

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

RECEIVED SECRETARY OF THE SENATE PUBLIC RECORDS

16 OCT 17 AM 9:29 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

2. FEC IDENTIFICATION NUMBER C00539825 3. IS THIS REPORT NEW OR AMENDED

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, Termination Report

(b) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special. Election on MM/DD/YYYY in the State of

5. Covering Period MM/DD/YYYY through MM/DD/YYYY 07/01/2016 through 09/30/2016

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 10/13/2016

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 grid

201610190200458730

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Capito For West Virginia

Report Covering the Period: From:

MM / DD / YYYY
07 / 01 / 2016

To:

MM / DD / YYYY
09 / 30 / 2016

| | COLUMN A This Period | COLUMN B Election Cycle-to-Date |
|--|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans) | | |
| (a) Total Contributions (other than loans) (from Line 11(e)) ... | 20025.00 | 111957.00 |
| (b) Total Contribution Refunds (from Line 20(d)) .. | .00 | 15300.00 |
| (c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)) ... | 20025.00 | 96657.00 |
| 7. Net Operating Expenditures | | |
| (a) Total Operating Expenditures (from Line 17) .. | 37878.51 | 781587.71 |
| (b) Total Offsets to Operating Expenditures (from Line 14)... | 500.70 | 12914.72 |
| (c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)) ... | 37377.81 | 768672.99 |
| 8. Cash on Hand at Close of Reporting Period (from Line 27)... | 446718.43 | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) ... | .00 | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) ... | .00 | |

For further information contact:

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

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

201610190200458731

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name
Capito For West Virginia

Report Covering the Period: From: MM / DD / YYYY 07 / 01 / 2016 To: MM / DD / YYYY 09 / 30 / 2016

| 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) ... | .00 | 15600.00 |
| (ii) Unitemized | 25.00 | 607.00 |
| (iii) TOTAL of contributions from individuals . | 25.00 | 16207.00 |
| (b) Political Party Committees... | .00 | .00 |
| (c) Other Political Committees (such as PACs) ... | 20000.00 | 95750.00 |
| (d) The Candidate | .00 | .00 |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d)).. | 20025.00 | 111957.00 |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .. | .00 | 8942.87 |
| 13. LOANS: | | |
| (a) Made or Guaranteed by the Candidate... | .00 | .00 |
| (b) All Other Loans... | .00 | .00 |
| (c) TOTAL LOANS (add Lines 13(a) and (b))... | .00 | .00 |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).. | 500.70 | 12914.72 |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.) | 47.57 | 22007.64 |
| 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)... | 20573.27 | 155822.23 |

201610190200458732

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

PAGE 4 / 37

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Election Cycle-to-Date |
|---|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES... | 37878.51 | 781587.71 |
| 18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .. | .00 | .00 |
| 19. LOAN REPAYMENTS: | | |
| (a) Of Loans Made or Guaranteed by the Candidate... | .00 | .00 |
| (b) Of All Other Loans | .00 | .00 |
| (c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))... | .00 | .00 |
| 20. REFUNDS OF CONTRIBUTIONS TO: | | |
| (a) Individuals/Persons Other Than Political Committees ... | .00 | 10400.00 |
| (b) Political Party Committees... | .00 | .00 |
| (c) Other Political Committees (such as PACs) ... | .00 | 4900.00 |
| (d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))... | .00 | 15300.00 |
| 21. OTHER DISBURSEMENTS ... | 25000.00 | 53500.00 |
| 22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶ | 62878.51 | 850387.71 |

III. CASH SUMMARY

| | |
|---|-----------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD... | 489023.67 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)... | 20573.27 |
| 25. SUBTOTAL (add Line 23 and Line 24)... | 509596.94 |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)... | 62878.51 |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)... | 446718.43 |

201610190200458733

**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 5 OF 37 | | | |
| | <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 |

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)
BAE Systems USA PAC

Mailing Address 1101 Wilson Blvd

City Arlington State VA Zip Code 22209

FEC ID number of contributing federal political committee. **C** C00281212

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
MM / DD / YYYY
07 / 07 / 2016

Transaction ID : SA11C-CN51585

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Bechtel Pac

Mailing Address 50 Beale St

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. **C** C00103697

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify)

Election Cycle-to-Date 3500.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2016

Transaction ID : SA11C-CN51595

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Bombardier Pac

Mailing Address 2208 Pennsylvania Ave NW
STE 550W

City Washington State DC Zip Code 20037

FEC ID number of contributing federal political committee. **C** C00546473

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
MM / DD / YYYY
07 / 20 / 2016

Transaction ID : SA11C-CN51591

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional)..... 4500.00

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

201510190200458734

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

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

FOR LINE NUMBER: PAGE 6 OF 37

(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

A. Full Name (Last, First, Middle Initial)
Delta Air Lines PAC

Mailing Address 1212 New York Ave
Ste 200

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00104802

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
MM / DD / YYYY
09 / 22 / 2016

Transaction ID : SA11C-CN51597

Amount of Each Receipt this Period
2500.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Google Net PAC

Mailing Address 1101 New York Ave NW
Second Floor

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00428623

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
MM / DD / YYYY
08 / 10 / 2016

Transaction ID : SA11C-CN51594

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
Investment Company Institute PAC

Mailing Address 1401 H Street Northwest

City Washington State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00105981

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
MM / DD / YYYY
08 / 29 / 2016

Transaction ID : SA11C-CN51599

Amount of Each Receipt this Period
1000.00

Memo Item

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

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

6000.00

201610190200458735

**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 37 | |
| | <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)
Lockheed Martin Employees Pac

Mailing Address 2121 Chrystal Dr.
Suite 100

City Arlington State VA Zip Code 22202

FEC ID number of contributing federal political committee. **C** C00303024

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt
MM / DD / YYYY
07 / 29 / 2016

Transaction ID : SA11C-CN51592

Amount of Each Receipt this Period
1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
Lundbeck LLC Employee PAC

Mailing Address Four Parkway North Ste 200

City Deerfield State IL Zip Code 60015

FEC ID number of contributing federal political committee. **C** C00491118

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
MM / DD / YYYY
09 / 22 / 2016

Transaction ID : SA11C-CN51598

Amount of Each Receipt this Period
2500.00

Memo Item

C. Full Name (Last, First, Middle Initial)
National Rural Water Assn PAC

Mailing Address 2915 S 13th

City Duncan State OK Zip Code 73533

FEC ID number of contributing federal political committee. **C** C00202184

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
MM / DD / YYYY
07 / 07 / 2016

Transaction ID : SA11C-CN51583

Amount of Each Receipt this Period
2500.00

Memo Item

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

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

6000.00

20151019020045873E

**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 37 | |
| | <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)
Natl Org of Social Security Claimants Rep PAC

Mailing Address 560 Sylvan Ave

City Englewood Cliffs State NJ Zip Code 07632

FEC ID number of contributing federal political committee. **C** C00521039

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 07 / 2016

Transaction ID : SA11C-CN51584

Amount of Each Receipt this Period
 1000.00

Memo Item

B. Full Name (Last, First, Middle Initial)
NRG Energy PAC

Mailing Address 211 Carnegie Center

City Princeton State NJ Zip Code 08540

FEC ID number of contributing federal political committee. **C** C00366559

Name of Employer Occupation

Receipt For: 2020
 Primary General
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 10 / 2016

Transaction ID : SA11C-CN51593

Amount of Each Receipt this Period
 2500.00

Memo Item

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 M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

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

3500.00

20000.00

201510190200458737

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

| | | | | |
|---|------------------------------|------------------------------|--|-----------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | | PAGE 9 OF 37 | |
| | (check only one) | | | |
| <input 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 checked="" 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) Charles Capito Jr. | | Date of Receipt MM / DD / YYYY 08 / 25 / 2016 |
| Mailing Address Two Comstock Place | | Transaction ID : SA14-ER133 |
| City Charleston | State WV | Zip Code 25314 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 500.70 |
| Name of Employer | Occupation | <input type="checkbox"/> Memo Item <input type="checkbox"/> Expenditure Refund |
| Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 500.70 | |

| | | |
|---|------------------------|------------------------------------|
| Full Name (Last, First, Middle Initial) | | Date of Receipt |
| Mailing Address | | MM / DD / YYYY |
| City | State | Zip Code |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period |
| Name of Employer | Occupation | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date | |

| | | |
|---|------------------------|------------------------------------|
| Full Name (Last, First, Middle Initial) | | Date of Receipt |
| Mailing Address | | MM / DD / YYYY |
| City | State | Zip Code |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period |
| Name of Employer | Occupation | <input type="checkbox"/> Memo Item |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date | |

| | |
|---|---------------|
| SUBTOTAL of Receipts This Page (optional)..... | 500.70 |
| TOTAL This Period (last page this line number only)..... | 500.70 |

201610190200458738

**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 10 OF 37 |
| <input 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 checked="" type="checkbox"/> 15 |

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NAME OF COMMITTEE (In Full)
Capito For West Virginia

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) BB&T | | Date of Receipt MM / DD / YYYY 07 / 29 / 2016 |
| A. Mailing Address 300 Summers Street | | Transaction ID : SA15-RC602 |
| City Charleston | State WV | Zip Code 25301 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 18.58 | |
| Name of Employer | Occupation | <input type="checkbox"/> Memo Item Interest Earned |
| Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 978.65 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) BB&T | | Date of Receipt MM / DD / YYYY 08 / 31 / 2016 |
| B. Mailing Address 300 Summers Street | | Transaction ID : SA15-RC603 |
| City Charleston | State WV | Zip Code 25301 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 14.94 | |
| Name of Employer | Occupation | <input type="checkbox"/> Memo Item Interest Earned |
| Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 993.59 | |

| | | |
|---|---|---|
| Full Name (Last, First, Middle Initial) BB&T | | Date of Receipt MM / DD / YYYY 09 / 30 / 2016 |
| C. Mailing Address 300 Summers Street | | Transaction ID : SA15-RC604 |
| City Charleston | State WV | Zip Code 25301 |
| FEC ID number of contributing federal political committee. C | Amount of Each Receipt this Period 14.05 | |
| Name of Employer | Occupation | <input type="checkbox"/> Memo Item Interest Earned |
| Receipt For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Election Cycle-to-Date 1007.64 | |

| | |
|---|-------|
| SUBTOTAL of Receipts This Page (optional)..... | 47.57 |
| TOTAL This Period (last page this line number only)..... | 47.57 |

201610190200458739

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

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

FOR LINE NUMBER: PAGE 11 OF 37
(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. 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: 2020
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 08 / 01 / 2016

Amount of Each Disbursement this Period: 4393.95

Memo Item

Transaction ID : SB17-EX17296
PAYMENT: SEE BELOW

B. Townsend Group

Full Name (Last, First, Middle Initial)
Mailing Address 1006 Pendleton St.

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Fundraising Commission

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 08 / 01 / 2016

Amount of Each Disbursement this Period: 3300.00

Memo Item

Transaction ID : SB17-EX17297

C. Federal Express

Full Name (Last, First, Middle Initial)
Mailing Address Box 1140

City Memphis State TN Zip Code 38101

Purpose of Disbursement
Shipping

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 08 / 01 / 2016

Amount of Each Disbursement this Period: 117.49

Memo Item

Transaction ID : SB17-EX17298

SUBTOTAL of Disbursements This Page (optional)..... 4393.95

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

201610190200458740

**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. Quick Messenger Service | | Date of Disbursement MM / DD / YYYY 08 / 01 / 2016 |
| Mailing Address 601 13th Street NW | | Amount of Each Disbursement this Period 79.92 <input checked="" type="checkbox"/> Memo Item Transaction ID : SB17-EX17299 |
| City Washington State DC Zip Code 20005 | Purpose of Disbursement Delivery 003 Category/Type | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Bistro Bis | | Date of Disbursement MM / DD / YYYY 08 / 01 / 2016 |
| Mailing Address 15 E St NW | | Amount of Each Disbursement this Period 694.54 <input checked="" type="checkbox"/> Memo Item Transaction ID : SB17-EX17300 |
| City Washington State DC Zip Code 20001 | Purpose of Disbursement Food and Beverage 003 Category/Type | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Cava | | Date of Disbursement MM / DD / YYYY 08 / 01 / 2016 |
| Mailing Address 527 8th St SE | | Amount of Each Disbursement this Period 155.00 <input checked="" type="checkbox"/> Memo Item Transaction ID : SB17-EX17301 |
| City Washington State DC Zip Code 20003 | Purpose of Disbursement Food and Beverage 003 Category/Type | |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | |
|--|------|
| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

201610190200458741

**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. Townsend Group | | Date of Disbursement MM / DD / YYYY 08 / 01 / 2016 |
| Mailing Address 1006 Pendleton St. | | Amount of Each Disbursement this Period 47.00 |
| City Alexandria | State VA | |
| Purpose of Disbursement Parking Reimbursement | Zip Code 22314 | <input checked="" type="checkbox"/> Memo Item |
| Candidate Name | Category/ Type 003 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : SB17-EX17302 |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. USPS | | Date of Disbursement MM / DD / YYYY 08 / 01 / 2016 |
| Mailing Address 1002 Lee St. | | Amount of Each Disbursement this Period 102.00 |
| City Charleston | State WV | |
| Purpose of Disbursement PO Box Rental | Zip Code 25301 | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/ Type 001 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : SB17-EX17295 PO Box Rental |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. WV for Life | | Date of Disbursement MM / DD / YYYY 08 / 29 / 2016 |
| Mailing Address 25 Canyon Rd. | | Amount of Each Disbursement this Period 400.00 |
| City Morgantown | State WV | |
| Purpose of Disbursement Program Advertising | Zip Code 26508 | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/ Type 004 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : SB17-EX17311 Program Advertising |
| State: District: | | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 502.00 |
| TOTAL This Period (last page this line number only)..... | |

201610190200458742

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

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

FOR LINE NUMBER: PAGE 14 OF 37
(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. 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: 2020 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 06 / 2016

Amount of Each Disbursement this Period: 155.50

Memo Item

Transaction ID : SB17-EX17290
REIMBURSEMENT: SEE BELOW

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: 2020 Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 06 / 2016

Amount of Each Disbursement this Period: 65.00

Memo Item

Transaction ID : SB17-EX17315
REIMBURSEMENT: SEE BELOW

c. Yeager Airport

Full Name (Last, First, Middle Initial)
Mailing Address 100 Airport Rd

City Charleston State WV Zip Code 25311

Purpose of Disbursement
Parking

Candidate Name

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 06 / 2016

Amount of Each Disbursement this Period: 40.00

Memo Item

Transaction ID : SB17-EX17316

SUBTOTAL of Disbursements This Page (optional) 220.50

TOTAL This Period (last page this line number only)

201610190200458743

**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. Charles Capito Jr.

Mailing Address Two Comstock Place

City Charleston State WV Zip Code 25314

Purpose of Disbursement
Taxi Fare Reimbursement

002
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2020
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 06 / 2016

Amount of Each Disbursement this Period

25.00

Memo Item

Transaction ID : SB17-EX17317

B. FEC Financial Inc.

Mailing Address 332 W Lee Highway
303

City Warrenton State VA Zip Code 20186

Purpose of Disbursement
PAYMENT: SEE BELOW

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2020
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 01 / 2016

Amount of Each Disbursement this Period

2050.49

Memo Item

Transaction ID : SB17-EX17287
PAYMENT: SEE BELOW

C. FEC Financial Inc.

Mailing Address 332 W Lee Highway
303

City Warrenton State VA Zip Code 20186

Purpose of Disbursement
Accounting Services

001
Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2020
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
07 / 01 / 2016

Amount of Each Disbursement this Period

2050.00

Memo Item

Transaction ID : SB17-EX17288

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

2050.49

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

201610190200458744

**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. FEC Financial Inc. | | Date of Disbursement MM / DD / YYYY 07 / 01 / 2016 |
| Mailing Address 332 W Lee Highway # 303 | | Amount of Each Disbursement this Period 0.49 |
| City Warrenton | State VA | |
| Purpose of Disbursement Postage Reimbursement | Zip Code 20186 | <input checked="" type="checkbox"/> Memo Item |
| Candidate Name | Category/ Type 001 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : SB17-EX17289 |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. FEC Financial Inc. | | Date of Disbursement MM / DD / YYYY 08 / 01 / 2016 |
| Mailing Address 332 W Lee Highway # 303 | | Amount of Each Disbursement this Period 1551.75 |
| City Warrenton | State VA | |
| Purpose of Disbursement PAYMENT: SEE BELOW | Zip Code 20186 | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/ Type 001 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : SB17-EX17303 PAYMENT: SEE BELOW |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. FEC Financial Inc. | | Date of Disbursement MM / DD / YYYY 08 / 01 / 2016 |
| Mailing Address 332 W Lee Highway # 303 | | Amount of Each Disbursement this Period 1500.00 |
| City Warrenton | State VA | |
| Purpose of Disbursement Accounting Services | Zip Code 20186 | <input checked="" type="checkbox"/> Memo Item |
| Candidate Name | Category/ Type 001 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : SB17-EX17304 |
| State: District: | | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 1551.75 |
| TOTAL This Period (last page this line number only)..... | |

201610190200458745

**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
 PAGE 17 OF 37

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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 332 W Lee Highway # 303

City Warrenton State VA Zip Code 20186

Purpose of Disbursement Postage Reimbursement 001 Category/Type

Candidate Name

Office Sought: House Senate President Disbursement For: 2020 Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 01 / 2016

Amount of Each Disbursement this Period: 51.75

Memo Item

Transaction ID : SB17-EX17305

B. FEC Financial Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 332 W Lee Highway # 303

City Warrenton State VA Zip Code 20186

Purpose of Disbursement PAYMENT: SEE BELOW 001 Category/Type

Candidate Name

Office Sought: House Senate President Disbursement For: 2020 Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 01 / 2016

Amount of Each Disbursement this Period: 1502.94

Memo Item

Transaction ID : SB17-EX17312
 PAYMENT: SEE BELOW

C. FEC Financial Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 332 W Lee Highway # 303

City Warrenton State VA Zip Code 20186

Purpose of Disbursement Accounting Services 001 Category/Type

Candidate Name

Office Sought: House Senate President Disbursement For: 2020 Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 01 / 2016

Amount of Each Disbursement this Period: 1500.00

Memo Item

Transaction ID : SB17-EX17313

SUBTOTAL of Disbursements This Page (optional)..... 1502.94

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

201610190200458746

**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. FEC Financial Inc. | | Date of Disbursement MM / DD / YYYY 09 / 01 / 2016 |
| Mailing Address 332 W Lee Highway # 303 | | Amount of Each Disbursement this Period 2.94 |
| City Warrenton | State VA | |
| Zip Code 20186 | Purpose of Disbursement Postage Reimbursement | <input checked="" type="checkbox"/> Memo Item |
| Candidate Name | Category/ Type 001 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : SB17-EX17314 |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Targeted Victory | | Date of Disbursement MM / DD / YYYY 07 / 29 / 2016 |
| Mailing Address PO Box 2187 | | Amount of Each Disbursement this Period 1.78 |
| City Arlington | State VA | |
| Zip Code 22202 | Purpose of Disbursement Credit Card Processing | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/ Type 001 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : SB17-EX17368 Credit Card Processing |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Targeted Victory | | Date of Disbursement MM / DD / YYYY 08 / 25 / 2016 |
| Mailing Address PO Box 2187 | | Amount of Each Disbursement this Period 3782.96 |
| City Arlington | State VA | |
| Zip Code 22202 | Purpose of Disbursement Website Design & Hosting | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/ Type 001 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | Transaction ID : SB17-EX17310 Website Design & Hosting |
| State: District: | | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional)..... | 3784.74 |
| TOTAL This Period (last page this line number only)..... | |

201610190200458747

**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. 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: 2020
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 08 / 2016

Amount of Each Disbursement this Period
8111.20

Memo Item

Transaction ID : SB17-EX17346
CREDIT CARD PAYMENT: SEE BELOW

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
Telephone Expense

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020
 Primary General
 Other (specify) Primay 2020

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 08 / 2016

Amount of Each Disbursement this Period
279.58

Memo Item

Transaction ID : SB17-EX17337
Telephone Expense

C. Movin On Storage Center

Full Name (Last, First, Middle Initial)
Mailing Address 200 Piedmont Rd

City Charleston State WV Zip Code 25301

Purpose of Disbursement
Storage

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020
 Primary General
 Other (specify) Primay 2020

State: District:

Date of Disbursement
MM / DD / YYYY
07 / 08 / 2016

Amount of Each Disbursement this Period
167.00

Memo Item

Transaction ID : SB17-EX17338
Storage

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

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

8111.20

201610190200458748

**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. La Loma Mexican Restaurant | | Date of Disbursement MM / DD / YYYY 07 / 08 / 2016 |
| Mailing Address 316 Massachusetts Ave NE | | Amount of Each Disbursement this Period 53.90 |
| City Washington State DC Zip Code 20002 | Purpose of Disbursement Food and Beverage | <input checked="" type="checkbox"/> Memo Item |
| Candidate Name | Category/Type 001 | Transaction ID : SB17-EX17339 Food and Beverage |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primay 2020 | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. US Senate Gift Shop | | Date of Disbursement MM / DD / YYYY 07 / 08 / 2016 |
| Mailing Address Dirksen Senate Office Building | | Amount of Each Disbursement this Period 19.00 |
| City Washington State DC Zip Code 20510 | Purpose of Disbursement Host Gifts | <input checked="" type="checkbox"/> Memo Item |
| Candidate Name | Category/Type 007 | Transaction ID : SB17-EX17340 Host Gifts |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primay 2020 | |
| State: District: | | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Hertz | | Date of Disbursement MM / DD / YYYY 07 / 08 / 2016 |
| Mailing Address Yeager Airport | | Amount of Each Disbursement this Period 112.74 |
| City Charleston State WV Zip Code 25339 | Purpose of Disbursement Car Rental | <input checked="" type="checkbox"/> Memo Item |
| Candidate Name | Category/Type 002 | Transaction ID : SB17-EX17341 Car Rental |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primay 2020 | |
| State: District: | | |

| | |
|---|------|
| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

201610190200458749

**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 21 OF 37 | |
| | <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. United Air | | Date of Disbursement MM / DD / YYYY 07 / 08 / 2016 |
| Mailing Address Yeager Airport | | Amount of Each Disbursement this Period 934.10 |
| City Charleston | State WV | |
| Zip Code 25311 | Purpose of Disbursement Airfare | <input checked="" type="checkbox"/> Memo Item |
| Candidate Name | Category/Type 002 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primay 2020 | Transaction ID : SB17-EX17342 Airfare |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Restaurant Associates | | Date of Disbursement MM / DD / YYYY 07 / 08 / 2016 |
| Mailing Address 132 West 31st St Ste 601 | | Amount of Each Disbursement this Period 6495.02 |
| City New York | State NY | |
| Zip Code 10001 | Purpose of Disbursement Catering | <input checked="" type="checkbox"/> Memo Item |
| Candidate Name | Category/Type 007 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primay 2020 | Transaction ID : SB17-EX17343 Catering |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. American Airline | | Date of Disbursement MM / DD / YYYY 07 / 08 / 2016 |
| Mailing Address PO Box 619612 | | Amount of Each Disbursement this Period 35.00 |
| City Dallas | State TX | |
| Zip Code 75261 | Purpose of Disbursement Baggage Fee | <input checked="" type="checkbox"/> Memo Item |
| Candidate Name | Category/Type 002 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primay 2020 | Transaction ID : SB17-EX17344 Baggage Fee |
| State: District: | | |

| | |
|---|------|
| SUBTOTAL of Disbursements This Page (optional) | 0.00 |
| TOTAL This Period (last page this line number only) | |

201610190200458750

**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. Marathon Oil

Full Name (Last, First, Middle Initial)
Mailing Address 703 Main St W

City Ripley State WV Zip Code 25271

Purpose of Disbursement Fuel

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020
 Primary General
 Other (specify) Primay 2020

State: District:

Date of Disbursement: 07 / 08 / 2016

Amount of Each Disbursement this Period: 14.86

Memo Item

Transaction ID : SB17-EX17345
Fuel

Category/Type: 002

B. 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: 2020
 Primary General
 Other (specify)

State: District:

Date of Disbursement: 08 / 12 / 2016

Amount of Each Disbursement this Period: 4321.15

Memo Item

Transaction ID : SB17-EX17357
CREDIT CARD PAYMENT: SEE BELOW

Category/Type: 001

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 Telephone Expense

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020
 Primary General
 Other (specify) Primay 2020

State: District:

Date of Disbursement: 08 / 12 / 2016

Amount of Each Disbursement this Period: 1085.33

Memo Item

Transaction ID : SB17-EX17347
Telephone Expense

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional)..... 4321.15

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

201610190200458751

**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. Movin On Storage Center | | Date of Disbursement MM / DD / YYYY 08 / 12 / 2016 | |
| Mailing Address 200 Piedmont Rd | | Amount of Each Disbursement this Period 167.00 | |
| City Charleston | State WV | Zip Code 25301 | Category/ Type 001 |
| Purpose of Disbursement Storage | | Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primay 2020 | | Memo Item <input checked="" type="checkbox"/> |
| State: District: | Transaction ID : SB17-EX17348 Storage | | |

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) B. Hyatt Place Legacy Village | | Date of Disbursement MM / DD / YYYY 08 / 12 / 2016 | |
| Mailing Address 24665 Cedar Rd | | Amount of Each Disbursement this Period 400.00 | |
| City Cleveland | State OH | Zip Code 44124 | Category/ Type 002 |
| Purpose of Disbursement Lodging | | Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primay 2020 | | Memo Item <input checked="" type="checkbox"/> |
| State: District: | Transaction ID : SB17-EX17349 Lodging | | |

| | | | |
|---|--|--|--|
| Full Name (Last, First, Middle Initial) C. Hertz | | Date of Disbursement MM / DD / YYYY 08 / 12 / 2016 | |
| Mailing Address Yeager Airport | | Amount of Each Disbursement this Period 102.07 | |
| City Charleston | State WV | Zip Code 25339 | Category/ Type 002 |
| Purpose of Disbursement Car Rental | | Candidate Name | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primay 2020 | | Memo Item <input checked="" type="checkbox"/> |
| State: District: | Transaction ID : SB17-EX17350 Car Rental | | |

| | |
|---|------|
| SUBTOTAL of Disbursements This Page (optional) | 0.00 |
| TOTAL This Period (last page this line number only) | |

201610190200458752

**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 24 OF 37 |
| | <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. US Senate Gift Shop | | Date of Disbursement MM / DD / YYYY 08 / 12 / 2016 |
| Mailing Address Dirksen Senate Office Building | | Amount of Each Disbursement this Period 19.00 <input checked="" type="checkbox"/> Memo Item |
| City Washington | State DC | |
| Purpose of Disbursement Host Gifts | | Transaction ID : SB17-EX17351 Host Gifts |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primay 2020 | |
| State: _____ | District: _____ | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Capitol Host | | Date of Disbursement MM / DD / YYYY 08 / 12 / 2016 |
| Mailing Address B-339B Rayburn House Office Bldg | | Amount of Each Disbursement this Period 2203.84 <input checked="" type="checkbox"/> Memo Item |
| City Washington | State DC | |
| Purpose of Disbursement Catering | | Transaction ID : SB17-EX17352 Catering |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primay 2020 | |
| State: _____ | District: _____ | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Speedway | | Date of Disbursement MM / DD / YYYY 08 / 12 / 2016 |
| Mailing Address P.O.Box 1500 | | Amount of Each Disbursement this Period 37.08 <input checked="" type="checkbox"/> Memo Item |
| City Springfield | State OH | |
| Purpose of Disbursement Fuel | | Transaction ID : SB17-EX17353 Fuel |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primay 2020 | |
| State: _____ | District: _____ | |

| | |
|---|------|
| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

201610190200458753

**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. Figarettis Restaurant | | Date of Disbursement MM / DD / YYYY 08 / 12 / 2016 |
| Mailing Address 1035 Mt De Chantal Rd | | Amount of Each Disbursement this Period 97.31 |
| City Wheeling | State WV | Zip Code 26003 |
| Purpose of Disbursement Food and Beverage | Category/ Type 001 | |
| Candidate Name | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primay 2020 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: District: | |
| Transaction ID : SB17-EX17354 Food and Beverage | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Exxon Mobil | | Date of Disbursement MM / DD / YYYY 08 / 12 / 2016 |
| Mailing Address 5959 Las Colinas Boulevard | | Amount of Each Disbursement this Period 41.75 |
| City Irving | State TX | Zip Code 75039 |
| Purpose of Disbursement Fuel | Category/ Type 002 | |
| Candidate Name | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primay 2020 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: District: | |
| Transaction ID : SB17-EX17355 Fuel | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Aloft | | Date of Disbursement MM / DD / YYYY 08 / 12 / 2016 |
| Mailing Address 1111 W 10th St | | Amount of Each Disbursement this Period 167.77 |
| City Cleveland | State OH | Zip Code 44113 |
| Purpose of Disbursement Food and Beverage | Category/ Type 001 | |
| Candidate Name | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primay 2020 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: District: | |
| Transaction ID : SB17-EX17356 Food and Beverage | | |

| | |
|--|------|
| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

201610190200458754

**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. BB&T Financial

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: 2020
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
09 / 08 / 2016

Amount of Each Disbursement this Period
5163.99

Memo Item

Transaction ID : SB17-EX17367
CREDIT CARD PAYMENT: SEE BELOW

Full Name (Last, First, Middle Initial)
B. Hyatt Place Legacy Village

Mailing Address 24665 Cedar Rd

City Cleveland State OH Zip Code 44124

Purpose of Disbursement
Lodging

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020
 Primary General
 Other (specify) Primay 2020

State: District:

Date of Disbursement
MM / DD / YYYY
09 / 08 / 2016

Amount of Each Disbursement this Period
3507.52

Memo Item

Transaction ID : SB17-EX17358
Lodging

Full Name (Last, First, Middle Initial)
C. AT&T

Mailing Address P.O. Box 8212

City Aurora State IL Zip Code 60572

Purpose of Disbursement
Telephone Expense

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020
 Primary General
 Other (specify) Primay 2020

State: District:

Date of Disbursement
MM / DD / YYYY
09 / 08 / 2016

Amount of Each Disbursement this Period
340.26

Memo Item

Transaction ID : SB17-EX17359
Telephone Expense

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

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

5163.99

**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. Adventure WV | | Date of Disbursement MM / DD / YYYY 09 / 08 / 2016 |
| Mailing Address 1 Ames Heights Rd | | Amount of Each Disbursement this Period 668.36 |
| City Lansing | State WV | Zip Code 25862 |
| Purpose of Disbursement Catering & Venue Rental | Category/ Type 007 | <input checked="" type="checkbox"/> Memo Item |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primay 2020 |
| State: | District: | Transaction ID : SB17-EX17360 Catering & Venue Rental |

| | | |
|--|---|--|
| Full Name (Last, First, Middle Initial) B. Movin On Storage Center | | Date of Disbursement MM / DD / YYYY 09 / 08 / 2016 |
| Mailing Address 200 Piedmont Rd | | Amount of Each Disbursement this Period 167.00 |
| City Charleston | State WV | Zip Code 25301 |
| Purpose of Disbursement Storage | Category/ Type 001 | <input checked="" type="checkbox"/> Memo Item |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primay 2020 |
| State: | District: | Transaction ID : SB17-EX17361 Storage |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. USPS | | Date of Disbursement MM / DD / YYYY 09 / 08 / 2016 |
| Mailing Address 1002 Lee St. | | Amount of Each Disbursement this Period 47.00 |
| City Charleston | State WV | Zip Code 25301 |
| Purpose of Disbursement Postage | Category/ Type 001 | <input checked="" type="checkbox"/> Memo Item |
| Candidate Name | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primay 2020 |
| State: | District: | Transaction ID : SB17-EX17362 Postage |

| | |
|--|------|
| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

201610190200458756

**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. Sargasso | | Date of Disbursement MM / DD / YYYY 09 / 08 / 2016 |
| Mailing Address 215 Don Knotts Boulevard | | Amount of Each Disbursement this Period 153.72 |
| City Morgantown | State WV Zip Code 26501 | |
| Purpose of Disbursement Food and Beverage | Candidate Name | <input checked="" type="checkbox"/> Memo Item |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primay 2020 | |
| State: District: | Category/Type 001 | Transaction ID : SB17-EX17363 Food and Beverage |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) B. Mountaineer Florist | | Date of Disbursement MM / DD / YYYY 09 / 08 / 2016 |
| Mailing Address 111 Market St | | Amount of Each Disbursement this Period 92.22 |
| City Mannington | State WV Zip Code 26582 | |
| Purpose of Disbursement Event Decorations | Candidate Name | <input checked="" type="checkbox"/> Memo Item |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primay 2020 | |
| State: District: | Category/Type 007 | Transaction ID : SB17-EX17364 Event Decorations |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Country Cafe | | Date of Disbursement MM / DD / YYYY 09 / 08 / 2016 |
| Mailing Address 1715 Washington St | | Amount of Each Disbursement this Period 94.63 |
| City Harpers Ferry | State WV Zip Code 25425 | |
| Purpose of Disbursement Food and Beverage | Candidate Name | <input checked="" type="checkbox"/> Memo Item |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primay 2020 | |
| State: District: | Category/Type 001 | Transaction ID : SB17-EX17365 Food and Beverage |

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

| |
|------|
| 0.00 |
|------|

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

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| |
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201610190200458757

**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. River Riders

Mailing Address 408 Alstadts Hill Rd

City Harpers Ferry State WV Zip Code 25425

Purpose of Disbursement
Event Tickets

007

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020
 Primary General
 Other (specify) Primay 2020

State: District:

Date of Disbursement

| |
|---------------------|
| M M / D D / Y Y Y Y |
| 09 / 08 / 2016 |

Amount of Each Disbursement this Period

| |
|-------|
| 93.28 |
|-------|

Memo Item

Transaction ID : SB17-EX17366
Event Tickets

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 Service Fee

001

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020
 Primary General
 Other (specify)

State: District:

Date of Disbursement

| |
|---------------------|
| M M / D D / Y Y Y Y |
| 07 / 01 / 2016 |

Amount of Each Disbursement this Period

| |
|--------|
| 100.61 |
|--------|

Memo Item

Transaction ID : SB17-EX17336
Payroll Service Fee

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: SEE BELOW

001

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020
 Primary General
 Other (specify)

State: District:

Date of Disbursement

| |
|---------------------|
| M M / D D / Y Y Y Y |
| 07 / 29 / 2016 |

Amount of Each Disbursement this Period

| |
|--------|
| 887.60 |
|--------|

Memo Item

Transaction ID : SB17-EX17326
PAYROLL: SEE BELOW

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

| |
|--------|
| 988.21 |
|--------|

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

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| |
|--|

201610190200458758

**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 30 OF 37 |
| | <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. Rebecca Trump | | Date of Disbursement MM / DD / YYYY 07 / 29 / 2016 |
| Mailing Address 223 Eagle Run | | Amount of Each Disbursement this Period 724.80 <input checked="" type="checkbox"/> Memo Item |
| City Morgantown | State WV Zip Code 26505 | |
| Purpose of Disbursement Net Salary | Category/Type 001 | Transaction ID : SB17-EX17324 Net Salary |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primay 2020 | |
| State: District: | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Paychex | | Date of Disbursement MM / DD / YYYY 07 / 29 / 2016 |
| Mailing Address 3960 Stillman Parkway | | Amount of Each Disbursement this Period 162.80 <input checked="" type="checkbox"/> Memo Item |
| City Glen Allen | State VA Zip Code 25060 | |
| Purpose of Disbursement Withholding Taxes | Category/Type 001 | Transaction ID : SB17-EX17325 Withholding Taxes |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primay 2020 | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Paychex | | Date of Disbursement MM / DD / YYYY 07 / 29 / 2016 |
| Mailing Address 3960 Stillman Parkway | | Amount of Each Disbursement this Period 110.61 <input type="checkbox"/> Memo Item |
| City Glen Allen | State VA Zip Code 25060 | |
| Purpose of Disbursement Payroll Service Fee | Category/Type 001 | Transaction ID : SB17-EX17330 Payroll Service Fee |
| Candidate Name | | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 110.61 |
| TOTAL This Period (last page this line number only)..... | |

2016010190200458759

**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 31 OF 37

| | | | |
|--|------------------------------|------------------------------|------------------------------|
| <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. Paychex

Full Name (Last, First, Middle Initial)

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: 2020
 Primary General
 Other (specify)

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 31 / 2016

Amount of Each Disbursement this Period
887.60

Memo Item

Transaction ID : SB17-EX17329
PAYROLL: SEE BELOW

Category/Type: 001

B. Rebecca Trump

Full Name (Last, First, Middle Initial)

Mailing Address 223 Eagle Run

City Morgantown State WV Zip Code 26505

Purpose of Disbursement
Net Salary

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020
 Primary General
 Other (specify) Primay 2020

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 31 / 2016

Amount of Each Disbursement this Period
724.80

Memo Item

Transaction ID : SB17-EX17327
Net Salary

Category/Type: 001

C. Paychex

Full Name (Last, First, Middle Initial)

Mailing Address 3960 Stillman Parkway

City Glen Allen State VA Zip Code 25060

Purpose of Disbursement
Withholding Taxes

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020
 Primary General
 Other (specify) Primay 2020

State: District:

Date of Disbursement
MM / DD / YYYY
08 / 31 / 2016

Amount of Each Disbursement this Period
162.80

Memo Item

Transaction ID : SB17-EX17328
Withholding Taxes

Category/Type: 001

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

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

887.60

201610190200458760

**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 32 OF 37 |
| | <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. Paychex

Full Name (Last, First, Middle Initial)

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: 2020 Primary General Other (specify)

State: District:

Date of Disbursement: 08 / 31 / 2016

Amount of Each Disbursement this Period: 100.40

Memo Item

Transaction ID : SB17-EX17331
Payroll Service Fee

B. Paychex

Full Name (Last, First, Middle Initial)

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: 2020 Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 30 / 2016

Amount of Each Disbursement this Period: 886.40

Memo Item

Transaction ID : SB17-EX17334
PAYROLL: SEE BELOW

c. Rebecca Trump

Full Name (Last, First, Middle Initial)

Mailing Address 223 Eagle Run

City Morgantown State WV Zip Code 26505

Purpose of Disbursement Net Salary

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) Primay 2020

State: District:

Date of Disbursement: 09 / 30 / 2016

Amount of Each Disbursement this Period: 724.80

Memo Item

Transaction ID : SB17-EX17332
Net Salary

SUBTOTAL of Disbursements This Page (optional)..... 986.80

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

201610190200458761

**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 33 OF 37 |
| | <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. Paychex | | Date of Disbursement MM / DD / YYYY 09 / 30 / 2016 |
| Mailing Address 3960 Stillman Parkway | | Amount of Each Disbursement this Period 161.60 |
| City Glen Allen | State VA | |
| Purpose of Disbursement Withholding Taxes | Candidate Name | <input checked="" type="checkbox"/> Memo Item |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Primay 2020 | |
| State: District: | Category/ Type 001 | Transaction ID : SB17-EX17333 Withholding Taxes |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Paychex | | Date of Disbursement MM / DD / YYYY 09 / 30 / 2016 |
| Mailing Address 3960 Stillman Parkway | | Amount of Each Disbursement this Period 100.61 |
| City Glen Allen | State VA | |
| Purpose of Disbursement Payroll Service Fee | Candidate Name | <input type="checkbox"/> Memo Item |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | Category/ Type 001 | Transaction ID : SB17-EX17335 Payroll Service Fee |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. The Ripon Society | | Date of Disbursement MM / DD / YYYY 08 / 25 / 2016 |
| Mailing Address 1155 15th St NW Ste 550 | | Amount of Each Disbursement this Period 500.70 |
| City Washington | State DC | |
| Purpose of Disbursement REIMBURSEMENT: SEE BELOW | Candidate Name | <input type="checkbox"/> Memo Item |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | Category/ Type 002 | Transaction ID : SB17-EX17308 REIMBURSEMENT: SEE BELOW |

| | |
|--|--------|
| SUBTOTAL of Disbursements This Page (optional)..... | 601.31 |
| TOTAL This Period (last page this line number only)..... | |

201610190200458762

**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. American Airline

Mailing Address PO Box 619612

City Dallas State TX Zip Code 75261

Purpose of Disbursement
Airfare

002

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 25 / 2016

Amount of Each Disbursement this Period

500.70

Memo Item

Transaction ID : SB17-EX17309

B. SalientPoint LLC

Mailing Address PO Box 960743

City Boston State MA Zip Code 02196

Purpose of Disbursement
PAYMENT: SEE BELOW

004

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 12 / 2016

Amount of Each Disbursement this Period

1745.11

Memo Item

Transaction ID : SB17-EX17318
PAYMENT: SEE BELOW

C. SalientPoint LLC

Mailing Address PO Box 960743

City Boston State MA Zip Code 02196

Purpose of Disbursement
Media Training

004

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 12 / 2016

Amount of Each Disbursement this Period

1200.00

Memo Item

Transaction ID : SB17-EX17319

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

1745.11

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

201610190200458763

**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. American Airline | | Date of Disbursement MM / DD / YYYY 09 / 12 / 2016 |
| Mailing Address PO Box 619612 | | Amount of Each Disbursement this Period 458.10 |
| City Dallas | State TX | Zip Code 75261 |
| Purpose of Disbursement Airfare | Category/ Type 004 | |
| Candidate Name | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: District: | |
| Transaction ID : SB17-EX17320 | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. SalientPoint LLC | | Date of Disbursement MM / DD / YYYY 09 / 12 / 2016 |
| Mailing Address PO Box 960743 | | Amount of Each Disbursement this Period 47.01 |
| City Boston | State MA | Zip Code 02196 |
| Purpose of Disbursement Taxi Fare Reimbursement | Category/ Type 004 | |
| Candidate Name | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: District: | |
| Transaction ID : SB17-EX17321 | | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. SalientPoint LLC | | Date of Disbursement MM / DD / YYYY 09 / 12 / 2016 |
| Mailing Address PO Box 960743 | | Amount of Each Disbursement this Period 40.00 |
| City Boston | State MA | Zip Code 02196 |
| Purpose of Disbursement Parking Reimbursement | Category/ Type 004 | |
| Candidate Name | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | State: District: | |
| Transaction ID : SB17-EX17322 | | |

| | |
|--|------|
| SUBTOTAL of Disbursements This Page (optional)..... | 0.00 |
| TOTAL This Period (last page this line number only)..... | |

201610190200458764

**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. Ashley Berrang | | Date of Disbursement MM / DD / YYYY 08 / 01 / 2016 |
| Mailing Address 3605 Norris Pl | | Amount of Each Disbursement this Period 818.20 |
| City Alexandria State VA Zip Code 22305 | Purpose of Disbursement REIMBURSEMENT: SEE BELOW | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/Type 002 | Transaction ID : SB17-EX17293 REIMBURSEMENT: SEE BELOW |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) B. United Air | | Date of Disbursement MM / DD / YYYY 08 / 01 / 2016 |
| Mailing Address Yeager Airport | | Amount of Each Disbursement this Period 818.20 |
| City Charleston State WV Zip Code 25311 | Purpose of Disbursement Airfare | <input checked="" type="checkbox"/> Memo Item |
| Candidate Name | Category/Type 002 | Transaction ID : SB17-EX17294 |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|--|---|---|
| Full Name (Last, First, Middle Initial) C. | | Date of Disbursement MM / DD / YYYY |
| Mailing Address | | Amount of Each Disbursement this Period |
| City State Zip Code | Purpose of Disbursement | <input type="checkbox"/> Memo Item |
| Candidate Name | Category/Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | |
|---|-----------------|
| SUBTOTAL of Disbursements This Page (optional)..... | 818.20 |
| TOTAL This Period (last page this line number only)..... | 37740.55 |

201610190200458765

**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

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. NRSC | | Date of Disbursement MM / DD / YYYY 09 / 21 / 2016 |
| Mailing Address 425 2nd St NE | | Amount of Each Disbursement this Period 25000.00 <input type="checkbox"/> Memo Item |
| City Washington | State DC | |
| Purpose of Disbursement TRANSFER OF EXCESS FUNDS | Zip Code 20002 | Transaction ID : SB21-EX17323 TRANSFER OF EXCESS FUNDS |
| Candidate Name | Category/ Type 011 | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. | | Date of Disbursement MM / DD / YYYY |
| Mailing Address | | Amount of Each Disbursement this Period <input type="checkbox"/> Memo Item |
| City | State | |
| Purpose of Disbursement | Zip Code | Transaction ID : TRANSFER OF EXCESS FUNDS |
| Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. | | Date of Disbursement MM / DD / YYYY |
| Mailing Address | | Amount of Each Disbursement this Period <input type="checkbox"/> Memo Item |
| City | State | |
| Purpose of Disbursement | Zip Code | Transaction ID : TRANSFER OF EXCESS FUNDS |
| Candidate Name | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: District: | | |

| | |
|--|----------|
| SUBTOTAL of Disbursements This Page (optional)..... | 25000.00 |
| TOTAL This Period (last page this line number only)..... | 25000.00 |

201610190200458766

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USPS EXPRESS MAIL _____
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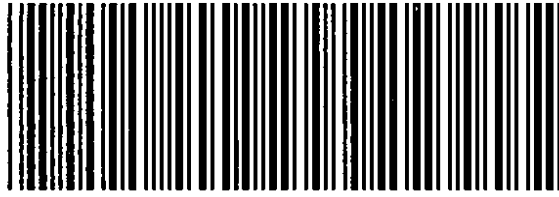
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