

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 25 Canyon Road
 Check if different than previously reported. (ACC)
MORGANTOWN WV 26508

2. **FEC IDENTIFICATION NUMBER** C00157537
3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 01 01 2010 through 03 31 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer Marla Mercer
Signature of Treasurer Electronically Filed by Marla Mercer Date 05 10 2010

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

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

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		36.87
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	36.87									
(c) Total Receipts (from Line 19)	0.00	0.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	36.87	36.87								
7. Total Disbursements (from Line 31)	0.00	0.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	36.87	36.87								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	2409.39									

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

For further information contact:

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	0.00	0.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	0.00	0.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	0.00	0.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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

DETAILED SUMMARY PAGE
of Disbursements

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc			Nature of Debt (Purpose): Postage
Mailing Address 25 Canyon Rd.			
City Morgantown	State WV	ZIP Code 26508	

Outstanding Balance Beginning This Period 311.12		Transaction ID: SD10.4165	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 311.12	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc			Nature of Debt (Purpose): Postage
Mailing Address 25 Canyon Rd.			
City Morgantown	State WV	ZIP Code 26508	

Outstanding Balance Beginning This Period 11.01		Transaction ID: SD10.4166	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 11.01	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc			Nature of Debt (Purpose): Endorsement Mailing
Mailing Address 25 Canyon Rd.			
City Morgantown	State WV	ZIP Code 26508	

Outstanding Balance Beginning This Period 1.68		Transaction ID: SD10.4234	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 1.68	

1) SUBTOTALS This Period This Page (optional).....	▶	323.81
2) TOTALS This Period (last page this line number only).....	▶	[]
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	[]
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	[]

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc			Nature of Debt (Purpose): Endorsement Mailing
Mailing Address 25 Canyon Rd.			
City Morgantown	State WV	ZIP Code 26508	

Outstanding Balance Beginning This Period <input type="text" value="0.56"/>		Transaction ID: SD10.4235	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.56"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc			Nature of Debt (Purpose): printing
Mailing Address 25 Canyon Rd.			
City Morgantown	State WV	ZIP Code 26508	

Outstanding Balance Beginning This Period <input type="text" value="53.23"/>		Transaction ID: SD10.4245	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="53.23"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc			Nature of Debt (Purpose): postage
Mailing Address 25 Canyon Rd.			
City Morgantown	State WV	ZIP Code 26508	

Outstanding Balance Beginning This Period <input type="text" value="32.53"/>		Transaction ID: SD10.4244	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="32.53"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="86.32"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 8 / 15
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc	Nature of Debt (Purpose): Printing
Mailing Address 25 Canyon Rd.	
City Morgantown State WV ZIP Code 26508	

Outstanding Balance Beginning This Period 68.42	Transaction ID: SD10.4248	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 68.42

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc	Nature of Debt (Purpose): printing
Mailing Address 25 Canyon Rd.	
City Morgantown State WV ZIP Code 26508	

Outstanding Balance Beginning This Period 569.40	Transaction ID: SD10.4318	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 569.40

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc	Nature of Debt (Purpose): printing
Mailing Address 25 Canyon Rd.	
City Morgantown State WV ZIP Code 26508	

Outstanding Balance Beginning This Period 11.11	Transaction ID: SD10.4303	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 11.11

1) SUBTOTALS This Period This Page (optional).....	▶	648.93
2) TOTALS This Period (last page this line number only).....	▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc			Nature of Debt (Purpose): postage
Mailing Address 25 Canyon Rd.			
City Morgantown	State WV	ZIP Code 26508	

Outstanding Balance Beginning This Period <input type="text" value="0.64"/>		Transaction ID: SD10.4302	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.64"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc			Nature of Debt (Purpose): printing
Mailing Address 25 Canyon Rd.			
City Morgantown	State WV	ZIP Code 26508	

Outstanding Balance Beginning This Period <input type="text" value="0.42"/>		Transaction ID: SD10.4304	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.42"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc			Nature of Debt (Purpose): postage
Mailing Address 25 Canyon Rd.			
City Morgantown	State WV	ZIP Code 26508	

Outstanding Balance Beginning This Period <input type="text" value="0.10"/>		Transaction ID: SD10.4305	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.10"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="1.16"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc			Nature of Debt (Purpose): printing
Mailing Address 25 Canyon Rd.			
City Morgantown	State WV	ZIP Code 26508	

Outstanding Balance Beginning This Period <input type="text" value="1.17"/>		Transaction ID: SD10.4316	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1.17"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc			Nature of Debt (Purpose): postage
Mailing Address 25 Canyon Rd.			
City Morgantown	State WV	ZIP Code 26508	

Outstanding Balance Beginning This Period <input type="text" value="1.50"/>		Transaction ID: SD10.4317	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1.50"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc			Nature of Debt (Purpose): postage
Mailing Address 25 Canyon Rd.			
City Morgantown	State WV	ZIP Code 26508	

Outstanding Balance Beginning This Period <input type="text" value="131.22"/>		Transaction ID: SD10.4312	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="131.22"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="133.89"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc			Nature of Debt (Purpose): printing
Mailing Address 25 Canyon Rd.			
City Morgantown	State WV	ZIP Code 26508	

Outstanding Balance Beginning This Period <input type="text" value="1.15"/>		Transaction ID: SD10.4311	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="1.15"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc			Nature of Debt (Purpose): delivery
Mailing Address 25 Canyon Rd.			
City Morgantown	State WV	ZIP Code 26508	

Outstanding Balance Beginning This Period <input type="text" value="94.58"/>		Transaction ID: SD10.4314	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="94.58"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc			Nature of Debt (Purpose): delivery
Mailing Address 25 Canyon Rd.			
City Morgantown	State WV	ZIP Code 26508	

Outstanding Balance Beginning This Period <input type="text" value="29.49"/>		Transaction ID: SD10.4315	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="29.49"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="125.22"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc			Nature of Debt (Purpose): Labels
Mailing Address 25 Canyon Rd.			
City Morgantown	State WV	ZIP Code 26508	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: SD10.4440	
Amount Incurred This Period <input type="text" value="484.44"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="484.44"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc. State PAC Fund			Nature of Debt (Purpose): postage
Mailing Address 25 Canyon Rd.			
City Morgantown	State WV	ZIP Code 26508	

Outstanding Balance Beginning This Period <input type="text" value="147.99"/>		Transaction ID: SD10.4307	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="147.99"/>	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc. State PAC Fund			Nature of Debt (Purpose): postage
Mailing Address 25 Canyon Rd.			
City Morgantown	State WV	ZIP Code 26508	

Outstanding Balance Beginning This Period <input type="text" value="96.08"/>		Transaction ID: SD10.4308	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="96.08"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="728.51"/>
2) TOTALS This Period (last page this line number only).....	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)
WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc. State PAC Fund			Nature of Debt (Purpose): postage
Mailing Address 25 Canyon Rd.			
City Mrogantown	State WV	ZIP Code 26508	

Outstanding Balance Beginning This Period <input type="text" value="361.11"/>		Transaction ID: SD10.4309	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="361.11"/>	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc. State PAC Fund			Nature of Debt (Purpose): postage
Mailing Address 25 Canyon Rd.			
City Mrogantown	State WV	ZIP Code 26508	

Outstanding Balance Beginning This Period <input type="text" value="0.44"/>		Transaction ID: SD10.4310	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.44"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="361.55"/>
2) TOTALS This Period (last page this line number only).....	<input type="text" value="2409.39"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text" value="2409.39"/>

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM-ITTEE	FEC IDENTIFICATION NUMBER C C00157537
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
West Virginians for Life, Inc

Mailing Address
25 Canyon Rd.

City State Zip Code
Morgantown WV 26508

Purpose of Expenditure Category/Type
Print Labels

Name of Federal Candidate supported or Opposed by expenditure:
Bruce Barilla

Calendar Year-To-Date Per Election for Office Sought

Date
MM / DD / YYYY
02 / 28 / 2010

Amount

Transaction ID: SE.4678

Office Sought: House State: WV
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

Full Name (Last, First, Middle, Initial) of Payee
West Virginians for Life, Inc

Mailing Address
25 Canyon Rd.

City State Zip Code
Morgantown WV 26508

Purpose of Expenditure Category/Type
Print Labels

Name of Federal Candidate supported or Opposed by expenditure:
Elliott Maynard

Calendar Year-To-Date Per Election for Office Sought

Date
MM / DD / YYYY
02 / 28 / 2010

Amount

Transaction ID: SE.4679

Office Sought: House State: WV
 Senate District: 03
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010
[MEMO ITEM]

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text" value="0.00"/>
(b) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(c) TOTAL Independent Expenditures	<input type="text"/>

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

Marla Mercer
Signature

Date MM / DD / YYYY
05 / 10 / 2010

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMM- ITTEE	FEC IDENTIFICATION NUMBER C C00157537
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
West Virginians for Life, Inc

Mailing Address
25 Canyon Rd.

City Morgantown	State WV	Zip Code 26508
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Purpose of Expenditure Printing Labels	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Michael Oliverio

Calendar Year-To-Date Per Election for Office Sought	0.00
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Date
M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 1 0

Amount
60.55

Transaction ID: SE.4680

Office Sought: House State: WV
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]

Full Name (Last, First, Middle, Initial) of Payee
West Virginians for Life, Inc

Mailing Address
25 Canyon Rd.

City Morgantown	State WV	Zip Code 26508
--------------------	-------------	-------------------

Purpose of Expenditure Print Labels	Category/ Type
--	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
David McKinley

Calendar Year-To-Date Per Election for Office Sought	0.00
---	------

Date
M M / D D / Y Y Y Y
0 2 / 2 8 / 2 0 1 0

Amount
60.55

Transaction ID: SE.4681

Office Sought: House State: WV
 Senate District: 01
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

[MEMO ITEM]

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

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

Marla Mercer
Signature

Date M M / D D / Y Y Y Y
0 5 / 1 0 / 2 0 1 0