

FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

1. Person Making the Disbursements/Obligations

(a) Name **West Virginia Chamber of Commerce**

(b) Address (number and street) check if different than previously reported
1624 Kanawha Boulevard East

(c) City, State and ZIP Code
Charleston WV 25311

(d) Name of Employer or Principal Place of Business (e) Occupation

2. FEC Identification Number

C C30002406

3. Is This Statement

New
or
 Amended

4. Covering Period

MM / DD / YYYY
04 / 22 / 2016
through
MM / DD / YYYY
04 / 26 / 2016

5. (a) Date of Public Distribution(s)

MM / DD / YYYY
04 / 26 / 2016

(b) Communication Title

Lawless

6. The filer is a(n):

- (a) Individual
- (b) Unincorporated Organization
- (c) Qualified Nonprofit Corporation (11 CFR 114.10)
- (d) Corporation, Labor Organization or Qualified Nonprofit Corporation making communications under 11 CFR 114.15
- (e) Other, specify: Corporation

7. If the filer is an individual, unincorporated organization or qualified nonprofit corporation, were the disbursements made exclusively from donations to a segregated bank account?

Yes No

8. Custodian of Records

(a) Name
John M Canfield

(b) Address (number and street)
1624 Kanawha Boulevard East

(c) City, State and ZIP Code
Charleston WV 25311

(d) Name of Employer or Principal Place of Business (e) Occupation
West Virginia Chamber of Commerce VP & Counsel

9. Total Donations This Statement

_____,_____,_____.00

10. Total Disbursements/Obligations This Statement

_____,_____,169414.00

Under penalty of perjury, I certify that this statement is true, correct and complete.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM David Eric Lycan

SIGNATURE David Eric Lycan

[Electronically Filed] DATE 04/25/2016

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