

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**

For Other Than An Authorized Committee

RECEIVED
FEC MAIL CENTER
2018 FEB -5 AM 9:47

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

REGENERATE WEST VIRGINIA

ADDRESS (number and street)

PO BOX 11376



Check if different than previously reported. (ACC)

CHARLESTON WV 25339-1376

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

00551770

3. IS THIS REPORT

NEW (N) OR

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

(c)

- 12-Day PRE-Election Report for the:
 - Primary (12P)
 - General (12G)
 - Runoff (12R)
 - Convention (12C)
 - Special (12S)

Election on

MEM / DDD / YYYY

in the State of

CA

(d)

- 30-Day POST-Election Report for the:
 - General (30G)
 - Runoff (30R)
 - Special (30S)

Election on

MEM / DDD / YYYY

in the State of

CA

5. Covering Period

07 / 01 / 2017

through

12 / 31 / 2017

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 JULIE ANN ARCHER

Signature of Treasurer

Julie Ann Archer

Date

01 / 28 / 2018

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office Use Only

FEC FORM 3X
Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

REGENERATE WEST VIRGINIA

Report Covering the Period: From:

07 / 01 / 2017

To:

12 / 31 / 2017

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2017		3429
(b) Cash on Hand at Beginning of Reporting Period.....	106515	
(c) Total Receipts (from Line 19).....	2421	112507
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	108936	115936
7. Total Disbursements (from Line 31).....	108936	115936
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	000	000
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	 	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	 	



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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

REGENERATE WEST VIRGINIA

Report Covering the Period: From:

07 ' 01 ' 2017

To:

12 ' 31 ' 2017

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other Than Political Committees

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

[Empty box]

[Empty box]

(ii) Unitemized.....

24.01

1,125.07

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

24.01

1,125.07

(b) Political Party Committees.....

[Empty box]

[Empty box]

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

[Empty box]

[Empty box]

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

24.01

1,125.07

12. Transfers From Affiliated/Other Party Committees.....

[Empty box]

[Empty box]

13. All Loans Received.....

[Empty box]

[Empty box]

14. Loan Repayments Received.....

[Empty box]

[Empty box]

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

[Empty box]

[Empty box]

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

[Empty box]

[Empty box]

17. Other Federal Receipts (Dividends, Interest, etc.).....

[Empty box]

[Empty box]

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

[Empty box]

[Empty box]

(b) Levin Funds (from Schedule H5).....

[Empty box]

[Empty box]

(c) Total Transfers (add 18(a) and 18(b))..

[Empty box]

[Empty box]

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

24.01

1,125.07

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

24.01

1,125.07

NON-FEDERAL AND LEVIN FUNDS

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures	48.00	118.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	48.00	118.00
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	1,041.36	1,041.36
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. 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 28(a), (b), and (c))		
29. Other Disbursements		
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1,089.36	1,159.36
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	1,089.36	1,159.36

20090108 14:00:00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE 1 OF 2
	<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	
	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b	

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

NAME OF COMMITTEE (In Full)
REGENERATE WEST VIRGINIA

A.

Full Name (Last, First, Middle Initial)
United Bank

Mailing Address
500 Virginia St. East / PO Box 393

City **Charleston** State **WV** Zip Code **25322-0393**

Purpose of Disbursement
Bank Service Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
07 / 31 / 2017

Amount of Each Disbursement this Period
1.000

Category/Type
001

B.

Full Name (Last, First, Middle Initial)
U.S. Postal Service

Mailing Address
1002 Lee Street East

City **Charleston** State **WV** Zip Code **25301-9998**

Purpose of Disbursement
PO Box Renewal - 6 months

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
09 / 06 / 2017

Amount of Each Disbursement this Period
38.00

Category/Type
001

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
MM / DD / YYYY

Amount of Each Disbursement this Period

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... **48.00**

TOTAL This Period (last page this line number only)..... **48.00**

2017-09-06 10:00:00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

Grid for line numbers 21b through 30b with checkboxes. Line 23 is checked.

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NAME OF COMMITTEE (In Full) REGENERATE WEST VIRGINIA

Full Name (Last, First, Middle Initial)

A. Working Families National Committee

Date of Disbursement

Date grid showing 12/28/2017

Mailing Address 1 Metrotech Center North, 11th Floor

City Brooklyn, State NY, Zip Code 11201

Purpose of Disbursement Contribution/Disposal of Remaining Funds

Category/Type grid showing 011

Amount of Each Disbursement this Period

Amount grid showing 1,041.36

Office Sought: House, Senate, President

Disbursement For: Primary, General, Other (specify)

Full Name (Last, First, Middle Initial)

B. [Blank]

Date of Disbursement

Empty date grid

Mailing Address

City State Zip Code

Purpose of Disbursement

Empty Category/Type grid

Amount of Each Disbursement this Period

Empty amount grid

Office Sought: House, Senate, President

Disbursement For: Primary, General, Other (specify)

Full Name (Last, First, Middle Initial)

C. [Blank]

Date of Disbursement

Empty date grid

Mailing Address

City State Zip Code

Purpose of Disbursement

Empty Category/Type grid

Amount of Each Disbursement this Period

Empty amount grid

Office Sought: House, Senate, President

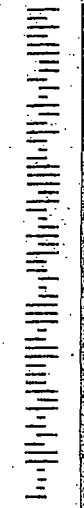
Disbursement For: Primary, General, Other (specify)

SUBTOTAL of Disbursements This Page (optional) 1,041.36

TOTAL This Period (last page this line number only) 1,041.36

2018-02-05 09:00 AM

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Federal Election Commission
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 The FEC added this page to the end of this filing to indicate how it was received.

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<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

nd
 PREPARER
 (3/2015)

2/5/2018
 DATE PREPARED

20180205 10:00 AM : NO : 81-011