Y Y
03	31	2014

Transaction ID : SA11C-CN41129

Amount of Each Receipt this Period

500
-----

Full Name (Last, First, Middle Initial)  
**Meadwestvaco Pac**

Mailing Address 501 5th St S

City State Zip Code  
Richmond VA 23219

FEC ID number of contributing federal political committee. **C** C00065987

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6000

Date of Receipt

M M M	D D D	Y Y Y Y Y Y Y Y
02	13	2014

Transaction ID : SA11C-CN39447

Amount of Each Receipt this Period

1000
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**SUBTOTAL** of Receipts This Page (optional).....

3500.00
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**TOTAL** This Period (last page this line number only).....

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**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 301 OF 442

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**Michels Corp PAC**

Mailing Address **PO Box 128**

City State Zip Code  
**Brownsville WI 53006**

FEC ID number of contributing federal political committee. **C C00454280**

Name of Employer Occupation

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

**2500**

Date of Receipt

**03 / 31 / 2014**

Transaction ID : **SA11C-CN40749**

Amount of Each Receipt this Period

**2500**

**B.** Full Name (Last, First, Middle Initial)

**Monsanto Citizenship Fund**

Mailing Address **800 N Lindbergh Blvd**

City State Zip Code  
**Saint Louis MO 63167**

FEC ID number of contributing federal political committee. **C C00042069**

Name of Employer Occupation

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

**2000**

Date of Receipt

**03 / 31 / 2014**

Transaction ID : **SA11C-CN40767**

Amount of Each Receipt this Period

**2000**

**C.** Full Name (Last, First, Middle Initial)

**Mortgage Bankers Assn Pac**

Mailing Address **1919 M Street NW  
5th Floor**

City State Zip Code  
**Washington DC 20036**

FEC ID number of contributing federal political committee. **C C00004812**

Name of Employer Occupation

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

**5000**

Date of Receipt

**03 / 10 / 2014**

Transaction ID : **SA11C-CN40008**

Amount of Each Receipt this Period

**1000**

**SUBTOTAL** of Receipts This Page (optional).....

**5500.00**

**TOTAL** This Period (last page this line number only).....

**5500.00**

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 302 OF 442

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Mortgage Bankers Assn Pac**

Mailing Address **1919 M Street NW**  
**5th Floor**

City **Washington** State **DC** Zip Code **20036**

FEC ID number of contributing federal political committee. **C C00004812**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **9000**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**03 / 10 / 2014**

Transaction ID : SA11C-CN40009

Amount of Each Receipt this Period  
**4000**

**B.** Full Name (Last, First, Middle Initial)  
**NAMB PAC**

Mailing Address **100 E Water St**

City **Sandusky** State **OH** Zip Code **44870**

FEC ID number of contributing federal political committee. **C C00254201**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **2500**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**03 / 31 / 2014**

Transaction ID : SA11C-CN40768

Amount of Each Receipt this Period  
**2500**

**C.** Full Name (Last, First, Middle Initial)  
**Nat. Alliance Of Forest Owners Pac**

Mailing Address **122 C St NW**  
**Suite 630**

City **Washington** State **DC** Zip Code **20001**

FEC ID number of contributing federal political committee. **C C00469080**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **2500**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**02 / 25 / 2014**

Transaction ID : SA11C-CN39859

Amount of Each Receipt this Period  
**2500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**9000.00**

182924

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 303 OF 442
	<input type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input checked="" type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A. Nat. Assn. Of Insurance And Financial Advisors PAC**

Full Name (Last, First, Middle Initial)  
Nat. Assn. Of Insurance And Financial Advisors PAC

Mailing Address 2901 Telestar Ct

City Falls Church State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C** C00005249

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 7500

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 07 / 2014

Transaction ID : SA11C-CN39979

Amount of Each Receipt this Period  
 2500

**B. Nat. Chicken Council Pac**

Full Name (Last, First, Middle Initial)  
Nat. Chicken Council Pac

Mailing Address 1015 15th St NW Suite 930

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00034272

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 20 / 2014

Transaction ID : SA11C-CN40275

Amount of Each Receipt this Period  
 1000

**C. National Cattlemen's Beef Pac**

Full Name (Last, First, Middle Initial)  
National Cattlemen's Beef Pac

Mailing Address 9110 Nicholas Ave E Post Office Box 80112

City Englewood State CO Zip Code 80112

FEC ID number of contributing federal political committee. **C** C00028787

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014

Transaction ID : SA11C-CN40717

Amount of Each Receipt this Period  
 2500

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

6000.00

13010202

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 304 OF 442

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**New York Life Insurance Co Pac**

Mailing Address **51 Madison Ave**

City State Zip Code  
**New York NY 10010**

FEC ID number of contributing federal political committee. **C C00158881**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5000**

Date of Receipt

**03 / 07 / 2014**

Transaction ID : **SA11C-CN39987**

Amount of Each Receipt this Period

**1500**

Full Name (Last, First, Middle Initial)  
**New York Life Insurance Co Pac**

Mailing Address **51 Madison Ave**

City State Zip Code  
**New York NY 10010**

FEC ID number of contributing federal political committee. **C C00158881**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**6000**

Date of Receipt

**03 / 07 / 2014**

Transaction ID : **SA11C-CN39988**

Amount of Each Receipt this Period

**1000**

Full Name (Last, First, Middle Initial)  
**NFIB Safe Trust**

Mailing Address **1201 F St NW  
Suite 200**

City State Zip Code  
**Washington DC 20004**

FEC ID number of contributing federal political committee. **C C00101105**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**4000**

Date of Receipt

**03 / 31 / 2014**

Transaction ID : **SA11C-CN40702**

Amount of Each Receipt this Period

**4000**

**SUBTOTAL** of Receipts This Page (optional).....

**6500.00**

**TOTAL** This Period (last page this line number only).....

**6500.00**



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 306 OF 442
	<input type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input checked="" type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Plum Creek Timber Co Good Govt Fund**

Mailing Address **999 3rd Ave**

City **Seattle** State **WA** Zip Code **98104**

FEC ID number of contributing federal political committee. **C00255224**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3500**

Date of Receipt **03 / 05 / 2014**

Transaction ID : **SA11C-CN39913**

Amount of Each Receipt this Period **2500**

**B.** Full Name (Last, First, Middle Initial)  
**Property Casualty Insurers Assn. Pac**

Mailing Address **2600 River Rd S**

City **Des Plaines** State **IL** Zip Code **60018**

FEC ID number of contributing federal political committee. **C00066472**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **7000**

Date of Receipt **03 / 28 / 2014**

Transaction ID : **SA11C-CN40526**

Amount of Each Receipt this Period **5000**

**C.** Full Name (Last, First, Middle Initial)  
**Property Casualty Insurers Assn. Pac**

Mailing Address **2600 River Rd S**

City **Des Plaines** State **IL** Zip Code **60018**

FEC ID number of contributing federal political committee. **C00066472**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **9500**

Date of Receipt **03 / 28 / 2014**

Transaction ID : **SA11C-CN40527**

Amount of Each Receipt this Period **2500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**10000.00**

11020182029

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 307 OF 442
	<input type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input checked="" type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Prosperity Action Inc PAC**

Mailing Address 1006 Pendleton St

City Alexandria State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00377689

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt  
 MM / DD / YYYY  
 03 / 28 / 2014

Transaction ID : SA11C-CN40528

Amount of Each Receipt this Period  
 5000

**B.** Full Name (Last, First, Middle Initial)  
**Prudential Financial Inc PAC**

Mailing Address 751 Broad St

City Newark State NJ Zip Code 07102

FEC ID number of contributing federal political committee. **C** C00127779

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000

Date of Receipt  
 MM / DD / YYYY  
 02 / 13 / 2014

Transaction ID : SA11C-CN39446

Amount of Each Receipt this Period  
 5000

**C.** Full Name (Last, First, Middle Initial)  
**Renal Phycians Assoc PAC**

Mailing Address 1700 Rockville Pike Suite 220

City Rockville State MD Zip Code 20852

FEC ID number of contributing federal political committee. **C** C00409391

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2500

Date of Receipt  
 MM / DD / YYYY  
 02 / 13 / 2014

Transaction ID : SA11C-CN39448

Amount of Each Receipt this Period  
 1500

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

11500.00

14929192929

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 308 OF 442			
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A. Sanofi US Services Inc Employees PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 55 Corporate Dr

City State Zip Code  
Bridgewater NJ 08807

FEC ID number of contributing federal political committee. **C** C00144345

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 31 / 2014

Transaction ID : SA11C-CN40532

Amount of Each Receipt this Period  
1000

**B. Southern Company Employee PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 241 Ralph McGill Boulevard NE

City State Zip Code  
Atlanta GA 30308

FEC ID number of contributing federal political committee. **C** C00144774

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 22 / 2014

Transaction ID : SA11C-CN40412

Amount of Each Receipt this Period  
3000

**C. Suntrust Bank Good Government Group**

Full Name (Last, First, Middle Initial)  
Mailing Address Ms Benda Skidmore  
PO Box 26665

City State Zip Code  
Richmond VA 23261

FEC ID number of contributing federal political committee. **C** C00214965

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
6000

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 28 / 2014

Transaction ID : SA11C-CN39836

Amount of Each Receipt this Period  
1000

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

5000.00

14329182030



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 309 OF 442

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Taxicab Limousine & Paratransit Assn PAC**

Mailing Address 3849 Farragut Ave

City State Zip Code  
Kensington MD 20895

FEC ID number of contributing federal political committee. **C** C00132480

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000

Date of Receipt

MM	DD	YYYY
03	17	2014

Transaction ID : SA11C-CN40521

Amount of Each Receipt this Period

1000
------

**B. The Hawkeye PAC**

Mailing Address PO Box 192

City State Zip Code  
Des Moines IA 50301

FEC ID number of contributing federal political committee. **C** C00379479

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000

Date of Receipt

MM	DD	YYYY
03	31	2014

Transaction ID : SA11C-CN40766

Amount of Each Receipt this Period

4000
------

**C. Title Industry Pac**

Mailing Address 1828 L St N.W  
Suite 705

City State Zip Code  
Washington DC 20036

FEC ID number of contributing federal political committee. **C** C00012914

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
8500

Date of Receipt

MM	DD	YYYY
03	20	2014

Transaction ID : SA11C-CN40267

Amount of Each Receipt this Period

2500
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**SUBTOTAL** of Receipts This Page (optional).....

7500.00
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**TOTAL** This Period (last page this line number only).....

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**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 310 OF 442  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Toyota Motor North American Inc. PAC**

Mailing Address **601 13th St NW**  
**Ste 910 S**

City **Washington** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C C00542365**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **5000**

Date of Receipt  
 MM / DD / YYYY  
**03 / 31 / 2014**

Transaction ID : **SA11C-CN40751**

Amount of Each Receipt this Period  
**2500**

**B.** Full Name (Last, First, Middle Initial)  
**Trans Union Pac**

Mailing Address **555 Adams St W**

City **Chicago** State **IL** Zip Code **60661**

FEC ID number of contributing federal political committee. **C C00313700**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **4000**

Date of Receipt  
 MM / DD / YYYY  
**03 / 20 / 2014**

Transaction ID : **SA11C-CN40266**

Amount of Each Receipt this Period  
**1000**

**C.** Full Name (Last, First, Middle Initial)  
**Tuesday Group PAC**

Mailing Address **PO Box 11586**

City **Washington** State **DC** Zip Code **20008**

FEC ID number of contributing federal political committee. **C C00433060**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **7500**

Date of Receipt  
 MM / DD / YYYY  
**03 / 18 / 2014**

Transaction ID : **SA11C-CN40075**

Amount of Each Receipt this Period  
**2500**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**6000.00**

14029192932

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 311 OF 442			
	<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Union Pacific Corp. Fund For Effective Government**

Mailing Address **600 Thirteenth Street NW**  
**Suite 340**

City **Washington** State **DC** Zip Code **20005**

FEC ID number of contributing federal political committee. **C00010470**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **10000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**03 / 28 / 2014**

Transaction ID : **SA11C-CN40524**

Amount of Each Receipt this Period  
**5000**

**B.** Full Name (Last, First, Middle Initial)  
**VISA Inc. PAC**

Mailing Address **1300 Connecticut Ave NW**  
**Ste 900**

City **Washington** State **DC** Zip Code **20036**

FEC ID number of contributing federal political committee. **C00365122**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **5000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**03 / 10 / 2014**

Transaction ID : **SA11C-CN40007**

Amount of Each Receipt this Period  
**2500**

**C.** Full Name (Last, First, Middle Initial)  
**VPGC PAC**

Mailing Address **PO Box 228**

City **Hinton** State **VA** Zip Code **22831**

FEC ID number of contributing federal political committee. **C00513937**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **1000**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**03 / 07 / 2014**

Transaction ID : **SA11C-CN39972**

Amount of Each Receipt this Period  
**1000**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**8500.00**

1103192933

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 312 OF 442

(check only one)

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Western Energy Alliance PAC</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 02 / 06 / 2014	
Mailing Address 410-171 St. Ste 700		Transaction ID : SA11C-CN39393	
City Denver	State CO	Zip Code 80202	
FEC ID number of contributing federal political committee. C C00426569		Amount of Each Receipt this Period 2600	
Name of Employer Occupation		Election Cycle-to-Date 2600	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>B. Westfield Employee Federal PAC</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 28 / 2014	
Mailing Address PO Box 5001		Transaction ID : SA11C-CN40525	
City Westfield Center	State OH	Zip Code 44251	
FEC ID number of contributing federal political committee. C C00376863		Amount of Each Receipt this Period 1000	
Name of Employer Occupation		Election Cycle-to-Date 1000	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>C. Weyerhaeuser Company Pac</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 03 / 05 / 2014	
Mailing Address 400 North Capitol St NW Suite 800		Transaction ID : SA11C-CN39914	
City Washington D.c.	State DC	Zip Code 20001	
FEC ID number of contributing federal political committee. C C00007948		Amount of Each Receipt this Period 2500	
Name of Employer Occupation		Election Cycle-to-Date 5000	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

SUBTOTAL of Receipts This Page (optional) .....	6100.00
TOTAL This Period (last page this line number only) .....	238100.00

4  
3  
2  
1  
0  
9  
8  
7  
6  
5

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 313 OF 442  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Fiscal Conservative Majority Fund**

Mailing Address **228 S Washington St**  
**Ste 115**

City **Alexandria** State **VA** Zip Code **22314**

FEC ID number of contributing federal political committee. **C C00550822**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2600**

Date of Receipt  
 M /  D /  Y  
**01 / 22 / 2014**

Transaction ID : **SA12-TI6**

Amount of Each Receipt this Period  
**2600**

Transfer In Affiliated

**B.** Full Name (Last, First, Middle Initial)  
**Mr. Gene T Sykes**

Mailing Address **1827 Westridge Rd**

City **Los Angeles** State **CA** Zip Code **90049**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation  
**Goldman Sachs Investment Banker**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2600**

Date of Receipt  
 M /  D /  Y  
**01 / 22 / 2014**

Transaction ID : **SA12-TI6-1**

Amount of Each Receipt this Period  
**2600**

Transfer In Affiliated

**[MEMO ITEM]**  
Fiscal Conservative Majority Fund

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M /  D /  Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**2600.00**

**2600.00**

10203102035

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

11a  11b  11c  11d  15  
 12  13a  13b  14

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**Chapman Printing**

Mailing Address **PO Box 2867**

City **Huntington** State **WV** Zip Code **25728**

FEC ID number of contributing federal political committee. **C**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **1395.15**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 14 / 2014**

Transaction ID : **SA14-ER115**

Amount of Each Receipt this Period  
**1395.15**

Expenditure Refund

**B.** Full Name (Last, First, Middle Initial)  
**Orchid Gourmet Catering**

Mailing Address **996 E 13th Square**

City **Vero Beach** State **FL** Zip Code **32960**

FEC ID number of contributing federal political committee. **C**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **1607.04**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**02 / 28 / 2014**

Transaction ID : **SA14-ER116**

Amount of Each Receipt this Period  
**1607.04**

Expenditure Refund

**C.** Full Name (Last, First, Middle Initial) \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

FEC ID number of contributing federal political committee. **C**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: \_\_\_\_\_  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date \_\_\_\_\_

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
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Amount of Each Receipt this Period  
 \_\_\_\_\_

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

**3002.19**

**3002.19**

20130203

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 315 OF 442  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A.** Full Name (Last, First, Middle Initial)  
**BB&T**

Mailing Address 300 Summers Street

City Charleston State WV Zip Code 25301

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 714.74

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 01 / 31 / 2014

Transaction ID : SA15-RC567

Amount of Each Receipt this Period  
 84.32

Interest Earned

**B.** Full Name (Last, First, Middle Initial)  
**BB&T**

Mailing Address 300 Summers Street

City Charleston State WV Zip Code 25301

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 887.51

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 02 / 28 / 2014

Transaction ID : SA15-RC568

Amount of Each Receipt this Period  
 172.77

Interest Earned

**C.** Full Name (Last, First, Middle Initial)  
**BB&T**

Mailing Address 300 Summers Street

City Charleston State WV Zip Code 25301

FEC ID number of contributing federal political committee.  C

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 978.37

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 03 / 31 / 2014

Transaction ID : SA15-RC569

Amount of Each Receipt this Period  
 90.86

Interest Earned

**SUBTOTAL** of Receipts This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

347.95

347.95

1506202037





**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 317 OF 442  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A. WV American Water**

Full Name (Last, First, Middle Initial)  
Mailing Address **PO Box 371880**

City **Pittsburgh** State **PA** Zip Code **15250**

Purpose of Disbursement  
**Office Utilities**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: **2014**  
 Primary  General  
 Other (specify) **Primary 2014**

State: District:

Date of Disbursement: **02 / 24 / 2014**

Amount of Each Disbursement this Period: **4.12**

Transaction ID : **SB17-EX13781**

Office Utilities

**B. WV American Water**

Full Name (Last, First, Middle Initial)  
Mailing Address **PO Box 371880**

City **Pittsburgh** State **PA** Zip Code **15250**

Purpose of Disbursement  
**Office Utilities**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: **2014**  
 Primary  General  
 Other (specify) **Primary 2014**

State: District:

Date of Disbursement: **03 / 24 / 2014**

Amount of Each Disbursement this Period: **24.70**

Transaction ID : **SB17-EX13991**

Office Utilities

**C. Townsend Group**

Full Name (Last, First, Middle Initial)  
Mailing Address **1006 Pendleton St.**

City **Alexandria** State **VA** Zip Code **22314**

Purpose of Disbursement  
**PAYMENT: SEE BELOW**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: **2014**  
 Primary  General  
 Other (specify) **Primary 2014**

State: District:

Date of Disbursement: **01 / 01 / 2014**

Amount of Each Disbursement this Period: **14827.59**

Transaction ID : **SB17-EX13731**

**PAYMENT: SEE BELOW**

**SUBTOTAL** of Disbursements This Page (optional) ..... **14856.41**

**TOTAL** This Period (last page this line number only) .....

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03

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 318 OF 442
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Townsend Group</b>		Date of Disbursement MM / DD / YYYY 01 / 01 / 2014
Mailing Address 1006 Pendleton St.		Amount of Each Disbursement this Period 5000.00
City Alexandria	State VA	
Zip Code 22314	Purpose of Disbursement Fundraising Retainer	Transaction ID : SB17-EX13732
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Social Reform Kitchen</b>		Date of Disbursement MM / DD / YYYY 01 / 01 / 2014
Mailing Address 401 9th St NW		Amount of Each Disbursement this Period 2395.80
City Washington	State DC	
Zip Code 20004	Purpose of Disbursement Food and Beverage	Transaction ID : SB17-EX13733
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Charlie Palmer Steakhouse</b>		Date of Disbursement MM / DD / YYYY 01 / 01 / 2014
Mailing Address 101 Constitution Ave NW		Amount of Each Disbursement this Period 1501.35
City Washington	State DC	
Zip Code 20001	Purpose of Disbursement Food and Beverage	Transaction ID : SB17-EX13734
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

1920192940

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Tortilla Coast**

Mailing Address 400 1st Street Southeast

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Food and Beverage

003

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 01 / 2014

Amount of Each Disbursement this Period

552.38

Transaction ID : SB17-EX13735

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. W Millar & Co Catering**

Mailing Address 1335 14th St NW

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Food and Beverage

003

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
01 / 01 / 2014

Amount of Each Disbursement this Period

329.37

Transaction ID : SB17-EX13736

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Congressional Liquor**

Mailing Address 404 1st St. SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Food and Beverage

003

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
01 / 01 / 2014

Amount of Each Disbursement this Period

379.19

Transaction ID : SB17-EX13737

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional).....

0.00

**TOTAL** This Period (last page this line number only).....

1101020041

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 320 OF 442
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 18 <input type="checkbox"/> 19a <input type="checkbox"/> 19b <input type="checkbox"/> 20a <input type="checkbox"/> 20b <input type="checkbox"/> 20c <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A. Art And Soul**

Full Name (Last, First, Middle Initial)

Mailing Address **415 New Jersey Ave NW**

City **Washington** State **DC** Zip Code **20001**

Purpose of Disbursement  
**Food and Beverage**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement: **01 / 01 / 2014**

Amount of Each Disbursement this Period: **27.00**

Transaction ID : **SB17-EX13738**

**[MEMO ITEM]**

Category/Type: **003**

**B. Acqua Ai 2**

Full Name (Last, First, Middle Initial)

Mailing Address **212 7th Street SE**

City **Washington** State **DC** Zip Code **20003**

Purpose of Disbursement  
**Food and Beverage**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement: **01 / 01 / 2014**

Amount of Each Disbursement this Period: **671.00**

Transaction ID : **SB17-EX13739**

**[MEMO ITEM]**

Category/Type: **003**

**C. Giant Food**

Full Name (Last, First, Middle Initial)

Mailing Address **2901 S Glebe**

City **Arlington** State **VA** Zip Code **22206**

Purpose of Disbursement  
**Food and Beverage**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement: **01 / 01 / 2014**

Amount of Each Disbursement this Period: **81.98**

Transaction ID : **SB17-EX13740**

**[MEMO ITEM]**

Category/Type: **003**

**SUBTOTAL** of Disbursements This Page (optional)..... **0.00**

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Federal Express**

Mailing Address **Box 1140**

City **Memphis** State **TN** Zip Code **38101**

Purpose of Disbursement  
**Delivery**

**003**

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: **2014**  
 Primary  General  
 Other (specify) **Primary 2014**

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 01 / 2014

Amount of Each Disbursement this Period

**24.31**

Transaction ID : **SB17-EX13741**

[MEMO ITEM]

**B. Menus Catering**

Mailing Address **5458 3rd St NE**

City **Washington** State **DC** Zip Code **20011**

Purpose of Disbursement  
**Food and Beverage**

**003**

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: **2014**  
 Primary  General  
 Other (specify) **Primary 2014**

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 01 / 2014

Amount of Each Disbursement this Period

**1082.21**

Transaction ID : **SB17-EX13742**

[MEMO ITEM]

**C. Capitol Hill Club**

Mailing Address **300 First St.**

City **Washington** State **DC** Zip Code **20003**

Purpose of Disbursement  
**Parking**

**003**

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: **2014**  
 Primary  General  
 Other (specify) **Primary 2014**

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 01 / 2014

Amount of Each Disbursement this Period

**22.00**

Transaction ID : **SB17-EX13743**

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional).....

**0.00**

**TOTAL** This Period (last page this line number only).....

4020192043

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

PAGE 322 OF 442

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A. Beltway Catering**

Full Name (Last, First, Middle Initial)

Mailing Address 1251 Pine Hill Rd

City Mc Lean State VA Zip Code 22101

Purpose of Disbursement Food and Beverage

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) Primary 2014

State: District:

Date of Disbursement: 01 / 01 / 2014

Amount of Each Disbursement this Period: 1716.00

Transaction ID : SB17-EX13744

[MEMO ITEM]

Category/Type: 003

**B. American Bakers Assn**

Full Name (Last, First, Middle Initial)

Mailing Address 1300 I Street NW Ste 700W

City Washington State DC Zip Code 20005

Purpose of Disbursement Room Rental

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) Primary 2014

State: District:

Date of Disbursement: 01 / 01 / 2014

Amount of Each Disbursement this Period: 325.00

Transaction ID : SB17-EX13745

[MEMO ITEM]

Category/Type: 003

**c. International Republican Institute**

Full Name (Last, First, Middle Initial)

Mailing Address 1225 I St NW

City Washington State DC Zip Code 20005

Purpose of Disbursement Room Rental

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) Primary 2014

State: District:

Date of Disbursement: 01 / 01 / 2014

Amount of Each Disbursement this Period: 200.00

Transaction ID : SB17-EX13746

[MEMO ITEM]

Category/Type: 003

**SUBTOTAL** of Disbursements This Page (optional)..... 0.00

**TOTAL** This Period (last page this line number only).....

20102044

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 323 OF 442
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Credit Union National Assn</b>		Date of Disbursement MM / DD / YYYY 01 / 01 / 2014
Mailing Address 601 Pennsylvania Ave NW		Amount of Each Disbursement this Period 520.00
City Washington	State DC	
Purpose of Disbursement Room Rental	Zip Code 20004	Transaction ID : SB17-EX13747  [MEMO ITEM]
Candidate Name	Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Townsend Group</b>		Date of Disbursement MM / DD / YYYY 02 / 05 / 2014
Mailing Address 1006 Pendleton St.		Amount of Each Disbursement this Period 5976.01
City Alexandria	State VA	
Purpose of Disbursement PAYMENT: SEE BELOW	Zip Code 22314	Transaction ID : SB17-EX13949  PAYMENT: SEE BELOW
Candidate Name	Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Townsend Group</b>		Date of Disbursement MM / DD / YYYY 02 / 05 / 2014
Mailing Address 1006 Pendleton St.		Amount of Each Disbursement this Period 5000.00
City Alexandria	State VA	
Purpose of Disbursement Fundraising Retainer	Zip Code 22314	Transaction ID : SB17-EX13950  [MEMO ITEM]
Candidate Name	Category/ Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5976.01
TOTAL This Period (last page this line number only).....	

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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A. W Millar & Co Catering**

Full Name (Last, First, Middle Initial)

Mailing Address 1335 14th St NW

City Washington State DC Zip Code 20005

Purpose of Disbursement Catering

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) Primary 2014

State: District:

Date of Disbursement 02 / 05 / 2014

Amount of Each Disbursement this Period 382.41

Transaction ID : SB17-EX13951

[MEMO ITEM]

Category/Type 003

**B. Capitol Hill Club**

Full Name (Last, First, Middle Initial)

Mailing Address 300 First St.

City Washington State DC Zip Code 20003

Purpose of Disbursement Food and Beverage

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) Primary 2014

State: District:

Date of Disbursement 02 / 05 / 2014

Amount of Each Disbursement this Period 446.00

Transaction ID : SB17-EX13952

[MEMO ITEM]

Category/Type 003

**C. Townsend Group**

Full Name (Last, First, Middle Initial)

Mailing Address 1006 Pendleton St.

City Alexandria State VA Zip Code 22314

Purpose of Disbursement Parking Reimbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) Primary 2014

State: District:

Date of Disbursement 02 / 05 / 2014

Amount of Each Disbursement this Period 18.00

Transaction ID : SB17-EX13953

[MEMO ITEM]

Category/Type 003

**SUBTOTAL** of Disbursements This Page (optional) ..... 0.00

**TOTAL** This Period (last page this line number only) .....

201302040







**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 327 OF 442
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b
	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Lumos Networks</b>		Date of Disbursement MM / DD / YYYY 02 / 24 / 2014
Mailing Address PO Box 11171		Amount of Each Disbursement this Period 82.34
City Charleston	State WV	
Zip Code 25339	Purpose of Disbursement Telephone Expense	Transaction ID : SB17-EX13782
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Telephone Expense
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Lumos Networks</b>		Date of Disbursement MM / DD / YYYY 03 / 24 / 2014
Mailing Address PO Box 11171		Amount of Each Disbursement this Period 88.39
City Charleston	State WV	
Zip Code 25339	Purpose of Disbursement Telephone Expense	Transaction ID : SB17-EX13992
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Telephone Expense
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T Mobility</b>		Date of Disbursement MM / DD / YYYY 02 / 03 / 2014
Mailing Address PO Box 6463		Amount of Each Disbursement this Period 506.09
City Carol Stream	State IL	
Zip Code 60197	Purpose of Disbursement Telephone Expense	Transaction ID : SB17-EX13767
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Telephone Expense
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	676.82
<b>TOTAL</b> This Period (last page this line number only).....	

20180209

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. AT&T Mobility**

Mailing Address PO Box 6463

City State Zip Code  
Carol Stream IL 60197

Purpose of Disbursement  
Telephone Expense

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 07 / 2014

Amount of Each Disbursement this Period

551.74

Transaction ID : SB17-EX13799

Telephone Expense

**B. Goldman & Associates**

Mailing Address 1014 Bridge Rd.

City State Zip Code  
Charleston WV 25314

Purpose of Disbursement  
Office Rent

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 01 / 2014

Amount of Each Disbursement this Period

400.00

Transaction ID : SB17-EX13524

Office Rent

**C. Goldman & Associates**

Mailing Address 1014 Bridge Rd.

City State Zip Code  
Charleston WV 25314

Purpose of Disbursement  
Office Rent

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 03 / 2014

Amount of Each Disbursement this Period

400.00

Transaction ID : SB17-EX13766

Office Rent

**SUBTOTAL** of Disbursements This Page (optional).....

1351.74

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 329 OF 442
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Goldman &amp; Associates</b>		Date of Disbursement MM / DD / YYYY 03 / 03 / 2014
Mailing Address 1014 Bridge Rd.		Amount of Each Disbursement this Period 400.00
City Charleston	State WV	
Zip Code 25314	Purpose of Disbursement Office Rent	Transaction ID : SB17-EX14015
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Office Rent
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Intuit</b>		Date of Disbursement MM / DD / YYYY 01 / 23 / 2014
Mailing Address 2700 Coast Ave.		Amount of Each Disbursement this Period 182.09
City Mountain View	State CA	
Zip Code 94043	Purpose of Disbursement Check Order	Transaction ID : SB17-EX13998
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Check Order
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Winter Floral</b>		Date of Disbursement MM / DD / YYYY 01 / 07 / 2014
Mailing Address 120 Washington St. W.		Amount of Each Disbursement this Period 88.35
City Charleston	State WV	
Zip Code 25302	Purpose of Disbursement Decorations	Transaction ID : SB17-EX13716
Candidate Name	Category/ Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Decorations
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	670.44
<b>TOTAL</b> This Period (last page this line number only).....	

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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A. Patton Boggs**

Full Name (Last, First, Middle Initial)

Mailing Address **2550 M St. NW**

City **Washington** State **DC** Zip Code **20037**

Purpose of Disbursement  
**Legal Services**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: **2014**  
 Primary  General  
 Other (specify) **Primary 2014**

State: District:

Date of Disbursement: **01 / 01 / 2014**

Amount of Each Disbursement this Period: **1355.00**

Transaction ID : **SB17-EX13529**

Legal Services

Category/Type: **001**

**B. Charles Capito Jr.**

Full Name (Last, First, Middle Initial)

Mailing Address **Two Comstock Place**

City **Charleston** State **WV** Zip Code **25314**

Purpose of Disbursement  
**REIMBURSEMENT: SEE BELOW**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: **2014**  
 Primary  General  
 Other (specify) **Primary 2014**

State: District:

Date of Disbursement: **01 / 08 / 2014**

Amount of Each Disbursement this Period: **399.86**

Transaction ID : **SB17-EX13717**

REIMBURSEMENT: SEE BELOW

Category/Type: **001**

**C. USAirways**

Full Name (Last, First, Middle Initial)

Mailing Address **Yeager Airport**

City **Charleston** State **WV** Zip Code **25311**

Purpose of Disbursement  
**Baggage Fees**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: **2014**  
 Primary  General  
 Other (specify) **Primary 2014**

State: District:

Date of Disbursement: **01 / 08 / 2014**

Amount of Each Disbursement this Period: **69.36**

Transaction ID : **SB17-EX13718**

[MEMO ITEM]

Category/Type: **001**

**SUBTOTAL** of Disbursements This Page (optional)..... **1754.86**

**TOTAL** This Period (last page this line number only).....

14029182952

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Spring Hill Pastry Shop**

Mailing Address 600 Chestnut St S

City Charleston State WV Zip Code 25309

Purpose of Disbursement  
Food and Beverage

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 08 / 2014

Amount of Each Disbursement this Period

129.25
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Transaction ID : SB17-EX13719

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. Kellari Taverna**

Mailing Address 19 W 44th St

City New York State NY Zip Code 10036

Purpose of Disbursement  
Food and Beverage

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 08 / 2014

Amount of Each Disbursement this Period

40.00
-------

Transaction ID : SB17-EX13720

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Rossini's Restaurant**

Mailing Address 108 E 38th St

City New York State NY Zip Code 10016

Purpose of Disbursement  
Food and Beverage

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 08 / 2014

Amount of Each Disbursement this Period

135.00
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Transaction ID : SB17-EX13721

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional).....

0.00
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**TOTAL** This Period (last page this line number only).....

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149 20102053

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: (check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**A. Yeager Airport**

Mailing Address 100 Airport Rd

City Charleston State WV Zip Code 25311

Purpose of Disbursement Parking  
Category/Type **001**

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement  
MM / DD / YYYY  
01 / 08 / 2014

Amount of Each Disbursement this Period  
26.25

Transaction ID : SB17-EX13722

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
**B. Charles Capito Jr.**

Mailing Address Two Comstock Place

City Charleston State WV Zip Code 25314

Purpose of Disbursement REIMBURSEMENT: SEE BELOW  
Category/Type **007**

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement  
MM / DD / YYYY  
03 / 24 / 2014

Amount of Each Disbursement this Period  
809.40

Transaction ID : SB17-EX13987

REIMBURSEMENT: SEE BELOW

Full Name (Last, First, Middle Initial)  
**c. Edgewood Country Club**

Mailing Address 1600 Edgewood Drive

City Charleston State WV Zip Code 25302

Purpose of Disbursement Room Rental  
Category/Type **007**

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement  
MM / DD / YYYY  
03 / 24 / 2014

Amount of Each Disbursement this Period  
809.40

Transaction ID : SB17-EX13988

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

809.40



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 333 OF 442	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. WV Secretary Of State</b>		Date of Disbursement MM / DD / YYYY 01 / 17 / 2014
Mailing Address 200 Kanawha Blvd. E. Suite 157K		Amount of Each Disbursement this Period 1740.00
City Charleston	State WV	
Zip Code 25305	Purpose of Disbursement State Registration	Transaction ID : <b>SB17-EX13728</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State Registration
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Artistic Promotions LLC</b>		Date of Disbursement MM / DD / YYYY 01 / 27 / 2014
Mailing Address 2306 Charles Ave.		Amount of Each Disbursement this Period 1210.05
City Dunbar	State WV	
Zip Code 25064	Purpose of Disbursement Bumper & Rally Stickers	Transaction ID : <b>SB17-EX13765</b>
Candidate Name	Category/ Type 006	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Bumper & Rally Stickers
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AT&amp;T</b>		Date of Disbursement MM / DD / YYYY 03 / 24 / 2014
Mailing Address P.O. Box 8212		Amount of Each Disbursement this Period 530.76
City Aurora	State IL	
Zip Code 60572	Purpose of Disbursement Telephone Expense	Transaction ID : <b>SB17-EX13985</b>
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Telephone Expense
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3480.81
<b>TOTAL</b> This Period (last page this line number only) .....	

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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 334 OF 442			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A. Brabender & Cox**

Full Name (Last, First, Middle Initial)  
Mailing Address 1218 Grandview Ave.

City Pittsburgh State PA Zip Code 15211

Purpose of Disbursement Media Consulting  
Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement: 01 / 22 / 2014

Amount of Each Disbursement this Period: 7500.00  
Transaction ID : SB17-EX13748

Media Consulting

**B. Brabender & Cox**

Full Name (Last, First, Middle Initial)  
Mailing Address 1218 Grandview Ave.

City Pittsburgh State PA Zip Code 15211

Purpose of Disbursement Media Consulting  
Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement: 02 / 18 / 2014

Amount of Each Disbursement this Period: 2500.00  
Transaction ID : SB17-EX13784

Media Consulting

**C. BB&T**

Full Name (Last, First, Middle Initial)  
Mailing Address 300 Summers Street

City Charleston State WV Zip Code 25301

Purpose of Disbursement Bank Service Charge  
Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement: 01 / 21 / 2014

Amount of Each Disbursement this Period: 212.30  
Transaction ID : SB17-EX13997

Bank Service Charge

**SUBTOTAL** of Disbursements This Page (optional)..... 10212.30

**TOTAL** This Period (last page this line number only).....

10212.30

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 335 OF 442	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. BB&amp;T</b>		Date of Disbursement MM / DD / YYYY 03 / 21 / 2014
Mailing Address 300 Summers Street		Amount of Each Disbursement this Period 106.50
City Charleston	State WV Zip Code 25301	
Purpose of Disbursement Bank Service Charge	Category/Type 001	Transaction ID : SB17-EX14090
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	Bank Service Charge

Full Name (Last, First, Middle Initial) <b>B. Brickstreet Insurance Co</b>		Date of Disbursement MM / DD / YYYY 01 / 02 / 2014
Mailing Address PO Box 11285		Amount of Each Disbursement this Period 350.00
City Charleston	State WV Zip Code 25339	
Purpose of Disbursement Workers Comp Insurance	Category/Type 001	Transaction ID : SB17-EX13528
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	Workers Comp Insurance

Full Name (Last, First, Middle Initial) <b>C. Brickstreet Insurance Co</b>		Date of Disbursement MM / DD / YYYY 02 / 24 / 2014
Mailing Address PO Box 11285		Amount of Each Disbursement this Period 350.00
City Charleston	State WV Zip Code 25339	
Purpose of Disbursement Workers Comp Insurance	Category/Type 001	Transaction ID : SB17-EX13797
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	State: District:	Workers Comp Insurance

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	806.50
<b>TOTAL</b> This Period (last page this line number only).....	

14020192057

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Brickstreet Insurance Co</b>		Date of Disbursement MM / DD / YYYY 03 / 24 / 2014
Mailing Address PO Box 11285		Amount of Each Disbursement this Period 1179.00
City Charleston	State WV	
Zip Code 25339		Transaction ID : SB17-EX13986
Purpose of Disbursement Workers Comp Insurance	Category/ Type 001	
Candidate Name		Workers Comp Insurance
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Public Opinion Strategies</b>		Date of Disbursement MM / DD / YYYY 01 / 17 / 2014
Mailing Address 214 North Fayette St.		Amount of Each Disbursement this Period 42500.00
City Alexandria	State VA	
Zip Code 22314		Transaction ID : SB17-EX13729
Purpose of Disbursement Polling Survey	Category/ Type 005	
Candidate Name		Polling Survey
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State:	District:	

Full Name (Last, First, Middle Initial) <b>c. Public Opinion Strategies</b>		Date of Disbursement MM / DD / YYYY 03 / 07 / 2014
Mailing Address 214 North Fayette St.		Amount of Each Disbursement this Period 17844.39
City Alexandria	State VA	
Zip Code 22314		Transaction ID : SB17-EX13944
Purpose of Disbursement Polling	Category/ Type 005	
Candidate Name		Polling
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	61523.39
<b>TOTAL</b> This Period (last page this line number only).....	

14020102050

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Appalachian Power**

Mailing Address **PO Box24413**

City Canton State OH Zip Code 44701

Purpose of Disbursement  
Office Utilities

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 07 / 2014

Amount of Each Disbursement this Period

54.50
-------

Transaction ID : **SB17-EX13715**

Office Utilities

**B. Appalachian Power**

Mailing Address **PO Box24413**

City Canton State OH Zip Code 44701

Purpose of Disbursement  
Office Utilities

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 03 / 2014

Amount of Each Disbursement this Period

51.22
-------

Transaction ID : **SB17-EX13794**

Office Utilities

**C. Appalachian Power**

Mailing Address **PO Box24413**

City Canton State OH Zip Code 44701

Purpose of Disbursement  
Office Utilities

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 07 / 2014

Amount of Each Disbursement this Period

48.94
-------

Transaction ID : **SB17-EX13801**

Office Utilities

**SUBTOTAL** of Disbursements This Page (optional).....

154.66
--------

**TOTAL** This Period (last page this line number only).....

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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 338 OF 442			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A. FEC Financial Inc.**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 651374

City Potomac Falls State VA Zip Code 20165

Purpose of Disbursement  
PAYMENT: SEE BELOW

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement  
MM / DD / YYYY  
01 / 06 / 2014

Amount of Each Disbursement this Period  
3809.66

Transaction ID : SB17-EX13470

PAYMENT: SEE BELOW

Category/Type: 001

**B. FEC Financial Inc.**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 651374

City Potomac Falls State VA Zip Code 20165

Purpose of Disbursement  
Accounting Services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement  
MM / DD / YYYY  
01 / 06 / 2014

Amount of Each Disbursement this Period  
3800.00

Transaction ID : SB17-EX13471

[MEMO ITEM]

Category/Type: 001

**c. FEC Financial Inc.**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 651374

City Potomac Falls State VA Zip Code 20165

Purpose of Disbursement  
Postage Reimbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement  
MM / DD / YYYY  
01 / 06 / 2014

Amount of Each Disbursement this Period  
9.66

Transaction ID : SB17-EX13472

[MEMO ITEM]

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional)..... 3809.66

**TOTAL** This Period (last page this line number only).....

CG1820060

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. FEC Financial Inc.**

Mailing Address PO Box 651374

City Potomac Falls State VA Zip Code 20165

Purpose of Disbursement  
PAYMENT: SEE BELOW

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM	DD	YYYY
02	04	2014

Amount of Each Disbursement this Period

3253.22
---------

Transaction ID : SB17-EX13946

PAYMENT: SEE BELOW

**B. FEC Financial Inc.**

Mailing Address PO Box 651374

City Potomac Falls State VA Zip Code 20165

Purpose of Disbursement  
Accounting Services

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM	DD	YYYY
02	04	2014

Amount of Each Disbursement this Period

3250.00
---------

Transaction ID : SB17-EX13947

[MEMO ITEM]

**C. FEC Financial Inc.**

Mailing Address PO Box 651374

City Potomac Falls State VA Zip Code 20165

Purpose of Disbursement  
Postage Reimbursement

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM	DD	YYYY
02	04	2014

Amount of Each Disbursement this Period

3.22
------

Transaction ID : SB17-EX13948

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional).....

3253.22
---------

**TOTAL** This Period (last page this line number only).....

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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. FEC Financial Inc.**

Mailing Address PO Box 651374

City State Zip Code  
Potomac Falls VA 20165

Purpose of Disbursement  
PAYMENT: SEE BELOW

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 04 / 2014

Amount of Each Disbursement this Period

3354.23

Transaction ID : SB17-EX13964

PAYMENT: SEE BELOW

Full Name (Last, First, Middle Initial)

**B. FEC Financial Inc.**

Mailing Address PO Box 651374

City State Zip Code  
Potomac Falls VA 20165

Purpose of Disbursement  
Accounting Services

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 04 / 2014

Amount of Each Disbursement this Period

3250.00

Transaction ID : SB17-EX13965

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. FEC Financial Inc.**

Mailing Address PO Box 651374

City State Zip Code  
Potomac Falls VA 20165

Purpose of Disbursement  
Postage Reimbursement

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 04 / 2014

Amount of Each Disbursement this Period

104.23

Transaction ID : SB17-EX13966

[MEMO ITEM]

1020192892

SUBTOTAL of Disbursements This Page (optional).....

3354.23

TOTAL This Period (last page this line number only).....



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 341 OF 442

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Charleston Sanitary Board</b>		Date of Disbursement MM / DD / YYYY 02 / 03 / 2014
Mailing Address PO Box 7949		Amount of Each Disbursement this Period 21.87 Transaction ID : SB17-EX13768
City Charleston	State WV	
Zip Code 25356	Purpose of Disbursement Office Utilities	Office Utilities
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Charleston Sanitary Board</b>		Date of Disbursement MM / DD / YYYY 02 / 03 / 2014
Mailing Address PO Box 7949		Amount of Each Disbursement this Period 43.74 Transaction ID : SB17-EX13790
City Charleston	State WV	
Zip Code 25356	Purpose of Disbursement Office Utilities	Office Utilities
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Mountaineer Gas Co.</b>		Date of Disbursement MM / DD / YYYY 01 / 01 / 2014
Mailing Address PO Box 362		Amount of Each Disbursement this Period 79.96 Transaction ID : SB17-EX13520
City Charleston	State WV	
Zip Code 25322	Purpose of Disbursement Office Utilities	Office Utilities
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	145.57
<b>TOTAL</b> This Period (last page this line number only) .....	

0010102003

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

PAGE 342 OF 442

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A. Mountaineer Gas Co.**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 362

City Charleston State WV Zip Code 25322

Purpose of Disbursement Office Utilities

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement: 02 / 03 / 2014

Amount of Each Disbursement this Period: 178.23

Transaction ID : SB17-EX13771

Office Utilities

Category/Type: 001

**B. Mountaineer Gas Co.**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 362

City Charleston State WV Zip Code 25322

Purpose of Disbursement Office Utilities

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement: 02 / 03 / 2014

Amount of Each Disbursement this Period: 62.14

Transaction ID : SB17-EX13792

Office Utilities

Category/Type: 001

**C. Suddenlink**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 660365

City Dallas State TX Zip Code 75266

Purpose of Disbursement Internet Service

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement: 02 / 03 / 2014

Amount of Each Disbursement this Period: 173.52

Transaction ID : SB17-EX13772

Internet Service

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional)..... 413.89

**TOTAL** This Period (last page this line number only).....

4020192004

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Suddenlink**

Mailing Address PO Box 660365

City Dallas State TX Zip Code 75266

Purpose of Disbursement  
Internet Service

001

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM	DD	YYYY
02	24	2014

Amount of Each Disbursement this Period

173.52
--------

Transaction ID : SB17-EX13780

Internet Service

**B. Suddenlink**

Mailing Address PO Box 660365

City Dallas State TX Zip Code 75266

Purpose of Disbursement  
Internet Service

001

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM	DD	YYYY
03	24	2014

Amount of Each Disbursement this Period

173.52
--------

Transaction ID : SB17-EX13993

Internet Service

**C. Dixon Hughes PLLC**

Mailing Address PO Box 3049

City Asheville State NC Zip Code 28802

Purpose of Disbursement  
Accounting Services

001

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM	DD	YYYY
02	14	2014

Amount of Each Disbursement this Period

5794.78
---------

Transaction ID : SB17-EX13795

Accounting Services

**SUBTOTAL** of Disbursements This Page (optional).....

6141.82
---------

**TOTAL** This Period (last page this line number only).....

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149 20102009

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Vanco Services**

Mailing Address 12600 Whitewater Dr Ste 200

City State Zip Code  
Minnetonka MN 55343

Purpose of Disbursement  
Credit Card Service Fee

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 15 / 2014

Amount of Each Disbursement this Period

24.45

Transaction ID : SB17-EX13996

Credit Card Service Fee

**B. Vanco Services**

Mailing Address 12600 Whitewater Dr Ste 200

City State Zip Code  
Minnetonka MN 55343

Purpose of Disbursement  
Credit Card Service Fee

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 31 / 2014

Amount of Each Disbursement this Period

3.95

Transaction ID : SB17-EX13975

Credit Card Service Fee

**C. Vanco Services**

Mailing Address 12600 Whitewater Dr Ste 200

City State Zip Code  
Minnetonka MN 55343

Purpose of Disbursement  
Credit Card Service Fee

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 18 / 2014

Amount of Each Disbursement this Period

84.75

Transaction ID : SB17-EX13775

Credit Card Service Fee

**SUBTOTAL** of Disbursements This Page (optional).....

113.15

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Vanco Services**

Mailing Address 12600 Whitewater Dr Ste 200

City State Zip Code  
Minnetonka MN 55343

Purpose of Disbursement  
Credit Card Service Fee

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 18 / 2014

Amount of Each Disbursement this Period

12.45

Transaction ID : SB17-EX13999

Credit Card Service Fee

**B. Vanco Services**

Mailing Address 12600 Whitewater Dr Ste 200

City State Zip Code  
Minnetonka MN 55343

Purpose of Disbursement  
Credit Card Service Fee

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 19 / 2014

Amount of Each Disbursement this Period

1186.29

Transaction ID : SB17-EX13974

Credit Card Service Fee

**C. Vanco Services**

Mailing Address 12600 Whitewater Dr Ste 200

City State Zip Code  
Minnetonka MN 55343

Purpose of Disbursement  
Credit Card Service Fee

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 20 / 2014

Amount of Each Disbursement this Period

275.70

Transaction ID : SB17-EX13973

Credit Card Service Fee

**SUBTOTAL** of Disbursements This Page (optional).....

1474.44

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 346 OF 442
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Vanco Services</b>		Date of Disbursement MM / DD / YYYY 03 / 03 / 2014
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period 55.45
City Minnetonka	State MN	
Zip Code 55343	Purpose of Disbursement Credit Card Service Fee	Transaction ID : SB17-EX13972
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Vanco Services</b>		Date of Disbursement MM / DD / YYYY 03 / 04 / 2014
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period 73.20
City Minnetonka	State MN	
Zip Code 55343	Purpose of Disbursement Credit Card Service Fee	Transaction ID : SB17-EX13971
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Vanco Services</b>		Date of Disbursement MM / DD / YYYY 03 / 05 / 2014
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period 146.65
City Minnetonka	State MN	
Zip Code 55343	Purpose of Disbursement Credit Card Service Fee	Transaction ID : SB17-EX13970
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Service Fee
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	275.30
<b>TOTAL</b> This Period (last page this line number only) .....	

TAG 20102009

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 347 OF 442	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Vanco Services</b>		Date of Disbursement MM / DD / YYYY 03 / 07 / 2014	
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period 375.40	
City Minnetonka	State MN	Zip Code 55343	Transaction ID : <b>SB17-EX13969</b>
Purpose of Disbursement Credit Card Service Fee		Category/ Type 001	
Candidate Name		Credit Card Service Fee	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. Vanco Services</b>		Date of Disbursement MM / DD / YYYY 03 / 11 / 2014	
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period 42.72	
City Minnetonka	State MN	Zip Code 55343	Transaction ID : <b>SB17-EX13968</b>
Purpose of Disbursement Credit Card Service Fee		Category/ Type 001	
Candidate Name		Credit Card Service Fee	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State:	District:		

Full Name (Last, First, Middle Initial) <b>C. Vanco Services</b>		Date of Disbursement MM / DD / YYYY 03 / 17 / 2014	
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period 41.20	
City Minnetonka	State MN	Zip Code 55343	Transaction ID : <b>SB17-EX14017</b>
Purpose of Disbursement Credit Card Service Fee		Category/ Type 001	
Candidate Name		Credit Card Service Fee	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	459.32
<b>TOTAL</b> This Period (last page this line number only).....	

14020192009

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 348 OF 442			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21		

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Vanco Services</b>		Date of Disbursement MM / DD / YYYY 03 / 17 / 2014	
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period 31.88	
City Minnetonka	State MN	Zip Code 55343	Transaction ID : <b>SB17-EX14073</b>
Purpose of Disbursement Credit Card Service Fee		Category/ Type 001	
Candidate Name		Credit Card Service Fee	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Vanco Services</b>		Date of Disbursement MM / DD / YYYY 03 / 24 / 2014	
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period 7.63	
City Minnetonka	State MN	Zip Code 55343	Transaction ID : <b>SB17-EX14074</b>
Purpose of Disbursement Credit Card Service Fee		Category/ Type 001	
Candidate Name		Credit Card Service Fee	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State: District:			

Full Name (Last, First, Middle Initial) <b>c. Vanco Services</b>		Date of Disbursement MM / DD / YYYY 03 / 25 / 2014	
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period 413.49	
City Minnetonka	State MN	Zip Code 55343	Transaction ID : <b>SB17-EX14075</b>
Purpose of Disbursement Credit Card Service Fee		Category/ Type 001	
Candidate Name		Credit Card Service Fee	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	453.00
<b>TOTAL</b> This Period (last page this line number only).....	

14920182879



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Vanco Services**

Mailing Address 12600 Whitewater Dr Ste 200

City State Zip Code  
Minnetonka MN 55343

Purpose of Disbursement  
Credit Card Service Fee

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 26 / 2014

Amount of Each Disbursement this Period

14.20

Transaction ID : SB17-EX14076

Credit Card Service Fee

Full Name (Last, First, Middle Initial)

**B. Vanco Services**

Mailing Address 12600 Whitewater Dr Ste 200

City State Zip Code  
Minnetonka MN 55343

Purpose of Disbursement  
Credit Card Service Fee

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Amount of Each Disbursement this Period

35.45

Transaction ID : SB17-EX14077

Credit Card Service Fee

Full Name (Last, First, Middle Initial)

**C. Vanco Services**

Mailing Address 12600 Whitewater Dr Ste 200

City State Zip Code  
Minnetonka MN 55343

Purpose of Disbursement  
Credit Card Service Fee

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 31 / 2014

Amount of Each Disbursement this Period

33.35

Transaction ID : SB17-EX14078

Credit Card Service Fee

**SUBTOTAL** of Disbursements This Page (optional).....

83.00

**TOTAL** This Period (last page this line number only).....

10192871

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 350 OF 442	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Vanco Services</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2014
Mailing Address 12600 Whitewater Dr Ste 200		Amount of Each Disbursement this Period 20.15
City Minnetonka	State MN	
Zip Code 55343	Purpose of Disbursement Credit Card Service Fee	Transaction ID : SB17-EX14160
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Office &amp; Commercial Cleaning</b>		Date of Disbursement MM / DD / YYYY 01 / 01 / 2014
Mailing Address PO Box 18445		Amount of Each Disbursement this Period 200.00
City South Charleston	State WV	
Zip Code 25303	Purpose of Disbursement Office Cleaning	Transaction ID : SB17-EX13521
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Office Cleaning
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Office &amp; Commercial Cleaning</b>		Date of Disbursement MM / DD / YYYY 02 / 24 / 2014
Mailing Address PO Box 18445		Amount of Each Disbursement this Period 200.00
City South Charleston	State WV	
Zip Code 25303	Purpose of Disbursement Office Cleaning	Transaction ID : SB17-EX13783
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Office Cleaning
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	420.15
TOTAL This Period (last page this line number only).....	

1020192072

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 351 OF 442	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Office &amp; Commercial Cleaning</b>		Date of Disbursement MM / DD / YYYY 03 / 07 / 2014
Mailing Address PO Box 18445		Amount of Each Disbursement this Period 400.00
City South Charleston	State WV	
Zip Code 25303	Purpose of Disbursement Office Cleaning	Transaction ID : SB17-EX13800
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Office Cleaning
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Auge+Gray</b>		Date of Disbursement MM / DD / YYYY 01 / 10 / 2014
Mailing Address 3508 Noyes Ave		Amount of Each Disbursement this Period 150.00
City Charleston	State WV	
Zip Code 25304	Purpose of Disbursement Creative Design	Transaction ID : SB17-EX13723
Candidate Name	Category/ Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Creative Design
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Auge+Gray</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014
Mailing Address 3508 Noyes Ave		Amount of Each Disbursement this Period 475.00
City Charleston	State WV	
Zip Code 25304	Purpose of Disbursement	Transaction ID : SB17-EX13779
Candidate Name	Category/ Type 004	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Advertising Expenses
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	1025.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020102073

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 352 OF 442	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A. Anne White**

Full Name (Last, First, Middle Initial)

Mailing Address 2610 Roselane Dr

City Charleston State WV Zip Code 25302

Purpose of Disbursement REIMBURSEMENT: SEE BELOW

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) Primary 2014

State: District:

Date of Disbursement 03 / 24 / 2014

Amount of Each Disbursement this Period 134.56

Transaction ID : SB17-EX13980

REIMBURSEMENT: SEE BELOW

Category/Type 002

**B. Bigley Express**

Full Name (Last, First, Middle Initial)

Mailing Address 10 Spring St

City Charleston State WV Zip Code 25301

Purpose of Disbursement Fuel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) Primary 2014

State: District:

Date of Disbursement 03 / 24 / 2014

Amount of Each Disbursement this Period 47.90

Transaction ID : SB17-EX13981

[MEMO ITEM]

Category/Type 002

**c. Sheetz**

Full Name (Last, First, Middle Initial)

Mailing Address 1220 Johnson Ave.

City Bridgeport State WV Zip Code 26330

Purpose of Disbursement Fuel

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) Primary 2014

State: District:

Date of Disbursement 03 / 24 / 2014

Amount of Each Disbursement this Period 45.65

Transaction ID : SB17-EX13982

[MEMO ITEM]

Category/Type 002

**SUBTOTAL** of Disbursements This Page (optional) ..... 134.56

**TOTAL** This Period (last page this line number only) .....

20192974

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Little General Store**

Mailing Address 4008 Malden Dr

City Charleston State WV Zip Code 25306

Purpose of Disbursement  
Fuel

002

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

Amount of Each Disbursement this Period

15.01

Transaction ID : SB17-EX13983

[MEMO ITEM]

**B. Penguins Arena**

Mailing Address 1001 Fifth Avenue

City Pittsburgh State PA Zip Code 15219

Purpose of Disbursement  
Parking

002

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 24 / 2014

Amount of Each Disbursement this Period

26.00

Transaction ID : SB17-EX13984

[MEMO ITEM]

**C. Piryx**

Mailing Address 144 2nd St. 1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Service Fee

001

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 07 / 2014

Amount of Each Disbursement this Period

8.50

Transaction ID : SB17-EX13761

Credit Card Service Fee

01002007L

**SUBTOTAL** of Disbursements This Page (optional).....

8.50

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A. Piryx**

Full Name (Last, First, Middle Initial)

Mailing Address 144 2nd St. 1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Service Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement: 01 / 07 / 2014

Amount of Each Disbursement this Period: 2.13

Transaction ID : SB17-EX13764

Category/Type: 001

Credit Card Service Fee

**B. Piryx**

Full Name (Last, First, Middle Initial)

Mailing Address 144 2nd St. 1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Service Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement: 01 / 09 / 2014

Amount of Each Disbursement this Period: 85.00

Transaction ID : SB17-EX13762

Category/Type: 001

Credit Card Service Fee

**c. Piryx**

Full Name (Last, First, Middle Initial)

Mailing Address 144 2nd St. 1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Service Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement: 01 / 17 / 2014

Amount of Each Disbursement this Period: 0.39

Transaction ID : SB17-EX13763

Category/Type: 001

Credit Card Service Fee

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

87.52

1020192979

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A. Piryx**

Full Name (Last, First, Middle Initial)

Mailing Address 144 2nd St. 1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Service Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement: MM / DD / YYYY  
02 / 03 / 2014

Amount of Each Disbursement this Period: 59.51

Transaction ID : SB17-EX14031

Credit Card Service Fee

**B. Piryx**

Full Name (Last, First, Middle Initial)

Mailing Address 144 2nd St. 1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Service Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement: MM / DD / YYYY  
02 / 04 / 2014

Amount of Each Disbursement this Period: 172.56

Transaction ID : SB17-EX14032

Credit Card Service Fee

**C. Piryx**

Full Name (Last, First, Middle Initial)

Mailing Address 144 2nd St. 1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Service Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement: MM / DD / YYYY  
02 / 05 / 2014

Amount of Each Disbursement this Period: 301.36

Transaction ID : SB17-EX14033

Credit Card Service Fee

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

533.43

1020192977

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 356 OF 442
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 18 <input type="checkbox"/> 19a <input type="checkbox"/> 19b <input type="checkbox"/> 20a <input type="checkbox"/> 20b <input type="checkbox"/> 20c <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Piryx</b>		Date of Disbursement MM / DD / YYYY 02 / 06 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 18.96
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Transaction ID : SB17-EX14034
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement MM / DD / YYYY 02 / 07 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 66.27
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Transaction ID : SB17-EX14035
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement MM / DD / YYYY 02 / 10 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 12.75
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Transaction ID : SB17-EX14036
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Service Fee
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	97.98
<b>TOTAL</b> This Period (last page this line number only).....	

201920709



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 357 OF 442

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Piryx**

Mailing Address 144 2nd St. 1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Service Fee

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 11 / 2014

Amount of Each Disbursement this Period

97.21

Transaction ID : SB17-EX14037

Credit Card Service Fee

**B. Piryx**

Mailing Address 144 2nd St. 1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Service Fee

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 12 / 2014

Amount of Each Disbursement this Period

91.34

Transaction ID : SB17-EX14038

Credit Card Service Fee

**C. Piryx**

Mailing Address 144 2nd St. 1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Service Fee

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 13 / 2014

Amount of Each Disbursement this Period

8.50

Transaction ID : SB17-EX14039

Credit Card Service Fee

**SUBTOTAL** of Disbursements This Page (optional).....

197.05

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 358 OF 442

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Piryx**

Mailing Address 144 2nd St. 1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Service Fee

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 14 / 2014

Amount of Each Disbursement this Period

5.27
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Transaction ID : SB17-EX14040

Credit Card Service Fee

Full Name (Last, First, Middle Initial)

**B. Piryx**

Mailing Address 144 2nd St. 1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Service Fee

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 18 / 2014

Amount of Each Disbursement this Period

277.10
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Transaction ID : SB17-EX14041

Credit Card Service Fee

Full Name (Last, First, Middle Initial)

**C. Piryx**

Mailing Address 144 2nd St. 1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Service Fee

001

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 19 / 2014

Amount of Each Disbursement this Period

4.25
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Transaction ID : SB17-EX14042

Credit Card Service Fee

SUBTOTAL of Disbursements This Page (optional).....

286.62
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TOTAL This Period (last page this line number only).....

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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Piryx</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 17.01
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Transaction ID : SB17-EX14043
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement MM / DD / YYYY 02 / 21 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 34.01
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Transaction ID : SB17-EX14044
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement MM / DD / YYYY 02 / 25 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 140.22
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Transaction ID : SB17-EX14045
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Service Fee
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	191.24
<b>TOTAL</b> This Period (last page this line number only).....	

1002020001

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 360 OF 442

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Piryx**

Mailing Address 144 2nd St. 1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Service Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2014

Amount of Each Disbursement this Period

141.95
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Transaction ID : SB17-EX14046

Credit Card Service Fee

Full Name (Last, First, Middle Initial)

**B. Piryx**

Mailing Address 144 2nd St. 1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Service Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2014

Amount of Each Disbursement this Period

8.50
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Transaction ID : SB17-EX14047

Credit Card Service Fee

Full Name (Last, First, Middle Initial)

**c. Piryx**

Mailing Address 144 2nd St. 1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Service Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 05 / 2014

Amount of Each Disbursement this Period

448.38
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Transaction ID : SB17-EX14048

Credit Card Service Fee

**SUBTOTAL** of Disbursements This Page (optional).....

598.83
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**TOTAL** This Period (last page this line number only).....

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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 361 OF 442	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Piryx</b>		Date of Disbursement MM / DD / YYYY 03 / 06 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 21.25 Transaction ID : SB17-EX14049
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Credit Card Service Fee
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement MM / DD / YYYY 03 / 07 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 19.13 Transaction ID : SB17-EX14050
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Credit Card Service Fee
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement MM / DD / YYYY 03 / 10 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 25.53 Transaction ID : SB17-EX14051
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Credit Card Service Fee
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	65.91
<b>TOTAL</b> This Period (last page this line number only).....	

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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Piryx</b>		Date of Disbursement MM / DD / YYYY 03 / 11 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 70.53
City San Francisco	State CA	
Zip Code 94105		Transaction ID : SB17-EX14052
Purpose of Disbursement Credit Card Service Fee		
Candidate Name		Credit Card Service Fee
Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement MM / DD / YYYY 03 / 12 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 587.25
City San Francisco	State CA	
Zip Code 94105		Transaction ID : SB17-EX14053
Purpose of Disbursement Credit Card Service Fee		
Candidate Name		Credit Card Service Fee
Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement MM / DD / YYYY 03 / 13 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 23.38
City San Francisco	State CA	
Zip Code 94105		Transaction ID : SB17-EX14054
Purpose of Disbursement Credit Card Service Fee		
Candidate Name		Credit Card Service Fee
Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	681.16
TOTAL This Period (last page this line number only).....	

11020102094











**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 367 OF 442

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Piryx**

Mailing Address 144 2nd St. 1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Service Fee

001

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM 03	DD 27	YYYY 2014
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Amount of Each Disbursement this Period

87.13
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Transaction ID : SB17-EX14066

Credit Card Service Fee

**B. Piryx**

Mailing Address 144 2nd St. 1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Service Fee

001

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM 03	DD 28	YYYY 2014
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Amount of Each Disbursement this Period

8.50
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Transaction ID : SB17-EX14067

Credit Card Service Fee

**C. Piryx**

Mailing Address 144 2nd St. 1st Floor

City San Francisco State CA Zip Code 94105

Purpose of Disbursement  
Credit Card Service Fee

001

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM 03	DD 29	YYYY 2014
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Amount of Each Disbursement this Period

115.37
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Transaction ID : SB17-EX14068

Credit Card Service Fee

SUBTOTAL of Disbursements This Page (optional).....

211.00
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TOTAL This Period (last page this line number only).....

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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 368 OF 442
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Piryx</b>		Date of Disbursement MM / DD / YYYY 03 / 30 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 89.65
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Transaction ID : SB17-EX14069
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Piryx</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 419.95
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Transaction ID : SB17-EX14070
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Service Fee
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Piryx</b>		Date of Disbursement MM / DD / YYYY 03 / 31 / 2014
Mailing Address 144 2nd St. 1st Floor		Amount of Each Disbursement this Period 353.90
City San Francisco	State CA	
Zip Code 94105	Purpose of Disbursement Credit Card Service Fee	Transaction ID : SB17-EX14079
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Credit Card Service Fee
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	863.50
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 369 OF 442			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Dunbar Printing</b>		Date of Disbursement MM / DD / YYYY 02 / 03 / 2014
Mailing Address 1310 Ohio Ave		Amount of Each Disbursement this Period 45.26 Transaction ID : SB17-EX13791
City Dunbar	State WV Zip Code 25064	
Purpose of Disbursement Poster Printing	Category/Type 001	Poster Printing
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Dunbar Printing</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014
Mailing Address 1310 Ohio Ave		Amount of Each Disbursement this Period 399.38 Transaction ID : SB17-EX13789
City Dunbar	State WV Zip Code 25064	
Purpose of Disbursement Invitation Printing	Category/Type 001	Invitation Printing
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>c. The Lukens Co</b>		Date of Disbursement MM / DD / YYYY 01 / 01 / 2014
Mailing Address 2800 Shirlington Rd 9th Floor		Amount of Each Disbursement this Period 10906.65 Transaction ID : SB17-EX13522
City Arlington	State VA Zip Code 22206	
Purpose of Disbursement Direct Mail	Category/Type 003	Direct Mail
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	11351.29
<b>TOTAL</b> This Period (last page this line number only).....	

03102991

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 370 OF 442			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A. The Lukens Co**

Full Name (Last, First, Middle Initial)  
Mailing Address 2800 Shirlington Rd 9th Floor

City Arlington State VA Zip Code 22206

Purpose of Disbursement Direct Mail

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) Primary 2014

State: District:

Date of Disbursement: 02 / 03 / 2014

Amount of Each Disbursement this Period: 7419.14

Transaction ID : SB17-EX13793

Category/Type: 003

Direct Mail

**B. MDI Imaging**

Full Name (Last, First, Middle Initial)  
Mailing Address 21955 Cascades Pkwy

City Dulles State VA Zip Code 20166

Purpose of Disbursement Postage

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) Primary 2014

State: District:

Date of Disbursement: 01 / 14 / 2014

Amount of Each Disbursement this Period: 2415.54

Transaction ID : SB17-EX13726

Category/Type: 003

Postage

**C. BB&T Financial**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 580340

City Charlotte State NC Zip Code 28258

Purpose of Disbursement CREDIT CARD PAYMENT: SEE BELOW

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) Primary 2014

State: District:

Date of Disbursement: 01 / 02 / 2014

Amount of Each Disbursement this Period: 9277.56

Transaction ID : SB17-EX13834

Category/Type: 001

CREDIT CARD PAYMENT: SEE BELOW

**SUBTOTAL** of Disbursements This Page (optional)..... 19112.24

**TOTAL** This Period (last page this line number only).....

2010102002



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 372 OF 442
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A. South Hills Market**

Full Name (Last, First, Middle Initial)  
Mailing Address 1010 Bridge Rd.

City Charleston State WV Zip Code 25314

Purpose of Disbursement Campaign Event Expenses  
Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement: MM / DD / YYYY  
01 / 02 / 2014

Amount of Each Disbursement this Period: 111.97

Transaction ID : SB17-EX13806

**[MEMO ITEM]**  
Food and Beverage

Category/Type: 007

**B. Cava**

Full Name (Last, First, Middle Initial)  
Mailing Address 527 8th St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Campaign Event Expenses  
Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement: MM / DD / YYYY  
01 / 02 / 2014

Amount of Each Disbursement this Period: 282.05

Transaction ID : SB17-EX13807

**[MEMO ITEM]**  
Food and Beverage

Category/Type: 007

**C. AT&T**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 8212

City Aurora State IL Zip Code 60572

Purpose of Disbursement Administrative/Salary/Overhead Expenses  
Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement: MM / DD / YYYY  
01 / 02 / 2014

Amount of Each Disbursement this Period: 25.00

Transaction ID : SB17-EX13808

**[MEMO ITEM]**  
Data Plan

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional) ..... 0.00

**TOTAL** This Period (last page this line number only) .....

110320192994



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
---	------------------------------------	-------------------------------------	------------------------------------

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Rackspace Hosting**

Mailing Address 5000 Walzem Rd

City San Antonio State TX Zip Code 78218

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 02 / 2014

Amount of Each Disbursement this Period

29.00
-------

Transaction ID : SB17-EX13811

[MEMO ITEM]  
Email Hosting

Full Name (Last, First, Middle Initial)

**B. Constant Contact**

Mailing Address 1601 Trapelp Rd. Suite 329

City Waltham State MA Zip Code 02451

Purpose of Disbursement  
Advertising Expenses

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 02 / 2014

Amount of Each Disbursement this Period

75.00
-------

Transaction ID : SB17-EX13812

[MEMO ITEM]  
Email Newsletter

Full Name (Last, First, Middle Initial)

**C. Sunoco**

Mailing Address 1735 Market Street Ste LL

City Philadelphia State PA Zip Code 19103

Purpose of Disbursement  
Travel Expenses

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 02 / 2014

Amount of Each Disbursement this Period

51.42
-------

Transaction ID : SB17-EX13813

[MEMO ITEM]  
Fuel

SUBTOTAL of Disbursements This Page (optional).....

0.00
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TOTAL This Period (last page this line number only).....

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5  
4  
3  
2  
1



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 375 OF 442
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b
	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Embassy Suites</b>		Date of Disbursement MM / DD / YYYY 01 / 02 / 2014
Mailing Address 300 Court St.		Amount of Each Disbursement this Period 168.74
City Charleston	State WV Zip Code 25304	
Purpose of Disbursement Campaign Event Expenses		Transaction ID : SB17-EX13818
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Room Rental & Catering
State: District:	Category/Type 007	

Full Name (Last, First, Middle Initial) <b>B. Office Max</b>		Date of Disbursement MM / DD / YYYY 01 / 02 / 2014
Mailing Address 228 RHL Blvd.		Amount of Each Disbursement this Period 109.72
City South Charleston	State WV Zip Code 25309	
Purpose of Disbursement Administrative/Salary/Overhead Expenses		Transaction ID : SB17-EX13819
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Paper & Labels
State: District:	Category/Type 001	

Full Name (Last, First, Middle Initial) <b>C. Marathon Oil</b>		Date of Disbursement MM / DD / YYYY 01 / 02 / 2014
Mailing Address 703 Main St W		Amount of Each Disbursement this Period 81.13
City Ripley	State WV Zip Code 25271	
Purpose of Disbursement Travel Expenses		Transaction ID : SB17-EX13821
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Fuel
State: District:	Category/Type 002	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

1506270192007

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Recovery Sports Grill</b>		Date of Disbursement MM / DD / YYYY 01 / 02 / 2014
Mailing Address 600 Kanawha Blvd E		Amount of Each Disbursement this Period 63.91
City Charleston	State WV	
Zip Code 25301	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : <b>SB17-EX13822</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Food and Beverage
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Max &amp; Erma's</b>		Date of Disbursement MM / DD / YYYY 01 / 02 / 2014
Mailing Address 16 Pullman Sq		Amount of Each Disbursement this Period 37.56
City Huntington	State WV	
Zip Code 25701	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : <b>SB17-EX13823</b>
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Food and Beverage
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Walmart Super Center</b>		Date of Disbursement MM / DD / YYYY 01 / 02 / 2014
Mailing Address Rhl Blvd.		Amount of Each Disbursement this Period 310.29
City South Charleston	State WV	
Zip Code 25309	Purpose of Disbursement Campaign Event Expenses	Transaction ID : <b>SB17-EX13824</b>
Candidate Name	Category/Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Food and Beverage
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

201309182009



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 378 OF 442

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Madeleine's Restaurant**

Mailing Address 140 High St

City Morgantown State WV Zip Code 26505

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 02 / 2014

Amount of Each Disbursement this Period

80.84
-------

Transaction ID : SB17-EX13828

**[MEMO ITEM]**  
Food and Beverage

**B. Exxon Mobil**

Mailing Address 5959 Las Colinas Boulevard

City Irving State TX Zip Code 75039

Purpose of Disbursement  
Travel Expenses

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 02 / 2014

Amount of Each Disbursement this Period

139.75
--------

Transaction ID : SB17-EX13829

**[MEMO ITEM]**  
Fuel

**c. One Stop**

Mailing Address 4928 MacCorkle Ave. SE

City Charleston State WV Zip Code 25304

Purpose of Disbursement  
Travel Expenses

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 02 / 2014

Amount of Each Disbursement this Period

10.00
-------

Transaction ID : SB17-EX13830

**[MEMO ITEM]**  
Auto Maintenance

SUBTOTAL of Disbursements This Page (optional) .....

TOTAL This Period (last page this line number only) .....

0.00
------

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20102900

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Bridge Road Bistro</b>		Date of Disbursement MM / DD / YYYY 01 / 02 / 2014
Mailing Address 915 Bridge Rd		Amount of Each Disbursement this Period 1247.79
City Charleston	State WV	
Zip Code 25314	Purpose of Disbursement Campaign Event Expenses	Transaction ID : SB17-EX13831
Candidate Name	Category/Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Food and Beverage
State: District:		

Full Name (Last, First, Middle Initial) <b>B. USPS</b>		Date of Disbursement MM / DD / YYYY 01 / 02 / 2014
Mailing Address 1002 Lee St.		Amount of Each Disbursement this Period 2001.96
City Charleston	State WV	
Zip Code 25301	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX13832
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Postage
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Valvoline Instant Oil Change</b>		Date of Disbursement MM / DD / YYYY 01 / 02 / 2014
Mailing Address 399 RHL		Amount of Each Disbursement this Period 114.63
City Charleston	State WV	
Zip Code 25309	Purpose of Disbursement Travel Expenses	Transaction ID : SB17-EX13833
Candidate Name	Category/Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Auto Maintenance
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

16620192901

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. BB&T Financial**

Mailing Address PO Box 580340

City Charlotte State NC Zip Code 28258

Purpose of Disbursement  
CREDIT CARD PAYMENT: SEE BELOW

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 27 / 2014

Amount of Each Disbursement this Period

19780.57

Transaction ID : SB17-EX13898

CREDIT CARD PAYMENT: SEE BELOW

**B. 7-Eleven**

Mailing Address Oakwood Rd.

City Charleston State WV Zip Code 25314

Purpose of Disbursement  
Travel Expenses

002  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 27 / 2014

Amount of Each Disbursement this Period

91.46

Transaction ID : SB17-EX13835

[MEMO ITEM]

Fuel

**C. AC&T**

Mailing Address 1615 Wesel Blvd

City Hagerstown State MD Zip Code 21740

Purpose of Disbursement  
Travel Expenses

002  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 27 / 2014

Amount of Each Disbursement this Period

40.37

Transaction ID : SB17-EX13836

[MEMO ITEM]

Fuel

**SUBTOTAL** of Disbursements This Page (optional).....

19780.57

**TOTAL** This Period (last page this line number only).....

2013091902002



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Accuconference.com**

Mailing Address 2360 Corporate Cir

City Henderson State NV Zip Code 89074

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 27 / 2014

Amount of Each Disbursement this Period

34.00

Transaction ID : SB17-EX13837

[MEMO ITEM]  
Conference Call

Full Name (Last, First, Middle Initial)

**B. American Airline**

Mailing Address PO Box 619612

City Dallas State TX Zip Code 75261

Purpose of Disbursement  
Travel Expenses

002  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 27 / 2014

Amount of Each Disbursement this Period

522.00

Transaction ID : SB17-EX13838

[MEMO ITEM]  
Airfare

Full Name (Last, First, Middle Initial)

**C. Amtrak**

Mailing Address 50 Massachusetts Ave. NE

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Travel Expenses

002  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 27 / 2014

Amount of Each Disbursement this Period

259.00

Transaction ID : SB17-EX13839

[MEMO ITEM]  
Train Tickets

SUBTOTAL of Disbursements This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 382 OF 442	
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A. Apple Store Online**

Full Name (Last, First, Middle Initial)  
Mailing Address 1 Infinite Loop

City Cupertino State CA Zip Code 95014

Purpose of Disbursement Administrative/Salary/Overhead Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement: 02 / 27 / 2014

Amount of Each Disbursement this Period: 512.99

Transaction ID : SB17-EX13840

[MEMO ITEM]  
Computer Equipment

Category/Type: 001

**B. AT&T**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. Box 8212

City Aurora State IL Zip Code 60572

Purpose of Disbursement Administrative/Salary/Overhead Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement: 02 / 27 / 2014

Amount of Each Disbursement this Period: 50.00

Transaction ID : SB17-EX13841

[MEMO ITEM]  
Data Plan

Category/Type: 001

**C. Athletic Club**

Full Name (Last, First, Middle Initial)  
Mailing Address 300 Court St

City Charleston State WV Zip Code 25301

Purpose of Disbursement Campaign Event Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement: 02 / 27 / 2014

Amount of Each Disbursement this Period: 379.24

Transaction ID : SB17-EX13842

[MEMO ITEM]  
Food and Beverage

Category/Type: 007

**SUBTOTAL** of Disbursements This Page (optional)..... 0.00

**TOTAL** This Period (last page this line number only).....

10020102004

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 383 OF 442
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A. Best Buy**

Full Name (Last, First, Middle Initial)

Mailing Address 4000 University Town Centre Dr

City Morgantown State WV Zip Code 26501

Purpose of Disbursement Administrative/Salary/Overhead Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) Primary 2014

State: District:

Date of Disbursement  
MM / DD / YYYY  
02 / 27 / 2014

Amount of Each Disbursement this Period  
1123.52

Transaction ID : SB17-EX13843

[MEMO ITEM]  
Computer Equipment

**B. BFS Foods**

Full Name (Last, First, Middle Initial)

Mailing Address 57 Staunton Dr

City Weston State WV Zip Code 26452

Purpose of Disbursement Administrative/Salary/Overhead Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) Primary 2014

State: District:

Date of Disbursement  
MM / DD / YYYY  
02 / 27 / 2014

Amount of Each Disbursement this Period  
62.70

Transaction ID : SB17-EX13844

[MEMO ITEM]  
Food and Beverage

**C. Big Lots**

Full Name (Last, First, Middle Initial)

Mailing Address 1275 N Queen St

City Martinsburg State WV Zip Code 25402

Purpose of Disbursement Administrative/Salary/Overhead Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) Primary 2014

State: District:

Date of Disbursement  
MM / DD / YYYY  
02 / 27 / 2014

Amount of Each Disbursement this Period  
228.95

Transaction ID : SB17-EX13845

[MEMO ITEM]  
Office Furniture

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00

1103019200

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 384 OF 442	
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A. Bridge Road Bistro**

Full Name (Last, First, Middle Initial)  
Mailing Address 915 Bridge Rd

City Charleston State WV Zip Code 25314

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement  
MM / DD / YYYY  
02 / 27 / 2014

Amount of Each Disbursement this Period  
102.15

Transaction ID : SB17-EX13847

[MEMO ITEM]  
Food and Beverage

**B. Bullfeathers**

Full Name (Last, First, Middle Initial)  
Mailing Address 410 1st SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement  
MM / DD / YYYY  
02 / 27 / 2014

Amount of Each Disbursement this Period  
8.40

Transaction ID : SB17-EX13848

[MEMO ITEM]  
Food and Beverage

**C. Candy Craze**

Full Name (Last, First, Middle Initial)  
Mailing Address 4011 Noyes Ave. SE

City Charleston State WV Zip Code 25304

Purpose of Disbursement  
Campaign Event Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement  
MM / DD / YYYY  
02 / 27 / 2014

Amount of Each Disbursement this Period  
37.43

Transaction ID : SB17-EX13849

[MEMO ITEM]  
Food and Beverage

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

11020192999

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 385 OF 442	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Chick Fil A</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2014
Mailing Address 5200 Buffington Rd		Amount of Each Disbursement this Period 273.62
City Atlanta	State GA Zip Code 30349	
Purpose of Disbursement Campaign Event Expenses		Transaction ID : SB17-EX13850
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Food and Beverage
State: District:	Category/Type 007	

Full Name (Last, First, Middle Initial) <b>B. Chop House</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2014
Mailing Address 1003 Charleston Town Center		Amount of Each Disbursement this Period 578.44
City Charleston	State WV Zip Code 25389	
Purpose of Disbursement Campaign Event Expenses		Transaction ID : SB17-EX13851
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Food and Beverage
State: District:	Category/Type 007	

Full Name (Last, First, Middle Initial) <b>c. City of Charleston</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2014
Mailing Address Box 7786		Amount of Each Disbursement this Period 100.00
City Charleston	State WV Zip Code 25356	
Purpose of Disbursement Administrative/Salary/Overhead Expenses		Transaction ID : SB17-EX13852
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] City Service Fee
State: District:	Category/Type 001	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

0102007



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Dollar Tree**

Mailing Address 2458 Mountaineer Blvd

City Charleston State WV Zip Code 25309

Purpose of Disbursement  
Campaign Event Expenses

007  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 27 / 2014

Amount of Each Disbursement this Period

120.50

Transaction ID : SB17-EX13856

[MEMO ITEM]  
Paper Supplies

**B. Dunbar Printing**

Mailing Address 1310 Ohio Ave

City Dunbar State WV Zip Code 25064

Purpose of Disbursement  
Solicitation and Fundraising Expenses

003  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 27 / 2014

Amount of Each Disbursement this Period

1392.27

Transaction ID : SB17-EX13857

[MEMO ITEM]  
Direct Mail

**c. Edgewood Country Club**

Mailing Address 1600 Edgewood Drive

City Charleston State WV Zip Code 25302

Purpose of Disbursement  
Campaign Event Expenses

007  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 27 / 2014

Amount of Each Disbursement this Period

171.27

Transaction ID : SB17-EX13858

[MEMO ITEM]  
Food and Beverage

SUBTOTAL of Disbursements This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Embassy Suites**

Mailing Address 300 Court St.

City Charleston State WV Zip Code 25304

Purpose of Disbursement  
Campaign Event Expenses

007  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 27 / 2014

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17-EX13859

[MEMO ITEM]

Room Rental & Catering

**B. Exxon Mobil**

Mailing Address 5959 Las Colinas Boulevard

City Irving State TX Zip Code 75039

Purpose of Disbursement  
Travel Expenses

002  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 27 / 2014

Amount of Each Disbursement this Period

493.20

Transaction ID : SB17-EX13860

[MEMO ITEM]

Fuel

**C. Federal Express**

Mailing Address Box 1140

City Memphis State TN Zip Code 38101

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 27 / 2014

Amount of Each Disbursement this Period

431.48

Transaction ID : SB17-EX13861

[MEMO ITEM]

Delivery Expense

SUBTOTAL of Disbursements This Page (optional) .....

0.00

TOTAL This Period (last page this line number only) .....

201902910



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 389 OF 442			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Go Mart</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2014
Mailing Address <b>MacCorkle Ave.</b>		Amount of Each Disbursement this Period 184.75
City <b>Charleston</b>	State <b>WV</b>	
Zip Code <b>25304</b>		Transaction ID : <b>SB17-EX13862</b>
Purpose of Disbursement <b>Travel Expenses</b>	Category/ Type <b>002</b>	
Candidate Name		[MEMO ITEM] Fuel
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <b>Primary 2014</b>	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Goin Postal</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2014
Mailing Address <b>788 Foxcroft Ave</b>		Amount of Each Disbursement this Period 32.90
City <b>Martinsburg</b>	State <b>WV</b>	
Zip Code <b>25401</b>		Transaction ID : <b>SB17-EX13863</b>
Purpose of Disbursement <b>Administrative/Salary/Overhead Expenses</b>	Category/ Type <b>001</b>	
Candidate Name		[MEMO ITEM] Postage
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <b>Primary 2014</b>	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Hertz</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2014
Mailing Address <b>Yeager Airport</b>		Amount of Each Disbursement this Period 370.67
City <b>Charleston</b>	State <b>WV</b>	
Zip Code <b>25339</b>		Transaction ID : <b>SB17-EX13864</b>
Purpose of Disbursement <b>Travel Expenses</b>	Category/ Type <b>002</b>	
Candidate Name		[MEMO ITEM] Car Rental
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <b>Primary 2014</b>	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

110929190109

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 390 OF 442
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b
	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A. Homegoods**

Full Name (Last, First, Middle Initial)  
Mailing Address 42 Rhl

City Charleston State WV Zip Code 25309

Purpose of Disbursement Campaign Event Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement: 02 / 27 / 2014

Amount of Each Disbursement this Period: 48.73

Transaction ID : SB17-EX13865

[MEMO ITEM]  
Event Decorations

Category/Type: 007

**B. House Gift Shop**

Full Name (Last, First, Middle Initial)  
Mailing Address 529 14th St. NW

City Washington State DC Zip Code 20005

Purpose of Disbursement Campaign Event Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement: 02 / 27 / 2014

Amount of Each Disbursement this Period: 35.40

Transaction ID : SB17-EX13866

[MEMO ITEM]  
Host Gifts

Category/Type: 007

**C. Joe's Stone Crab**

Full Name (Last, First, Middle Initial)  
Mailing Address 750 15th St NW

City Washington State DC Zip Code 20005

Purpose of Disbursement Campaign Event Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement: 02 / 27 / 2014

Amount of Each Disbursement this Period: 285.00

Transaction ID : SB17-EX13867

[MEMO ITEM]  
Food and Beverage

Category/Type: 007

**SUBTOTAL** of Disbursements This Page (optional)..... 0.00

**TOTAL** This Period (last page this line number only).....

14829182912

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 391 OF 442	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A. Lowe's**

Full Name (Last, First, Middle Initial)  
Mailing Address RHL Blvd.

City South Charleston State WV Zip Code 25309

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement  
MM / DD / YYYY  
02 / 27 / 2014

Amount of Each Disbursement this Period  
74.14

Transaction ID : SB17-EX13868

[MEMO ITEM]  
Cable Ties

**B. Marathon Oil**

Full Name (Last, First, Middle Initial)  
Mailing Address 703 Main St W

City Ripley State WV Zip Code 25271

Purpose of Disbursement  
Travel Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement  
MM / DD / YYYY  
02 / 27 / 2014

Amount of Each Disbursement this Period  
80.25

Transaction ID : SB17-EX13869

[MEMO ITEM]  
Fuel

**C. Marriott**

Full Name (Last, First, Middle Initial)  
Mailing Address 200 Lee St.

City Charleston State WV Zip Code 25301

Purpose of Disbursement  
Campaign Event Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement  
MM / DD / YYYY  
02 / 27 / 2014

Amount of Each Disbursement this Period  
3681.52

Transaction ID : SB17-EX13870

[MEMO ITEM]  
Room Rental & Catering

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00

1620182013

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Crystal City Marriott**

Mailing Address 1999 Jefferson Davis Hwy

City State Zip Code  
Arlington VA 22202

Purpose of Disbursement  
Campaign Event Expenses

001  
 002  
 003  
 004  
 005  
 006  
 007  
 008  
 009  
 010  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary     General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
02 / 27 / 2014

Amount of Each Disbursement this Period

372.31

Transaction ID : SB17-EX13871

[MEMO ITEM]  
Food and Beverage

Full Name (Last, First, Middle Initial)

**B. Matchbox**

Mailing Address 713 H St. NW

City State Zip Code  
Washington DC 20001

Purpose of Disbursement  
Campaign Event Expenses

001  
 002  
 003  
 004  
 005  
 006  
 007  
 008  
 009  
 010  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary     General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
02 / 27 / 2014

Amount of Each Disbursement this Period

260.40

Transaction ID : SB17-EX13872

[MEMO ITEM]  
Food and Beverage

Full Name (Last, First, Middle Initial)

**C. Michael's**

Mailing Address 214 Rhl Blvd

City State Zip Code  
Charleston WV 25309

Purpose of Disbursement  
Campaign Event Expenses

001  
 002  
 003  
 004  
 005  
 006  
 007  
 008  
 009  
 010  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary     General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
02 / 27 / 2014

Amount of Each Disbursement this Period

91.23

Transaction ID : SB17-EX13873

[MEMO ITEM]  
Event Decorations

15  
14  
13  
12  
11  
10  
9  
8  
7  
6  
5  
4  
3  
2  
1

SUBTOTAL of Disbursements This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 393 OF 442	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A. Palomino Restaurant**

Full Name (Last, First, Middle Initial)  
Mailing Address 500 Crescent Ct

City Dallas State TX Zip Code 75201

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement  
MM / DD / YYYY  
02 / 27 / 2014

Amount of Each Disbursement this Period  
25.38

Transaction ID : SB17-EX13875

[MEMO ITEM]  
Food and Beverage

**B. Rackspace Hosting**

Full Name (Last, First, Middle Initial)  
Mailing Address 5000 Walzem Rd

City San Antonio State TX Zip Code 78218

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement  
MM / DD / YYYY  
02 / 27 / 2014

Amount of Each Disbursement this Period  
58.00

Transaction ID : SB17-EX13876

[MEMO ITEM]  
Email Hosting

**c. Recovery Sports Grill**

Full Name (Last, First, Middle Initial)  
Mailing Address 600 Kanawha Blvd E

City Charleston State WV Zip Code 25301

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement  
MM / DD / YYYY  
02 / 27 / 2014

Amount of Each Disbursement this Period  
57.41

Transaction ID : SB17-EX13877

[MEMO ITEM]  
Food and Beverage

**SUBTOTAL** of Disbursements This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

0.00

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 394 OF 442			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Reno's Roadhouse</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2014
Mailing Address 105 Nick Savas Dr		Amount of Each Disbursement this Period 52.40
City Logan	State WV Zip Code 25601	
Purpose of Disbursement Administrative/Salary/Overhead Expenses		Transaction ID : SB17-EX13878
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Food and Beverage
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Rite Aid</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2014
Mailing Address Bridge Rd.		Amount of Each Disbursement this Period 45.46
City Charleston	State WV Zip Code 25314	
Purpose of Disbursement Administrative/Salary/Overhead Expenses		Transaction ID : SB17-EX13879
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Food and Beverage
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Roland's Grocery</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2014
Mailing Address 333 Pennsylvania Ave SE		Amount of Each Disbursement this Period 14.10
City Washington	State DC Zip Code 20003	
Purpose of Disbursement Administrative/Salary/Overhead Expenses		Transaction ID : SB17-EX13880
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Food and Beverage
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

11020102010

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. South Hills Market</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2014
Mailing Address 1010 Bridge Rd.		Amount of Each Disbursement this Period 143.15
City Charleston	State WV	
Zip Code 25314	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX13881
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Food and Beverage
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Speedway</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2014
Mailing Address P.O.Box 1500		Amount of Each Disbursement this Period 52.16
City Springfield	State OH	
Zip Code 45501	Purpose of Disbursement Travel Expenses	Transaction ID : SB17-EX13882
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Fuel
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Moxxee Coffee</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2014
Mailing Address 301 Morris St		Amount of Each Disbursement this Period 11.00
City Charleston	State WV	
Zip Code 25301	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX13883
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Food and Beverage
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

1709182017







**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. United Air**

Mailing Address **Yeager Airport**

City **Charleston** State **WV** Zip Code **25311**

Purpose of Disbursement  
**Travel Expenses**

002  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) **Primary 2014**

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 27 / 2014

Amount of Each Disbursement this Period

106.00

Transaction ID : **SB17-EX13890**

**[MEMO ITEM]**  
Baggage Fees

Full Name (Last, First, Middle Initial)

**B. USAirways**

Mailing Address **Yeager Airport**

City **Charleston** State **WV** Zip Code **25311**

Purpose of Disbursement  
**Travel Expenses**

002  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) **Primary 2014**

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 27 / 2014

Amount of Each Disbursement this Period

3524.50

Transaction ID : **SB17-EX13891**

**[MEMO ITEM]**  
Airfare

Full Name (Last, First, Middle Initial)

**C. USPS**

Mailing Address **1002 Lee St.**

City **Charleston** State **WV** Zip Code **25301**

Purpose of Disbursement  
**Administrative/Salary/Overhead Expenses**

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) **Primary 2014**

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 27 / 2014

Amount of Each Disbursement this Period

718.38

Transaction ID : **SB17-EX13892**

**[MEMO ITEM]**  
Postage

**SUBTOTAL** of Disbursements This Page (optional).....

0.00

**TOTAL** This Period (last page this line number only).....

18292929

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A. Waterfront Place Hotel**

Full Name (Last, First, Middle Initial)  
Mailing Address **2 Waterfront Place**

City **Morgantown** State **WV** Zip Code **26501**

Purpose of Disbursement  
**Travel Expenses**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: **2014**  
 Primary  General  
 Other (specify) **Primary 2014**

State: District:

Date of Disbursement  
MM / DD / YYYY  
**02 / 27 / 2014**

Amount of Each Disbursement this Period  
**218.93**

Transaction ID : **SB17-EX13893**

**[MEMO ITEM]**  
Lodging

**B. McAfee**

Full Name (Last, First, Middle Initial)  
Mailing Address **2821 Mission College Blvd**

City **Santa Clara** State **CA** Zip Code **95054**

Purpose of Disbursement  
**Administrative/Salary/Overhead Expenses**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: **2014**  
 Primary  General  
 Other (specify) **Primary 2014**

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
**02 / 27 / 2014**

Amount of Each Disbursement this Period  
**49.99**

Transaction ID : **SB17-EX13894**

**[MEMO ITEM]**  
Computer Software

**C. Yeager Airport**

Full Name (Last, First, Middle Initial)  
Mailing Address **100 Airport Rd**

City **Charleston** State **WV** Zip Code **25311**

Purpose of Disbursement  
**Travel Expenses**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: **2014**  
 Primary  General  
 Other (specify) **Primary 2014**

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
**02 / 27 / 2014**

Amount of Each Disbursement this Period  
**40.00**

Transaction ID : **SB17-EX13895**

**[MEMO ITEM]**  
Parking

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**0.00**

17620102921

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Ywca**

Mailing Address 1114 Quarrier St.

City Charleston State WV Zip Code 25301

Purpose of Disbursement  
Advertising Expenses

004  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 27 / 2014

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17-EX13896

**[MEMO ITEM]**  
Print Advertising

**B. Office Max**

Mailing Address 228 RHL Blvd.

City South Charleston State WV Zip Code 25309

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 27 / 2014

Amount of Each Disbursement this Period

555.95

Transaction ID : SB17-EX13897

**[MEMO ITEM]**  
Computer Equipment

**C. The Endicott Group**

Mailing Address 209 Pennsylvania Ave SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
PAYMENT: SEE BELOW

003  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 06 / 2014

Amount of Each Disbursement this Period

19503.58

Transaction ID : SB17-EX13463

PAYMENT: SEE BELOW

20182922

SUBTOTAL of Disbursements This Page (optional).....

19503.58

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**A. The Endicott Group**

Mailing Address **209 Pennsylvania Ave SE**

City **Washington** State **DC** Zip Code **20003**

Purpose of Disbursement  
**Fundraising Retainer**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: **2014**  
 Primary  General  
 Other (specify) **Primary 2014**

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
**01 / 06 / 2014**

Amount of Each Disbursement this Period  
**5000.00**

Transaction ID : **SB17-EX13464**

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
**B. The Endicott Group**

Mailing Address **209 Pennsylvania Ave SE**

City **Washington** State **DC** Zip Code **20003**

Purpose of Disbursement  
**Fundraising Commission**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: **2014**  
 Primary  General  
 Other (specify) **Primary 2014**

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
**01 / 06 / 2014**

Amount of Each Disbursement this Period  
**12500.00**

Transaction ID : **SB17-EX13465**

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
**c. Empire State South**

Mailing Address **999 Peachtree St NE**

City **Atlanta** State **GA** Zip Code **30309**

Purpose of Disbursement  
**Catering**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: **2014**  
 Primary  General  
 Other (specify) **Primary 2014**

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y  
**01 / 06 / 2014**

Amount of Each Disbursement this Period  
**730.62**

Transaction ID : **SB17-EX13466**

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**0.00**

0102020202

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. FedEx**

Mailing Address PO Box 371461

City Pittsburgh State PA Zip Code 15250

Purpose of Disbursement  
Shipping

003  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 06 / 2014

Amount of Each Disbursement this Period

16.92

Transaction ID : SB17-EX13467

[MEMO ITEM]

**B. Harvard Club Of New York City**

Mailing Address 35 W 44th St

City New York State NY Zip Code 10036

Purpose of Disbursement  
Lodging

003  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 06 / 2014

Amount of Each Disbursement this Period

902.04

Transaction ID : SB17-EX13468

[MEMO ITEM]

**C. Uber**

Mailing Address 800 Market St

City San Francisco State CA Zip Code 94102

Purpose of Disbursement  
Taxi Service

003  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 06 / 2014

Amount of Each Disbursement this Period

354.00

Transaction ID : SB17-EX13469

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional).....

0.00

**TOTAL** This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 403 OF 442
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. The Endicott Group</b>		Date of Disbursement MM / DD / YYYY 02 / 18 / 2014
Mailing Address 209 Pennsylvania Ave SE		Amount of Each Disbursement this Period 6926.55
City Washington	State DC	
Purpose of Disbursement PAYMENT: SEE BELOW	Zip Code 20003	Transaction ID : SB17-EX13955
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	PAYMENT: SEE BELOW
State: District:		

Full Name (Last, First, Middle Initial) <b>B. The Endicott Group</b>		Date of Disbursement MM / DD / YYYY 02 / 18 / 2014
Mailing Address 209 Pennsylvania Ave SE		Amount of Each Disbursement this Period 5000.00
City Washington	State DC	
Purpose of Disbursement Fundraising Retainer	Zip Code 20003	Transaction ID : SB17-EX13956
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Hyatt Hotel Coral Gables</b>		Date of Disbursement MM / DD / YYYY 02 / 18 / 2014
Mailing Address 50 Alhambra Plaza		Amount of Each Disbursement this Period 450.00
City Miami	State FL	
Purpose of Disbursement Catering	Zip Code 33134	Transaction ID : SB17-EX13957
Candidate Name	Category/Type 003	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6926.55
TOTAL This Period (last page this line number only).....	

13010102925

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Federal Express**

Mailing Address **Box 1140**

City **Memphis** State **TN** Zip Code **38101**

Purpose of Disbursement  
**Delivery**

<b>003</b>
Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) **Primary 2014**

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		18		2014

Amount of Each Disbursement this Period

16.92
-------

Transaction ID : **SB17-EX13958**

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. United Air**

Mailing Address **Yeager Airport**

City **Charleston** State **WV** Zip Code **25311**

Purpose of Disbursement  
**Airfare**

<b>003</b>
Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) **Primary 2014**

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		18		2014

Amount of Each Disbursement this Period

627.00
--------

Transaction ID : **SB17-EX13959**

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. Amtrak**

Mailing Address **50 Massachusetts Ave. NE**

City **Washington** State **DC** Zip Code **20002**

Purpose of Disbursement  
**Train Tickets**

<b>003</b>
Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) **Primary 2014**

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
02		18		2014

Amount of Each Disbursement this Period

308.00
--------

Transaction ID : **SB17-EX13960**

[MEMO ITEM]

001020020

**SUBTOTAL** of Disbursements This Page (optional).....

0.00
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**TOTAL** This Period (last page this line number only).....

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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Delta**

Mailing Address **Yeager Airport**

City **Charleston** State **WV** Zip Code **25311**

Purpose of Disbursement  
**Airfare**

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) **Primary 2014**

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
02	18	2014

Amount of Each Disbursement this Period

468.00
--------

Transaction ID : **SB17-EX13961**

[MEMO ITEM]

**B. Palomino Restaurant**

Mailing Address **500 Crescent Ct**

City **Dallas** State **TX** Zip Code **75201**

Purpose of Disbursement  
**Food and Beverage**

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) **Primary 2014**

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
02	18	2014

Amount of Each Disbursement this Period

56.63
-------

Transaction ID : **SB17-EX13962**

[MEMO ITEM]

**C. The Endicott Group**

Mailing Address **209 Pennsylvania Ave SE**

City **Washington** State **DC** Zip Code **20003**

Purpose of Disbursement  
**REIMBURSEMENT: SEE BELOW**

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) **Primary 2014**

State: District:

Date of Disbursement

M M	D D	Y Y Y Y
03	05	2014

Amount of Each Disbursement this Period

8109.49
---------

Transaction ID : **SB17-EX14000**

REIMBURSEMENT: SEE BELOW

**SUBTOTAL** of Disbursements This Page (optional).....

8109.49
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**TOTAL** This Period (last page this line number only).....

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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 406 OF 442
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**A. The Endicott Group**

Mailing Address **209 Pennsylvania Ave SE**

City **Washington** State **DC** Zip Code **20003**

Purpose of Disbursement  
**Fundraising Retainer**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: **2014**  
 Primary  General  
 Other (specify) **Primary 2014**

State: District:

Date of Disbursement  
 M M / D D / Y Y Y Y Y Y  
**03 / 05 / 2014**

Amount of Each Disbursement this Period  
**5000.00**

Transaction ID : **SB17-EX14001**

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)  
**B. Rosewood Crescent Hotel**

Mailing Address **400 Crescent Ct**

City **Dallas** State **TX** Zip Code **75201**

Purpose of Disbursement  
**Lodging**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: **2014**  
 Primary  General  
 Other (specify) **Primary 2014**

State: District:

Date of Disbursement  
 M M / D D / Y Y Y Y Y Y  
**03 / 05 / 2014**

Amount of Each Disbursement this Period  
**946.81**

Transaction ID : **SB17-EX14002**

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)  
**C. Hertz**

Mailing Address **Yeager Airport**

City **Charleston** State **WV** Zip Code **25339**

Purpose of Disbursement  
**Car Rental**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: **2014**  
 Primary  General  
 Other (specify) **Primary 2014**

State: District:

Date of Disbursement  
 M M / D D / Y Y Y Y Y Y  
**03 / 05 / 2014**

Amount of Each Disbursement this Period  
**85.84**

Transaction ID : **SB17-EX14003**

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00

1820192029

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. FedEx**

Mailing Address PO Box 371461

City State Zip Code  
Pittsburgh PA 15250

Purpose of Disbursement  
Delivery

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 05 / 2014

Amount of Each Disbursement this Period

54.52
-------

Transaction ID : SB17-EX14004

[MEMO ITEM]

003  
Category/  
Type

**B. Amtrak**

Mailing Address 50 Massachusetts Ave. NE

City State Zip Code  
Washington DC 20002

Purpose of Disbursement  
Train Tickets

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 05 / 2014

Amount of Each Disbursement this Period

182.00
--------

Transaction ID : SB17-EX14005

[MEMO ITEM]

003  
Category/  
Type

**C. The Endicott Group**

Mailing Address 209 Pennsylvania Ave SE

City State Zip Code  
Washington DC 20003

Purpose of Disbursement  
Taxi Fare Reimbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 05 / 2014

Amount of Each Disbursement this Period

93.50
-------

Transaction ID : SB17-EX14006

[MEMO ITEM]

003  
Category/  
Type

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00
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20182929

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 408 OF 442	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A. Staples**

Full Name (Last, First, Middle Initial)  
Mailing Address 2810 Mountaineer Blvd.

City South Charleston State WV Zip Code 25309

Purpose of Disbursement Name Tags  
Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) Primary 2014

State: District:

Date of Disbursement: 03 / 05 / 2014

Amount of Each Disbursement this Period: 25.46

Transaction ID : SB17-EX14007

[MEMO ITEM]

**B. Hyatt Hotel Coral Gables**

Full Name (Last, First, Middle Initial)  
Mailing Address 50 Alhambra Plaza

City Miami State FL Zip Code 33134

Purpose of Disbursement Catering  
Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) Primary 2014

State: District:

Date of Disbursement: 03 / 05 / 2014

Amount of Each Disbursement this Period: 338.82

Transaction ID : SB17-EX14008

[MEMO ITEM]

**C. Hess**

Full Name (Last, First, Middle Initial)  
Mailing Address 1185 Avenue of the Americas  
40th Floor

City New York State NY Zip Code 10036

Purpose of Disbursement Fuel  
Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) Primary 2014

State: District:

Date of Disbursement: 03 / 05 / 2014

Amount of Each Disbursement this Period: 41.39

Transaction ID : SB17-EX14009

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... 0.00

TOTAL This Period (last page this line number only).....

03010209

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**A. Bonefish Grill**

Mailing Address **14218 SW 8th St**

City **Miami** State **FL** Zip Code **33184**

Purpose of Disbursement  
**Food and Beverage**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: **2014**  
 Primary  General  
 Other (specify) **Primary 2014**

State: District:

Date of Disbursement  
MM / DD / YYYY  
**03 / 05 / 2014**

Amount of Each Disbursement this Period  
**34.84**

Transaction ID : **SB17-EX14010**

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)  
**B. Kimpton Hotel**

Mailing Address **1717 Collins Ave**

City **Miami Beach** State **FL** Zip Code **33139**

Purpose of Disbursement  
**Lodging**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: **2014**  
 Primary  General  
 Other (specify) **Primary 2014**

State: District:

Date of Disbursement  
M M / D D / Y Y Y Y Y Y  
**03 / 05 / 2014**

Amount of Each Disbursement this Period  
**686.43**

Transaction ID : **SB17-EX14011**

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)  
**c. Enterprise**

Mailing Address **600 Corporate Park Drive**

City **Clayton** State **MO** Zip Code **63105**

Purpose of Disbursement  
**Car Rental**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: **2014**  
 Primary  General  
 Other (specify) **Primary 2014**

State: District:

Date of Disbursement  
M M M / D D / Y Y Y Y Y Y  
**03 / 05 / 2014**

Amount of Each Disbursement this Period  
**178.10**

Transaction ID : **SB17-EX14012**

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**0.00**

182031

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 410 OF 442			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Westin Diplomat</b>		Date of Disbursement M M / D D / Y Y Y Y Y Y 03 / 05 / 2014	
Mailing Address 3555 South Ocean Dr		Amount of Each Disbursement this Period 441.78	
City Hollywood State FL Zip Code 33019	Purpose of Disbursement Lodging	Transaction ID : SB17-EX14013  [MEMO ITEM]	
Candidate Name	Category/Type 003		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. National Finance Center</b>		Date of Disbursement M M / D D / Y Y Y Y Y Y 01 / 01 / 2014	
Mailing Address PO Box 790341		Amount of Each Disbursement this Period 522.22	
City Saint Louis State MO Zip Code 63179	Purpose of Disbursement Insurance Expense	Transaction ID : SB17-EX13525  Insurance Expense	
Candidate Name	Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. HGO Technology</b>		Date of Disbursement M M / D D / Y Y Y Y Y Y 02 / 03 / 2014	
Mailing Address 2100 Market		Amount of Each Disbursement this Period 151.05	
City Wheeling State WV Zip Code 26003	Purpose of Disbursement Computer Repair	Transaction ID : SB17-EX13769  Computer Repair	
Candidate Name	Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	673.27
<b>TOTAL</b> This Period (last page this line number only).....	[ ]

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 411 OF 442

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Paychex**

Mailing Address 3960 Stillman Parkway

City State Zip Code  
Glen Allen VA 25060

Purpose of Disbursement  
Payroll Service Fee

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 15 / 2014

Amount of Each Disbursement this Period

189.31

Transaction ID : SB17-EX13751

Payroll Service Fee

Full Name (Last, First, Middle Initial)

**B. Paychex**

Mailing Address 3960 Stillman Parkway

City State Zip Code  
Glen Allen VA 25060

Purpose of Disbursement  
PAYROLL: SEE BELOW

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 15 / 2014

Amount of Each Disbursement this Period

20179.82

Transaction ID : SB17-EX13760

PAYROLL: SEE BELOW

Full Name (Last, First, Middle Initial)

**c. Alison Bibbee**

Mailing Address 1210 Dudley Road

City State Zip Code  
Charleston WV 25314

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
01 / 15 / 2014

Amount of Each Disbursement this Period

1811.09

Transaction ID : SB17-EX13752

[MEMO ITEM]  
Net Salary

SUBTOTAL of Disbursements This Page (optional).....

20369.13

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Alyssa Clevenger**

Mailing Address 752 Rocky Moore Rd

City Charleston State WV Zip Code 25309

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM	DD	YYYY
01	15	2014

Amount of Each Disbursement this Period

770.47
--------

Transaction ID : SB17-EX13753

[MEMO ITEM]  
Net Salary

Full Name (Last, First, Middle Initial)

**B. Charles Flannery**

Mailing Address 307 Winwood Dr.

City Charleston State WV Zip Code 25302

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM	DD	YYYY
01	15	2014

Amount of Each Disbursement this Period

2344.89
---------

Transaction ID : SB17-EX13754

[MEMO ITEM]  
Net Salary

Full Name (Last, First, Middle Initial)

**C. Christopher Hansen**

Mailing Address 1009A Bridge Rd

City Charleston State WV Zip Code 25339

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM	DD	YYYY
01	15	2014

Amount of Each Disbursement this Period

5191.93
---------

Transaction ID : SB17-EX13755

[MEMO ITEM]  
Net Salary

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00
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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Mary Payne**

Mailing Address 1414 Louden Heights Road

Date of Disbursement

M M	D D	Y Y Y Y
01	15	2014

City Charleston State WV Zip Code 25314

Amount of Each Disbursement this Period

622.50
--------

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

001
-----

Category/  
Type

Transaction ID : SB17-EX13756

Candidate Name

[MEMO ITEM]  
Net Salary

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Full Name (Last, First, Middle Initial)

**B. Rebecca Trump**

Mailing Address 20007 Silverbell Drive

Date of Disbursement

M M	D D	Y Y Y Y
01	15	2014

City Morgantown State WV Zip Code 26505

Amount of Each Disbursement this Period

1191.59
---------

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

001
-----

Category/  
Type

Transaction ID : SB17-EX13757

Candidate Name

[MEMO ITEM]  
Net Salary

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Full Name (Last, First, Middle Initial)

**C. Anne White**

Mailing Address 2610 Roselane Dr

Date of Disbursement

M M	D D	Y Y Y Y
01	15	2014

City Charleston State WV Zip Code 25302

Amount of Each Disbursement this Period

1135.22
---------

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

001
-----

Category/  
Type

Transaction ID : SB17-EX13758

Candidate Name

[MEMO ITEM]  
Net Salary

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

SUBTOTAL of Disbursements This Page (optional).....

0.00
------

TOTAL This Period (last page this line number only).....

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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 414 OF 442

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Paychex**

Mailing Address 3960 Stillman Parkway

City State Zip Code  
Glen Allen VA 25060

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		15		2014

Amount of Each Disbursement this Period

7112.13
---------

Transaction ID : SB17-EX13759

**[MEMO ITEM]**  
Withholding Taxes

Full Name (Last, First, Middle Initial)

**B. Paychex**

Mailing Address 3960 Stillman Parkway

City State Zip Code  
Glen Allen VA 25060

Purpose of Disbursement  
PAYROLL: SEE BELOW

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		31		2014

Amount of Each Disbursement this Period

22834.09
----------

Transaction ID : SB17-EX13908

PAYROLL: SEE BELOW

Full Name (Last, First, Middle Initial)

**c. Alison Bibbee**

Mailing Address 1210 Dudley Road

City State Zip Code  
Charleston WV 25314

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
01		31		2014

Amount of Each Disbursement this Period

2437.12
---------

Transaction ID : SB17-EX13899

**[MEMO ITEM]**  
Net Salary

**SUBTOTAL** of Disbursements This Page (optional).....

22834.09
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**TOTAL** This Period (last page this line number only).....

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03010200

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Alyssa Clevenger</b>		Date of Disbursement MM / DD / YYYY 01 / 31 / 2014
Mailing Address 752 Rocky Moore Rd		Amount of Each Disbursement this Period 770.47
City Charleston	State WV	
Zip Code 25309	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX13900
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Net Salary
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Geoge Cokeley</b>		Date of Disbursement MM / DD / YYYY 01 / 31 / 2014
Mailing Address 1557 Connell Rd		Amount of Each Disbursement this Period 1184.59
City Charleston	State WV	
Zip Code 25314	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX13901
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Net Salary
State: District:		

Full Name (Last, First, Middle Initial) <b>c. Charles Flannery</b>		Date of Disbursement MM / DD / YYYY 01 / 31 / 2014
Mailing Address 307 Winwood Dr.		Amount of Each Disbursement this Period 2344.90
City Charleston	State WV	
Zip Code 25302	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX13902
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Net Salary
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

1929192937



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Anne White**

Mailing Address 2610 Roselane Dr

City Charleston State WV Zip Code 25302

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

Category/  
Type  
**001**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

**01 / 31 / 2014**

Amount of Each Disbursement this Period

**1135.22**

Transaction ID : SB17-EX13906

**[MEMO ITEM]**  
Net Salary

Full Name (Last, First, Middle Initial)

**B. Paychex**

Mailing Address 3960 Stillman Parkway

City Glen Allen State VA Zip Code 25060

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

Category/  
Type  
**001**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

**01 / 31 / 2014**

Amount of Each Disbursement this Period

**7955.76**

Transaction ID : SB17-EX13907

**[MEMO ITEM]**  
Withholding Taxes

Full Name (Last, First, Middle Initial)

**C. Paychex**

Mailing Address 3960 Stillman Parkway

City Glen Allen State VA Zip Code 25060

Purpose of Disbursement  
Payroll Service Fee

Category/  
Type  
**001**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

**01 / 31 / 2014**

Amount of Each Disbursement this Period

**87.71**

Transaction ID : SB17-EX13909

Payroll Service Fee

**SUBTOTAL** of Disbursements This Page (optional).....

**87.71**

**TOTAL** This Period (last page this line number only).....

**87.71**

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 418 OF 442	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Paychex</b>		Date of Disbursement MM / DD / YYYY 02 / 14 / 2014
Mailing Address 3960 Stillman Parkway		Amount of Each Disbursement this Period 21565.85
City Glen Allen	State VA	
Zip Code 25060	Purpose of Disbursement PAYROLL: SEE BELOW	Transaction ID : SB17-EX13919
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	PAYROLL: SEE BELOW
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Alison Bibbee</b>		Date of Disbursement MM / DD / YYYY 02 / 14 / 2014
Mailing Address 1210 Dudley Road		Amount of Each Disbursement this Period 1811.09
City Charleston	State WV	
Zip Code 25314	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX13910
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Net Salary
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Alyssa Clevenger</b>		Date of Disbursement MM / DD / YYYY 02 / 14 / 2014
Mailing Address 752 Rocky Moore Rd		Amount of Each Disbursement this Period 770.47
City Charleston	State WV	
Zip Code 25309	Purpose of Disbursement Administrative/Salary/Overhead Expenses	Transaction ID : SB17-EX13911
Candidate Name	Category/ Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	[MEMO ITEM] Net Salary
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	21565.85
TOTAL This Period (last page this line number only).....	

1920192040

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 419 OF 442
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**A. Geoge Cokeley**

Mailing Address 1557 Connell Rd

City Charleston State WV Zip Code 25314

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement  
MM / DD / YYYY  
02 / 14 / 2014

Amount of Each Disbursement this Period  
1184.59

Transaction ID : SB17-EX13912

[MEMO ITEM]  
Net Salary

Full Name (Last, First, Middle Initial)  
**B. Charles Flannery**

Mailing Address 307 Winwood Dr.

City Charleston State WV Zip Code 25302

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement  
MM / DD / YYYY  
02 / 14 / 2014

Amount of Each Disbursement this Period  
2344.89

Transaction ID : SB17-EX13913

[MEMO ITEM]  
Net Salary

Full Name (Last, First, Middle Initial)  
**c. Christopher Hansen**

Mailing Address 1009A Bridge Rd

City Charleston State WV Zip Code 25339

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement  
MM / DD / YYYY  
02 / 14 / 2014

Amount of Each Disbursement this Period  
5191.93

Transaction ID : SB17-EX13914

[MEMO ITEM]  
Net Salary

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

0.00

11020182941

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Mary Payne**

Mailing Address 1414 Louden Heights Road

City Charleston State WV Zip Code 25314

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 14 / 2014

Amount of Each Disbursement this Period

622.50

Transaction ID : SB17-EX13915

[MEMO ITEM]  
Net Salary

Full Name (Last, First, Middle Initial)

**B. Rebecca Trump**

Mailing Address 20007 Silverbell Drive

City Morgantown State WV Zip Code 26505

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 14 / 2014

Amount of Each Disbursement this Period

1191.59

Transaction ID : SB17-EX13916

[MEMO ITEM]  
Net Salary

Full Name (Last, First, Middle Initial)

**C. Anne White**

Mailing Address 2610 Roselane Dr

City Charleston State WV Zip Code 25302

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 14 / 2014

Amount of Each Disbursement this Period

1135.22

Transaction ID : SB17-EX13917

[MEMO ITEM]  
Net Salary

2562192942

SUBTOTAL of Disbursements This Page (optional).....

0.00

TOTAL This Period (last page this line number only).....



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Paychex**

Mailing Address 3960 Stillman Parkway

City State Zip Code  
Glen Allen VA 25060

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 14 / 2014

Amount of Each Disbursement this Period

7313.57

Transaction ID : SB17-EX13918

[MEMO ITEM]  
Withholding Taxes

**B. Paychex**

Mailing Address 3960 Stillman Parkway

City State Zip Code  
Glen Allen VA 25060

Purpose of Disbursement  
Payroll Service Fee

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 14 / 2014

Amount of Each Disbursement this Period

75.10

Transaction ID : SB17-EX13920

Payroll Service Fee

**C. Paychex**

Mailing Address 3960 Stillman Parkway

City State Zip Code  
Glen Allen VA 25060

Purpose of Disbursement  
PAYROLL: SEE BELOW

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

MM / DD / YYYY  
02 / 28 / 2014

Amount of Each Disbursement this Period

24618.41

Transaction ID : SB17-EX13930

PAYROLL: SEE BELOW

SUBTOTAL of Disbursements This Page (optional).....

24693.51

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Alison Bibbee</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014
Mailing Address 1210 Dudley Road		Amount of Each Disbursement this Period 1811.09
City Charleston	State WV	
Zip Code 25314		Transaction ID : SB17-EX13921
Purpose of Disbursement Administrative/Salary/Overhead Expenses		
Candidate Name		[MEMO ITEM] Net Salary
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State:	District:	Category/ Type 001

Full Name (Last, First, Middle Initial) <b>B. Alyssa Clevenger</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014
Mailing Address 752 Rocky Moore Rd		Amount of Each Disbursement this Period 770.47
City Charleston	State WV	
Zip Code 25309		Transaction ID : SB17-EX13922
Purpose of Disbursement Administrative/Salary/Overhead Expenses		
Candidate Name		[MEMO ITEM] Net Salary
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State:	District:	Category/ Type 001

Full Name (Last, First, Middle Initial) <b>c. Geoge Cokeley</b>		Date of Disbursement MM / DD / YYYY 02 / 28 / 2014
Mailing Address 1557 Connell Rd		Amount of Each Disbursement this Period 1184.59
City Charleston	State WV	
Zip Code 25314		Transaction ID : SB17-EX13923
Purpose of Disbursement Administrative/Salary/Overhead Expenses		
Candidate Name		[MEMO ITEM] Net Salary
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State:	District:	Category/ Type 001

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Charles Flannery**

Mailing Address 307 Winwood Dr.

City Charleston State WV Zip Code 25302

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 28 / 2014

Amount of Each Disbursement this Period

4133.31
---------

Transaction ID : SB17-EX13924

**[MEMO ITEM]**  
Net Salary

Full Name (Last, First, Middle Initial)

**B. Christopher Hansen**

Mailing Address 1009A Bridge Rd

City Charleston State WV Zip Code 25339

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 28 / 2014

Amount of Each Disbursement this Period

5191.93
---------

Transaction ID : SB17-EX13925

**[MEMO ITEM]**  
Net Salary

Full Name (Last, First, Middle Initial)

**C. Mary Payne**

Mailing Address 1414 Loudon Heights Road

City Charleston State WV Zip Code 25314

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 28 / 2014

Amount of Each Disbursement this Period

622.51
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Transaction ID : SB17-EX13926

**[MEMO ITEM]**  
Net Salary

149  
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**SUBTOTAL** of Disbursements This Page (optional).....

0.00
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**TOTAL** This Period (last page this line number only).....

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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Rebecca Trump**

Mailing Address 20007 Silverbell Drive

City State Zip Code  
Morgantown WV 26505

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

001
Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 28 / 2014

Amount of Each Disbursement this Period

1191.59
---------

Transaction ID : SB17-EX13927

[MEMO ITEM]  
Net Salary

Full Name (Last, First, Middle Initial)

**B. Anne White**

Mailing Address 2610 Roselane Dr

City State Zip Code  
Charleston WV 25302

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

001
Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 28 / 2014

Amount of Each Disbursement this Period

1135.22
---------

Transaction ID : SB17-EX13928

[MEMO ITEM]  
Net Salary

Full Name (Last, First, Middle Initial)

**C. Paychex**

Mailing Address 3960 Stillman Parkway

City State Zip Code  
Glen Allen VA 25060

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

001
Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
02 / 28 / 2014

Amount of Each Disbursement this Period

8577.70
---------

Transaction ID : SB17-EX13929

[MEMO ITEM]  
Withholding Taxes

SUBTOTAL of Disbursements This Page (optional).....

0.00
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TOTAL This Period (last page this line number only).....

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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: (check only one)  
 17     18     19a     19b  
 20a     20b     20c     21  
 PAGE 425 OF 442

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**A. Paychex**

Mailing Address **3960 Stillman Parkway**

City **Glen Allen** State **VA** Zip Code **25060**

Purpose of Disbursement  
**Payroll Service Fee**

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For: 2014  
 Primary  General  
 Other (specify) **Primary 2014**

State: District:

Date of Disbursement  
 M M / D D / Y Y Y Y  
**02 / 28 / 2014**

Amount of Each Disbursement this Period  
**75.31**

Transaction ID : **SB17-EX13931**

Payroll Service Fee

Full Name (Last, First, Middle Initial)  
**B. Paychex**

Mailing Address **3960 Stillman Parkway**

City **Glen Allen** State **VA** Zip Code **25060**

Purpose of Disbursement  
**PAYROLL: SEE BELOW**

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For: 2014  
 Primary  General  
 Other (specify) **Primary 2014**

State: District:

Date of Disbursement  
 M M / D D / Y Y Y Y  
**03 / 14 / 2014**

Amount of Each Disbursement this Period  
**15352.44**

Transaction ID : **SB17-EX13940**

PAYROLL: SEE BELOW

Full Name (Last, First, Middle Initial)  
**c. Alison Bibbee**

Mailing Address **1210 Dudley Road**

City **Charleston** State **WV** Zip Code **25314**

Purpose of Disbursement  
**Administrative/Salary/Overhead Expenses**

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For: 2014  
 Primary  General  
 Other (specify) **Primary 2014**

State: District:

Date of Disbursement  
 M M / D D / Y Y Y Y  
**03 / 14 / 2014**

Amount of Each Disbursement this Period  
**2592.41**

Transaction ID : **SB17-EX13932**

**[MEMO ITEM]**  
Net Salary

**SUBTOTAL** of Disbursements This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

**15427.75**

1509192947

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)  
**A. Alyssa Clevenger**

Mailing Address **752 Rocky Moore Rd**

City **Charleston** State **WV** Zip Code **25309**

Purpose of Disbursement  
**Administrative/Salary/Overhead Expenses**

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) **Primary 2014**

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 14 / 2014

Amount of Each Disbursement this Period

770.47
--------

Transaction ID : **SB17-EX13933**

**[MEMO ITEM]**  
Net Salary

**B. Geoge Cokeley**

Mailing Address **1557 Connell Rd**

City **Charleston** State **WV** Zip Code **25314**

Purpose of Disbursement  
**Administrative/Salary/Overhead Expenses**

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) **Primary 2014**

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 14 / 2014

Amount of Each Disbursement this Period

1184.59
---------

Transaction ID : **SB17-EX13934**

**[MEMO ITEM]**  
Net Salary

**C. Charles Flannery**

Mailing Address **307 Winwood Dr.**

City **Charleston** State **WV** Zip Code **25302**

Purpose of Disbursement  
**Administrative/Salary/Overhead Expenses**

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) **Primary 2014**

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 14 / 2014

Amount of Each Disbursement this Period

3265.23
---------

Transaction ID : **SB17-EX13935**

**[MEMO ITEM]**  
Net Salary

**SUBTOTAL** of Disbursements This Page (optional).....

0.00
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**TOTAL** This Period (last page this line number only).....

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03192949

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Mary Payne</b>		Date of Disbursement MM / DD / YYYY 03 / 14 / 2014
Mailing Address 1414 Louden Heights Road		Amount of Each Disbursement this Period 622.50
City Charleston	State WV	
Zip Code 25314		Transaction ID : SB17-EX13936
Purpose of Disbursement Administrative/Salary/Overhead Expenses		
Candidate Name		[MEMO ITEM] Net Salary
Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Rebecca Trump</b>		Date of Disbursement MM / DD / YYYY 03 / 14 / 2014
Mailing Address 20007 Silverbell Drive		Amount of Each Disbursement this Period 1191.59
City Morgantown	State WV	
Zip Code 26505		Transaction ID : SB17-EX13937
Purpose of Disbursement Administrative/Salary/Overhead Expenses		
Candidate Name		[MEMO ITEM] Net Salary
Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Anne White</b>		Date of Disbursement MM / DD / YYYY 03 / 14 / 2014
Mailing Address 2610 Roselane Dr		Amount of Each Disbursement this Period 1135.22
City Charleston	State WV	
Zip Code 25302		Transaction ID : SB17-EX13938
Purpose of Disbursement Administrative/Salary/Overhead Expenses		
Candidate Name		[MEMO ITEM] Net Salary
Category/Type 001		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	
State: District:		

SUBTOTAL of Disbursements This Page (optional) .....	0.00
TOTAL This Period (last page this line number only) .....	

030102040

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 428 OF 442

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Paychex**

Mailing Address 3960 Stillman Parkway

City State Zip Code  
Glen Allen VA 25060

Purpose of Disbursement  
Administrative/Salary/Overhead Expenses

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
03 / 14 / 2014

Amount of Each Disbursement this Period

4590.43

Transaction ID : SB17-EX13939

**[MEMO ITEM]**  
Withholding Taxes

Full Name (Last, First, Middle Initial)

**B. Paychex**

Mailing Address 3960 Stillman Parkway

City State Zip Code  
Glen Allen VA 25060

Purpose of Disbursement  
Payroll Service Fee

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
03 / 14 / 2014

Amount of Each Disbursement this Period

75.10

Transaction ID : SB17-EX13941

Payroll Service Fee

Full Name (Last, First, Middle Initial)

**C. Paychex**

Mailing Address 3960 Stillman Parkway

City State Zip Code  
Glen Allen VA 25060

Purpose of Disbursement  
PAYROLL: SEE BELOW

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
03 / 31 / 2014

Amount of Each Disbursement this Period

14309.99

Transaction ID : SB17-EX14029

PAYROLL: SEE BELOW

**SUBTOTAL** of Disbursements This Page (optional).....

14385.09

**TOTAL** This Period (last page this line number only).....



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A. Alison Bibbee**

Full Name (Last, First, Middle Initial)

Mailing Address 1210 Dudley Road

City Charleston State WV Zip Code 25314

Purpose of Disbursement Administrative/Salary/Overhead Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
03 / 31 / 2014

Amount of Each Disbursement this Period

1811.09

Transaction ID : SB17-EX14021

**[MEMO ITEM]**  
Net Salary

**B. Alyssa Clevenger**

Full Name (Last, First, Middle Initial)

Mailing Address 752 Rocky Moore Rd

City Charleston State WV Zip Code 25309

Purpose of Disbursement Administrative/Salary/Overhead Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
03 / 31 / 2014

Amount of Each Disbursement this Period

770.47

Transaction ID : SB17-EX14022

**[MEMO ITEM]**  
Net Salary

**C. Geoge Cokeley**

Full Name (Last, First, Middle Initial)

Mailing Address 1557 Connell Rd

City Charleston State WV Zip Code 25314

Purpose of Disbursement Administrative/Salary/Overhead Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
03 / 31 / 2014

Amount of Each Disbursement this Period

1184.59

Transaction ID : SB17-EX14023

**[MEMO ITEM]**  
Net Salary

**SUBTOTAL** of Disbursements This Page (optional)..... 0.00

**TOTAL** This Period (last page this line number only).....

11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 431 OF 442	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A. Anne White**

Full Name (Last, First, Middle Initial)  
Anne White

Mailing Address 2610 Roselane Dr

City Charleston State WV Zip Code 25302

Purpose of Disbursement Administrative/Salary/Overhead Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement  
03 / 31 / 2014

Amount of Each Disbursement this Period  
1135.22

Transaction ID : SB17-EX14027

[MEMO ITEM]  
Net Salary

**B. Paychex**

Full Name (Last, First, Middle Initial)  
Paychex

Mailing Address 3960 Stillman Parkway

City Glen Allen State VA Zip Code 25060

Purpose of Disbursement Administrative/Salary/Overhead Expenses

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement  
03 / 31 / 2014

Amount of Each Disbursement this Period  
4329.29

Transaction ID : SB17-EX14028

[MEMO ITEM]  
Withholding Taxes

**C. Paychex**

Full Name (Last, First, Middle Initial)  
Paychex

Mailing Address 3960 Stillman Parkway

City Glen Allen State VA Zip Code 25060

Purpose of Disbursement Payroll Service Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement  
03 / 31 / 2014

Amount of Each Disbursement this Period  
71.90

Transaction ID : SB17-EX14030

Payroll Service Fee

**SUBTOTAL** of Disbursements This Page (optional)..... 71.90

**TOTAL** This Period (last page this line number only).....

14020102953

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Rebecca Trump</b>		Date of Disbursement MM / DD / YYYY 01 / 14 / 2014
Mailing Address 20007 Silverbell Drive		Amount of Each Disbursement this Period 258.33
City Morgantown	State WV	
Zip Code 26505	Purpose of Disbursement Mileage Reimbursement	Transaction ID : <b>SB17-EX13724</b>
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Mileage Reimbursement
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Rebecca Trump</b>		Date of Disbursement MM / DD / YYYY 02 / 05 / 2014
Mailing Address 20007 Silverbell Drive		Amount of Each Disbursement this Period 172.44
City Morgantown	State WV	
Zip Code 26505	Purpose of Disbursement Mileage Reimbursement	Transaction ID : <b>SB17-EX13785</b>
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Mileage Reimbursement
State:	District:	

Full Name (Last, First, Middle Initial) <b>c. Rebecca Trump</b>		Date of Disbursement MM / DD / YYYY 02 / 11 / 2014
Mailing Address 20007 Silverbell Drive		Amount of Each Disbursement this Period 26.41
City Morgantown	State WV	
Zip Code 26505	Purpose of Disbursement Mileage Reimbursement	Transaction ID : <b>SB17-EX13786</b>
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Mileage Reimbursement
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	457.18
<b>TOTAL</b> This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial) <b>A. Rebecca Trump</b>		Date of Disbursement MM / DD / YYYY 02 / 21 / 2014
Mailing Address 20007 Silverbell Drive		Amount of Each Disbursement this Period 108.41
City Morgantown	State WV	
Purpose of Disbursement Mileage Reimbursement	Zip Code 26505	Transaction ID : SB17-EX13787
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Mileage Reimbursement
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Rebecca Trump</b>		Date of Disbursement MM / DD / YYYY 02 / 24 / 2014
Mailing Address 20007 Silverbell Drive		Amount of Each Disbursement this Period 26.76
City Morgantown	State WV	
Purpose of Disbursement Mileage Reimbursement	Zip Code 26505	Transaction ID : SB17-EX13788
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Mileage Reimbursement
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Rebecca Trump</b>		Date of Disbursement MM / DD / YYYY 03 / 03 / 2014
Mailing Address 20007 Silverbell Drive		Amount of Each Disbursement this Period 88.68
City Morgantown	State WV	
Purpose of Disbursement Mileage Reimbursement	Zip Code 26505	Transaction ID : SB17-EX13778
Candidate Name	Category/ Type 002	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primary 2014	Mileage Reimbursement
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	223.85
<b>TOTAL</b> This Period (last page this line number only).....	

14020192055

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

PAGE 434 OF 442

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A. Rebecca Trump**

Full Name (Last, First, Middle Initial)

Mailing Address 20007 Silverbell Drive

City Morgantown State WV Zip Code 26505

Purpose of Disbursement Mileage Reimbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) Primary 2014

State: District:

Date of Disbursement: 03 / 17 / 2014

Amount of Each Disbursement this Period: 128.92

Transaction ID: SB17-EX13979

Mileage Reimbursement

Category/Type: 002

**B. Signal Labs Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 106 Lincoln Blvd Suite 106

City San Francisco State CA Zip Code 94129

Purpose of Disbursement License Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) Primary 2014

State: District:

Date of Disbursement: 01 / 01 / 2014

Amount of Each Disbursement this Period: 750.00

Transaction ID: SB17-EX13507

License Fee

Category/Type: 001

**C. Signal Labs Inc.**

Full Name (Last, First, Middle Initial)

Mailing Address 106 Lincoln Blvd Suite 106

City San Francisco State CA Zip Code 94129

Purpose of Disbursement License Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) Primary 2014

State: District:

Date of Disbursement: 01 / 30 / 2014

Amount of Each Disbursement this Period: 750.00

Transaction ID: SB17-EX13774

License Fee

Category/Type: 001

**SUBTOTAL** of Disbursements This Page (optional)..... 1628.92

**TOTAL** This Period (last page this line number only).....

1001020000

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Alyssa Clevenger**

Mailing Address 752 Rocky Moore Rd

City Charleston State WV Zip Code 25309

Purpose of Disbursement  
REIMBURSEMENT: SEE BELOW

001
Category/ Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 24 / 2014

Amount of Each Disbursement this Period

31.26
-------

Transaction ID : SB17-EX13989

REIMBURSEMENT: SEE BELOW

**B. U.S. Postmaster**

Mailing Address Lee Street

City Charleston State WV Zip Code 25301

Purpose of Disbursement  
Postage

001
Category/ Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
03 / 24 / 2014

Amount of Each Disbursement this Period

31.26
-------

Transaction ID : SB17-EX13990

[MEMO ITEM]

**C. Highfields Capital Management**

Mailing Address 200 Clarendon St 59th Fl

City Boston State MA Zip Code 02116

Purpose of Disbursement  
Facility Rental & Catering

007
Category/ Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
01 / 17 / 2014

Amount of Each Disbursement this Period

993.31
--------

Transaction ID : SB17-EX13727

Facility Rental & Catering

**SUBTOTAL** of Disbursements This Page (optional).....

1024.57
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**TOTAL** This Period (last page this line number only).....

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**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Highmark Blue Cross Blue Shield**

Mailing Address PO Box 1948

City Parkersburg State WV Zip Code 26102

Purpose of Disbursement  
Insurance Expense

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

01 / 20 / 2014

Amount of Each Disbursement this Period

306.23

Transaction ID : SB17-EX13749

Insurance Expense

Full Name (Last, First, Middle Initial)

**B. Highmark Blue Cross Blue Shield**

Mailing Address PO Box 1948

City Parkersburg State WV Zip Code 26102

Purpose of Disbursement  
Insurance Expense

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

03 / 03 / 2014

Amount of Each Disbursement this Period

306.23

Transaction ID : SB17-EX14016

Insurance Expense

Full Name (Last, First, Middle Initial)

**C. Highmark Blue Cross Blue Shield**

Mailing Address PO Box 1948

City Parkersburg State WV Zip Code 26102

Purpose of Disbursement  
Insurance Expense

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

03 / 04 / 2014

Amount of Each Disbursement this Period

291.79

Transaction ID : SB17-EX14089

Insurance Expense

1103201820950

SUBTOTAL of Disbursements This Page (optional).....

904.25

TOTAL This Period (last page this line number only).....



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Strategic Marketing & Mailing**

Mailing Address 3002 N Apollo Drive

City State Zip Code  
Champaign IL 61822

Purpose of Disbursement  
Postage Expense

001  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

03 / 04 / 2014

Amount of Each Disbursement this Period

5582.35

Transaction ID : SB17-EX13776

Postage Expense

Full Name (Last, First, Middle Initial)

**B. Logan Country Club**

Mailing Address 715 Lincoln Highway

City State Zip Code  
Champmanville WV 25508

Purpose of Disbursement  
Catering Expense

007  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

03 / 07 / 2014

Amount of Each Disbursement this Period

1054.00

Transaction ID : SB17-EX13777

Catering Expense

Full Name (Last, First, Middle Initial)

**C. Orchid Gourmet Catering**

Mailing Address 996 E 13th Square

City State Zip Code  
Vero Beach FL 32960

Purpose of Disbursement  
Catering Expense

007  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

03 / 07 / 2014

Amount of Each Disbursement this Period

4466.13

Transaction ID : SB17-EX13796

Catering Expense

SUBTOTAL of Disbursements This Page (optional).....

11102.48

TOTAL This Period (last page this line number only).....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 438 OF 442

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

Full Name (Last, First, Middle Initial)

**A. Planet Direct**

Mailing Address 7251 Coppermine Drive

City Manassas State VA Zip Code 20109

Purpose of Disbursement  
Postage Expense

Category/  
Type  
**006**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

**02 / 25 / 2014**

Amount of Each Disbursement this Period

**2102.51**

Transaction ID : SB17-EX13798

Postage Expense

Full Name (Last, First, Middle Initial)

**B. Geoge Cokeley**

Mailing Address 1557 Connell Rd

City Charleston State WV Zip Code 25314

Purpose of Disbursement  
Mileage Reimbursement

Category/  
Type  
**002**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

**03 / 07 / 2014**

Amount of Each Disbursement this Period

**425.37**

Transaction ID : SB17-EX13943

Mileage Reimbursement

Full Name (Last, First, Middle Initial)

**c. Mr. Gregory P Mesack**

Mailing Address 3844 26th St N

City Arlington State VA Zip Code 22207

Purpose of Disbursement  
IN-KIND RECEIVED Catering & Facility Rental

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement

**03 / 13 / 2014**

Amount of Each Disbursement this Period

**1180.00**

Transaction ID : SB17-CN41347

In-Kind Received Catering & Facility Rental

001092000

**SUBTOTAL** of Disbursements This Page (optional).....

**3707.88**

**TOTAL** This Period (last page this line number only).....

**358805.87**

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

17 20a     18 20b     19a 20c     19b 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A. Precision Pipe LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 3314 56th Street

City Eau Claire State WI Zip Code 54703

Purpose of Disbursement Contribution Ref to Partnership

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) Primary 2014

State: District:

Date of Disbursement 03 / 31 / 2014

Amount of Each Disbursement this Period 750.00

Transaction ID : SB20a-CR51

Refund of Contribution

**B. Michael Callen**

Full Name (Last, First, Middle Initial)

Mailing Address 1420 Western Ave

City Morgantown State WV Zip Code 26505

Purpose of Disbursement Contribution Ref to Individual

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) Primary 2014

State: District:

Date of Disbursement 03 / 31 / 2014

Amount of Each Disbursement this Period 2600.00

Transaction ID : SB20a-CR50

Refund of Contribution

**C. Mr. Robert Reynolds**

Full Name (Last, First, Middle Initial)

Mailing Address 153 Garfield Rd

City Concord State MA Zip Code 01742

Purpose of Disbursement Contribution Ref to Individual

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify) Primary 2014

State: District:

Date of Disbursement 03 / 28 / 2014

Amount of Each Disbursement this Period 2600.00

Transaction ID : SB20a-CR53

Refund of 12/27/13 Contribution

**SUBTOTAL** of Disbursements This Page (optional) ..... 5950.00

**TOTAL** This Period (last page this line number only) .....

100102001

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A. Mr. Robert Reynolds**

Full Name (Last, First, Middle Initial)

Mailing Address 153 Garfield Rd

City Concord State MA Zip Code 01742

Purpose of Disbursement  
Contribution Ref to Individual

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) General 2014

State: District:

Date of Disbursement  
MM / DD / YYYY  
03 / 28 / 2014

Amount of Each Disbursement this Period  
2600.00

Transaction ID : SB20a-CR54

Refund of 12/27/2012 Contribution

**B. Ms. Judith Smith**

Full Name (Last, First, Middle Initial)

Mailing Address 325 53rd St E

City New York State NY Zip Code 10022

Purpose of Disbursement  
Contribution Ref to Individual

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Primary 2014

State: District:

Date of Disbursement  
MM / DD / YYYY  
03 / 31 / 2014

Amount of Each Disbursement this Period  
400.00

Transaction ID : SB20a-CR55

Refund of 03/22/14 Contribution

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:

Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

3000.00

8950.00

2010102962



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**Capito For West Virginia**

**A. United Way Of Central WV**

Full Name (Last, First, Middle Initial)  
Mailing Address **One United Way Square**

City **Charleston** State **WV** Zip Code **25301**

Purpose of Disbursement  
**Donation**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: **2014**  
 Primary  General  
 Other (specify) **Primary 2014**

State: District:

Date of Disbursement  
**01 / 23 / 2014**

Amount of Each Disbursement this Period  
**500.00**

Transaction ID : **SB21-EX14014**

Donation

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**500.00**

**500.00**

201802094

ANCY ERICKSON  
SECRETARY

DANA K. MCCALLUM  
SUPERINTENDENT  
HARRIS WATTS OFFICE BUILDING  
SUITE 232  
WASHINGTON, DC 20510-71  
PHONE (202) 224-0322

# United States Senate

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**DH**

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