

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 JENKINS FOR CONGRESS

ADDRESS (number and street) PO BOX 727 HUNTINGTON WV 25711

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00548271 3. IS THIS REPORT NEW (N) OR AMENDED (A) WV 03

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) X October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) Termination Report (TER)

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

5. Covering Period M M / D D / Y Y Y Y 07 / 01 / 2014 through M M / D D / Y Y Y Y 09 / 30 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer PAUL A KILGORE

Signature of Treasurer PAULA KILGORE [Electronically Filed] Date M M / D D / Y Y Y Y 10 / 15 / 2014

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
JENKINS FOR CONGRESS

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

	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))....	322260.00	1414681.19
(b) Total Contribution Refunds (from Line 20(d))	15050.00	16050.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	307210.00	1398631.19
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	542830.80	948504.88
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	542830.80	948504.88
8. Cash on Hand at Close of Reporting Period (from Line 27).....	461410.47	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	5045.46	

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

JENKINS FOR CONGRESS

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

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).....	195505.00	1005110.11
(ii) Unitemized.....	9505.00	73221.08
(iii) TOTAL of contributions from individuals ▶	205010.00	1078331.19
(b) Political Party Committees.....	1000.00	1000.00
(c) Other Political Committees (such as PACs).....	116250.00	332500.00
(d) The Candidate.....	0.00	2850.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	322260.00	1414681.19
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	10020.58	15479.88
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	185.38	304.28
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	332465.96	1430465.35

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	542830.80	948504.88
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	2000.00	2000.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	15050.00	16050.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	15050.00	16050.00
21. OTHER DISBURSEMENTS	0.00	2500.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	559880.80	969054.88

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	688825.31
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	332465.96
25. SUBTOTAL (add Line 23 and Line 24).....	1021291.27
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	559880.80
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	461410.47

**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 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ROSEMARY F ADAMS

Mailing Address 10 WOODRIDGE CT.

City HUNTINGTON State WV Zip Code 25705

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.8765

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MR. SCOTT A AIMAN

Mailing Address PO BOX 646

City LANCASTER State OH Zip Code 43130

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 21 / 2014

Transaction ID : SA11AI.8447

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MR. SCOTT A AIMAN

Mailing Address PO BOX 646

City LANCASTER State OH Zip Code 43130

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11AI.8911

Amount of Each Receipt this Period
500.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ROBBY J. ALIFF

Mailing Address 1578 VIRGINIA ST. E

City Charleston State WV Zip Code 25311

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.9023

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
KEN ALLMAN

Mailing Address 7237 FORSYTH BLVD.

City ST. LOUIS State MO Zip Code 63105

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

Name of Employer Occupation
PRACTICELINK CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 10 / 2014

Transaction ID : SA11AI.8746

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
KEN ALLMAN

Mailing Address 7237 FORSYTH BLVD.

City ST. LOUIS State MO Zip Code 63105

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

Name of Employer Occupation
PRACTICELINK CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 26 / 2014

Transaction ID : SA11AI.8988

Amount of Each Receipt this Period
250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MICHAEL ALSTFAN

Mailing Address **30 PINNACLE DRIVE**

City **CHARLESTON** State **WV** Zip Code **25311**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11AI.9069

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
HUGO ANDREINI

Mailing Address **1301 WASHINGTON FARMS**

City **WHEELING** State **WV** Zip Code **26003**

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

Name of Employer **WHEELING HOSPITAL** Occupation **PHYSICIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11AI.9006

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
BARBARA ATKINS

Mailing Address **425 WHITAKER BLVD**

City **HUNTINGTON** State **WV** Zip Code **25701**

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

Name of Employer **MOSES HONDA VW** Occupation **DEALER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 22 / 2014

Transaction ID : SA11AI.8914

Amount of Each Receipt this Period
500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RANDALL ATKINS

Mailing Address 250 WEST MAIN ST. STE. 210

City State Zip Code
LEXINGTON KY 40507

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

Name of Employer Occupation
RAMACO, LLC EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.9005

Amount of Each Receipt this Period
1250.00

B. Full Name (Last, First, Middle Initial)
DAVID AVERY

Mailing Address 3702 RIVER ROAD

City State Zip Code
VIENNA WV 26105

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

Name of Employer Occupation
SELF-EMPLOYED PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.9014

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MARSHA BAILEY

Mailing Address 201 CARRINGTON DRIVE

City State Zip Code
HURRICANE WV 25526

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

Name of Employer Occupation
SELF-EMPLOYED PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 03 / 2014

Transaction ID : SA11AI.8727

Amount of Each Receipt this Period
250.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RODNEY L BEAN

Mailing Address 1018 BRETTWALD DR.

City MORGANTOWN State WV Zip Code 26508

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

Name of Employer STEPTOE AND JOHNSON Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **650.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.9054

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
KATHY G BECKETT

Mailing Address 3 GAT CREEK RD.

City CHARLESTON State WV Zip Code 25314

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

Name of Employer STEPTOE AND JOHNSON Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : SA11AI.8928

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
CLEVELAND BENEDICT

Mailing Address HC 37 BOX 155

City LEWISBURG State WV Zip Code 24901

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 27 / 2014

Transaction ID : SA11AI.8463

Amount of Each Receipt this Period
500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CLEVELAND BENEDICT

Mailing Address HC 37 BOX 155

City LEWISBURG State WV Zip Code 24901

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 27 / 2014

Transaction ID : SA11AI.8645

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
CLEVELAND BENEDICT

Mailing Address HC 37 BOX 155

City LEWISBURG State WV Zip Code 24901

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 27 / 2014

Transaction ID : SA11AI.8990

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
ROBERT BEYMER

Mailing Address 214 NORTH BLVD W

City HUNTINGTON State WV Zip Code 25701

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

Name of Employer FIRST SENTRY BANK Occupation CHAIRMAN OF THE BOARD

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11AI.8915

Amount of Each Receipt this Period
1000.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) PAUL BLOM		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 11 / 2014
Mailing Address 449 ST ANDREWS DR		Transaction ID : SA11AI.8579
City BARBOURSVILLE	State WV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer RADIOLOGY-INC	Occupation PHYSICIAN	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3250.00	

Full Name (Last, First, Middle Initial) PAUL BLOM		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 01 / 2014
Mailing Address 449 ST ANDREWS DR		Transaction ID : SA11AI.8706
City BARBOURSVILLE	State WV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer RADIOLOGY-INC	Occupation PHYSICIAN	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3300.00	

Full Name (Last, First, Middle Initial) PAUL BLOM		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 10 / 2014
Mailing Address 449 ST ANDREWS DR		Transaction ID : SA11AI.8745
City BARBOURSVILLE	State WV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer RADIOLOGY-INC	Occupation PHYSICIAN	REATTRIBUTION REQUESTED
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5300.00	

SUBTOTAL of Receipts This Page (optional).....	2150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MARK BOCK

Mailing Address 2637 BRUNSWICK LANE

City HUDSON State OH Zip Code 44236

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

Name of Employer HANTZ FINANCIAL Occupation CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
235.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.8999

Amount of Each Receipt this Period
35.00

B. Full Name (Last, First, Middle Initial)
FRED BOGGS

Mailing Address 612 RIDGEWOOD RD.

City HUNTINGTON State WV Zip Code 25701

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

Name of Employer BOGGS ROOFING INC Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 25 / 2014

Transaction ID : SA11AI.8635

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
R. BOLEN

Mailing Address PO BOX 2185

City HUNTINGTON State WV Zip Code 25722

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

Name of Employer HUDDLESTON & BOLEN LLP Occupation PARTNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.8824

Amount of Each Receipt this Period
1000.00

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

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

1535.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LEE BOOTEN II

Mailing Address **PO BOX 1821**

City **HUNTINGTON** State **WV** Zip Code **25719**

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

Name of Employer **SELF EMPLOYED** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11AI.8795

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
EDWARD P BOYLE II

Mailing Address **RT. 26 SOUTH**

City **KINGWOOD** State **WV** Zip Code **26537**

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

Name of Employer **MCI GROUP** Occupation **CONTRACTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 15 / 2014

Transaction ID : SA11AI.8835

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
WILLIAM G BOYLE

Mailing Address **217 SEEMONT DR.**

City **KINGWOOD** State **WV** Zip Code **26537**

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

Name of Employer **CMI GROUP** Occupation **CONTACTOR**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 15 / 2014

Transaction ID : SA11AI.8836

Amount of Each Receipt this Period
1000.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
TYLER M. BOYLE

Mailing Address 12 GREENTREE DR.

City MORGANTOWN State WV Zip Code 26508

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11AI.8868

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
SUSAN S. BREWER

Mailing Address 25 CEDARWOOD DR.

City MORGANTOWN State WV Zip Code 26505

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

Name of Employer STEPTOE AND JOHNSON Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.9053

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
FRED BRINKEL

Mailing Address 714 PIGEON ROOST TRAIL

City PRINCETON State WV Zip Code 24740

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

Name of Employer SELF-EMPLOYED Occupation HEALTHCARE IT CONSULTANT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11AI.8913

Amount of Each Receipt this Period
250.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LEE ANN BROCK

Mailing Address 3300 DARRAH ST.

City MORGANTOWN State WV Zip Code 26508

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11AI.8867

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
TIMOTHY BROOKS

Mailing Address 3742 MILLERS FORK RD.

City WAYNE State WV Zip Code 25570

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

Name of Employer SELF-EMPLOYED Occupation CONSTRUCTION

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 28 / 2014

Transaction ID : SA11AI.8651

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
DR. MICHAEL BROOKS

Mailing Address 113 WINDSOR POINTE DR.

City PALM BEACH GARDENS State FL Zip Code 33418

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11AI.8875

Amount of Each Receipt this Period
25.00

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

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

550.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KELLY A BROWNE

Mailing Address 1723 E HAYMARKET WAY

City HUDSON State OH Zip Code 44236

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 25 / 2014

Transaction ID : SA11A1.8606

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
GLENN E BRYAN MD

Mailing Address 4255 N US HIGHWAY 1

City MELBOURNE State FL Zip Code 32935

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

Name of Employer SELF EMPLOYED Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 06 / 2014

Transaction ID : SA11A1.8560

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
MICHAEL BURCH

Mailing Address 610 YOUGH VIEW DR

City OAKLAND State MD Zip Code 21550

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

Name of Employer METTIKI COAL Occupation GENERAL MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11A1.8855

Amount of Each Receipt this Period
 200.00

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

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

1700.00

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

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

FOR LINE NUMBER: PAGE 17 OF 174
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GREGORY A BURTON

Mailing Address 4504 WASHINGTON AVE

City State Zip Code
CHARLESTON WV 25004

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 25 2014

Transaction ID : SA11A1.8618

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
RICHARD E CAIN

Mailing Address 4534 PLEASANT RIDGE RD.

City State Zip Code
MARIETTA OH 45750

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 11 2014

Transaction ID : SA11A1.8803

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
MR. RONALD M CAMERON

Mailing Address PO BOX 21440

City State Zip Code
LITTLE ROCK AR 72221

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

Name of Employer Occupation
MOUNTAIRE CORP. CHAIRMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 21 2014

Transaction ID : SA11A1.8448

Amount of Each Receipt this Period
2600.00

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

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

3400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
TODD CAMPBELL

Mailing Address 125 WATER SIDE CIR

City WINFIELD State WV Zip Code 25213

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

Name of Employer ST. MARY'S MEDICAL CENTER Occupation SENIOR VP/COO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.8763

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MARYANN CATER

Mailing Address 1 AARONWOODS CT

City WHEELING State WV Zip Code 26003

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

Name of Employer MPA Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2200.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 01 / 2014

Transaction ID : SA11AI.7241

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
ALLAN CHAMBERLAIN

Mailing Address 255 HIGH DRIVE

City HUNTINGTON State WV Zip Code 25705

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

Name of Employer ST. MARY'S MEDICAL MANAGEMENT Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1270.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 29 / 2014

Transaction ID : SA11AI.8698

Amount of Each Receipt this Period
250.00

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

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

1400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ALLAN CHAMBERLAIN		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2014	
Mailing Address 255 HIGH DRIVE		Transaction ID : SA11AI.8902	
City HUNTINGTON	State WV	Zip Code 25705	Amount of Each Receipt this Period _____ 90.00
FEC ID number of contributing federal political committee.		C _____	
Name of Employer ST. MARY'S MEDICAL MANAGEMENT	Occupation PHYSICIAN		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1360.00		

Full Name (Last, First, Middle Initial) B. JANE L CLINE		Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2014	
Mailing Address 1266 LOUDEN HEIGHTS RD.		Transaction ID : SA11AI.8722	
City CHARLESTON	State WV	Zip Code 25314	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee.		C _____	
Name of Employer SPILMAN THOMAS & BATTLE, PLLC	Occupation EXECUTIVE		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

Full Name (Last, First, Middle Initial) C. BRYAN COKELEY		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address 1557 CONNELL RD.		Transaction ID : SA11AI.9052	
City CHARLESTON	State WV	Zip Code 25314	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee.		C _____	
Name of Employer STEPTOE AND JOHNSON	Occupation ATTORNEY		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1500.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 1090.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MATT COLKER

Mailing Address 401 - 10TH STREET UNIT 107

City HUNTINGTON	State WV	Zip Code 25701
--------------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
900.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.8792

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
DREMA S COOK

Mailing Address 1300 THIRD AVE.

City HUNTINGTON	State WV	Zip Code 25701
--------------------	-------------	-------------------

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

Name of Employer CHH	Occupation NURSE
-------------------------	---------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 06 / 2014

Transaction ID : SA11AI.8566

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
DR. DAVID W COOK

Mailing Address 2976 STAUNTON RD.

City HUNTINGTON	State WV	Zip Code 25702
--------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.8797

Amount of Each Receipt this Period
2000.00

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

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

3500.00

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

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

FOR LINE NUMBER: PAGE 21 OF 174
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GORDON COPLAND

Mailing Address 600 HALL ST.

City State Zip Code
BRIDGEPORT WV 26330

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

Name of Employer Occupation
STEPTOE AND JOHNSON ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 30 2014

Transaction ID : SA11A1.9051

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
S. PAIGE CRUZ

Mailing Address 139 10TH AVE. W

City State Zip Code
HUNTINGTON WV 25701

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 11 2014

Transaction ID : SA11A1.8761

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
ROBERT CURE

Mailing Address 63 OAK LN

City State Zip Code
BARBOURSVILLE WV 25504

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

Name of Employer Occupation
RADIOLOGY, INC. PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 11 2014

Transaction ID : SA11A1.8826

Amount of Each Receipt this Period
200.00

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

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

1200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MR. GEORGE D CURTIN III

Mailing Address 100 PARCOAL RD

City State Zip Code
WEBSTER SPRINGS WV 26228

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

Name of Employer Occupation
PARDEE & CURTIN PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 21 / 2014

Transaction ID : SA11AI.8453

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
STEVEN DALTON

Mailing Address 2 PLAYERS CLUB DRIVE

City State Zip Code
CHARLESTON WV 25311

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

Name of Employer Occupation
BROWN, EDWARDS, & CAY CPA

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 14 / 2014

Transaction ID : SA11AI.8588

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
DOROTHY DAUGHERTY

Mailing Address 240 BRADLEY FOSTER DR.

City State Zip Code
HUNTINGTON WV 25701

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.8759

Amount of Each Receipt this Period
500.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PATRICIA N DAUGHERTY		Date of Receipt M M / D D / Y Y Y Y 09 / 11 / 2014	
Mailing Address 531 - 12TH AVE.		Transaction ID : SA11AI.8760	
City HUNTINGTON	State WV	Zip Code 25701	Amount of Each Receipt this Period _____ 500.00
FEC ID number of contributing federal political committee.		_____ C	
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

Full Name (Last, First, Middle Initial) B. FRANK DEEM		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2014	
Mailing Address 5518 2ND AVE		Transaction ID : SA11AI.8879	
City VIENNA	State WV	Zip Code 26105	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee.		_____ C	
Name of Employer J. FRANK DEEM OIL & GAS	Occupation OWNER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 3600.00		

Full Name (Last, First, Middle Initial) C. PATRICK D. DEEM		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address 623 RIVENDELL DR		Transaction ID : SA11AI.9050	
City BRIDGEPORT	State WV	Zip Code 26330	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee.		_____ C	
Name of Employer STEPTOE AND JOHNSON	Occupation ATTORNEY		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 800.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 1750.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SUSAN DENIKER

Mailing Address 217 RUFFED GROUSE DR

City State Zip Code
BRIDGEPORT WV 26330

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

Name of Employer Occupation
STEPTOE AND JOHNSON PLLC ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.9049

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
WILLIAM DENNISON

Mailing Address 427 12TH AVE

City State Zip Code
HUNTINGTON WV 25701

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

Name of Employer Occupation
HIMG PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
700.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 01 / 2014

Transaction ID : SA11AI.8707

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
RICHARD M DEVOS

Mailing Address 126 OTTAWA AVE NW STE 500

City State Zip Code
GRAND RAPIDS MI 49503

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

Name of Employer Occupation
RDV CORPORATION EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.8966

Amount of Each Receipt this Period
600.00

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

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

1050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ELISABETH DEVOS

Mailing Address 126 OTTAWA AVE NW STE 500

City GRAND RAPIDS State MI Zip Code 49503

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.8973

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
HELEN DEVOS

Mailing Address 126 OTTAWA AVE NW STE 500

City GRAND RAPIDS State MI Zip Code 49503

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1400.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.8968

Amount of Each Receipt this Period
400.00

C. Full Name (Last, First, Middle Initial)
HELEN DEVOS

Mailing Address 126 OTTAWA AVE NW STE 500

City GRAND RAPIDS State MI Zip Code 49503

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1400.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.8970

Amount of Each Receipt this Period
1000.00

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

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

2400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RICHARD DEVOS JR.

Mailing Address 126 OTTAWA AVE NW STE 500

City GRAND RAPIDS	State MI	Zip Code 49503
----------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.8969

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
DANIEL G DEVOS

Mailing Address 126 OTTAWA AVE NW STE 500

City GRAND RAPIDS	State MI	Zip Code 49503
----------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.8971

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
PAMELA DEVOS

Mailing Address 126 OTTAWA AVE NW STE 500

City GRAND RAPIDS	State MI	Zip Code 49503
----------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.8972

Amount of Each Receipt this Period
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DOUGLAS DEVOS

Mailing Address 126 OTTAWA AVE NW STE 500

City GRAND RAPIDS	State MI	Zip Code 49503
----------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
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Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.8974

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
MARIA DEVOS

Mailing Address 126 OTTAWA AVE NW STE 500

City GRAND RAPIDS	State MI	Zip Code 49503
----------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.8975

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
SUZANNE C DEVOS

Mailing Address 126 OTTAWA AVE NE STE 500

City GRAND RAPIDS	State MI	Zip Code 49503
----------------------	-------------	-------------------

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

Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED
---	-------------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.8976

Amount of Each Receipt this Period
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DAVID E DICK

Mailing Address 3702 SWALLOWTAIL DR.

City MORGANTOWN State WV Zip Code 26508

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

Name of Employer STEPTOE AND JOHSON Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11AI.8863

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
JAMES H DISSEN

Mailing Address 2150 PRESIDENTIAL DR.

City CHARLESTON State WV Zip Code 25314

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

Name of Employer HIGHLAND HOSPITAL Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11AI.8849

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
WILLIAM F DOBBS JR.

Mailing Address PO BOX 553

City CHARLESTON State WV Zip Code 25322

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

Name of Employer JACKSON KELLY PLLC Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.9058

Amount of Each Receipt this Period
300.00

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

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

900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
THOMAS DODRILL

Mailing Address 56 CAMELOT DR

City HUNTINGTON State WV Zip Code 25701

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

Name of Employer T.K. DODRILL JEWELERS Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.8752

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
TERRY L DOTSON

Mailing Address 472 POPLAR SPRINGS RD.

City KINGSTON State TN Zip Code 37763

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

Name of Employer WORLDWIDE EQUIPMENT Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 01 / 2014

Transaction ID : SA11AI.7239

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
HANS DRANSFELD

Mailing Address 187 CAMELOT DR

City HUNTINGTON State WV Zip Code 25701

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

Name of Employer RADIOLOGY, INC. Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.8793

Amount of Each Receipt this Period
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SUSAN M DRANSFELD		Date of Receipt M M / D D / Y Y Y Y 09 / 11 / 2014	
Mailing Address 8 LAUREL POINTE		Transaction ID : SA11A1.8756	
City HUNTINGTON	State WV	Zip Code 25705	Amount of Each Receipt this Period _____ _____ 500.00
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 500.00		

Full Name (Last, First, Middle Initial) B. WILLIAM C. DULIN		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2014	
Mailing Address 3335 SMITHTOWN RD		Transaction ID : SA11A1.8844	
City MORGANTOWN	State WV	Zip Code 26508	Amount of Each Receipt this Period _____ _____ 1200.00
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer TIEFENBACH NORTH AMERICA	Occupation EXECUTIVE		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1275.00		

Full Name (Last, First, Middle Initial) C. N. F. DULIN		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2014	
Mailing Address 95057 BARCLAY PLACE UNIT 6C		Transaction ID : SA11A1.8869	
City FERNANDINA BEACH	State FL	Zip Code 32034	Amount of Each Receipt this Period _____ _____ 1500.00 REATTRIBUTION REQUESTED
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer SWANSON INDUSTRIES	Occupation VP		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 3500.00		

SUBTOTAL of Receipts This Page (optional).....	_____ _____ 3200.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PHILBY A DUNLAP

Mailing Address 2 WOLFE DR.

City HUNTINGTON State WV Zip Code 25705

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11AI.8903

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
JANELLE DUREMDES

Mailing Address PO BOX 1719

City PRINCETON State WV Zip Code 24740

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 25 / 2014

Transaction ID : SA11AI.8607

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
NANCY J ECHOLS

Mailing Address 2109 CHERRY AVE.

City HUNTINGTON State WV Zip Code 25701

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 21 / 2014

Transaction ID : SA11AI.8451

Amount of Each Receipt this Period
250.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DR. WILLIAM J ECHOLS

Mailing Address 2109 CHERRY AVE.

City State Zip Code
HUNTINGTON WV 25701

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 03 / 2014

Transaction ID : SA11AI.8737

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
JOHN ELLIOTT

Mailing Address 105 MORGAN HILL RD

City State Zip Code
MORGANTOWN WV 26508

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
900.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 15 / 2014

Transaction ID : SA11AI.8847

Amount of Each Receipt this Period
600.00

C. Full Name (Last, First, Middle Initial)
AL EMCH

Mailing Address 1814 ROLLING HILLS RD

City State Zip Code
CHARLESTON WV 25314

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

Name of Employer Occupation
JACKSON KELLY ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11AI.9026

Amount of Each Receipt this Period
250.00

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

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

1350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LOUIS E ENDERLE JR.

Mailing Address 309 BROOKVIEW DR

City BRIDGEPORT State WV Zip Code 26330

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

Name of Employer STEPTOE AND JOHNSON Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.9048

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
HARRY H ESBENSHADE III

Mailing Address PO BOX 5310

City VIENNA State WV Zip Code 26105

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.8802

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
AHMED D FAHEEM

Mailing Address 1016 LAKE DR

City DANIELS State WV Zip Code 25832

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 25 / 2014

Transaction ID : SA11AI.8623

Amount of Each Receipt this Period
1000.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
OLIVER FEARING

Mailing Address 50 PINECREST DR

City HUNTINGTON State WV Zip Code 25705

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

Name of Employer SMC ELECTRICAL PRODUCTS, INC. Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 25 / 2014

Transaction ID : SA11AI.8616

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
JAMES D FELSEN

Mailing Address 1369 ORLEANS DRIVE

City GREAT CACAPON State WV Zip Code 25422

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
450.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 01 / 2014

Transaction ID : SA11AI.7243

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
JAMES D FELSEN

Mailing Address 1369 ORLEANS DRIVE

City GREAT CACAPON State WV Zip Code 25422

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 01 / 2014

Transaction ID : SA11AI.8708

Amount of Each Receipt this Period
50.00

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

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

600.00

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

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

FOR LINE NUMBER: PAGE 35 OF 174
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CLARE M FINNEGAN

Mailing Address 327 WOODLAND DR.

City State Zip Code
HUNTINGTON WV 25705

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1350.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.8825

Amount of Each Receipt this Period
1350.00

B. Full Name (Last, First, Middle Initial)
SHARON FLANERY

Mailing Address 1020 SHAWNEE TRAIL

City State Zip Code
ELKVIEW WV 25071

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

Name of Employer Occupation
STEPTOE AND JOHNSON ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1700.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.9047

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
DAVID M FLANNERY

Mailing Address 3 GAT CREEK RD.

City State Zip Code
CHARLESTON WV 25314

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

Name of Employer Occupation
STEPTOE AND JOHNSON ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.9046

Amount of Each Receipt this Period
500.00

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

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

2350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. JAMES FLETCHER		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 11 / 2014
Mailing Address 2 WILLOW GLEN RD		Transaction ID : SA11AI.8770
City HUNTINGTON	State WV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer FLETCHER MINING EQUIPMENT	Occupation CHAIRMAN	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	

Full Name (Last, First, Middle Initial) B. GERDA T FLETCHER		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 11 / 2014
Mailing Address 2 WILLOW GLEN RD.		Transaction ID : SA11AI.8771
City HUNTINGTON	State WV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2300.00
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2300.00	

Full Name (Last, First, Middle Initial) C. JAN L FOX		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2014
Mailing Address 114 PINE TRACE		Transaction ID : SA11AI.9045
City SOUTH CHARLESTON	State WV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer STEPTOE AND JOHNSON	Occupation ATTORNEY	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450.00	

SUBTOTAL of Receipts This Page (optional).....	2750.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 37 OF 174
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
J. V. FUNDERBURK

Mailing Address 113 CYRUS PT.

City Charleston State WV Zip Code 25314

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11A1.9074

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
WILLIAM GALEOTA

Mailing Address 167 SENECA HILLS

City Morgantown State WV Zip Code 26508

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

Name of Employer STEPTOE AND JOHNSON Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11A1.9043

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
BRIAN D. GALLAGHER

Mailing Address 1292 GOSHEN RD.

City Morgantown State WV Zip Code 26508

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11A1.8864

Amount of Each Receipt this Period
500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BLAIR GARDNER

Mailing Address 59 ABNEY CIRCLE

City Charleston State WV Zip Code 25314

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

Name of Employer JACKSON KELLY Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.9022

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
LARRY GEORGE

Mailing Address 3 BIRCH TREE LN.

City Charleston State WV Zip Code 25314

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

Name of Employer SELF EMPLOYED Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 04 / 2014

Transaction ID : SA11AI.8741

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
JOSHUA GIBSON

Mailing Address 174 WOODHAVEN DR.

City HUNTINGTON State WV Zip Code 25701

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.8798

Amount of Each Receipt this Period
500.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) WILLIAM R. GIBSON		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2014	
Mailing Address 1241 KINGS RD.		Transaction ID : SA11A1.8860	
City MORGANTOWN	State WV	Zip Code 26508	Amount of Each Receipt this Period _____ 1500.00
FEC ID number of contributing federal political committee. C			
Name of Employer INFORMATION REQUESTED		Occupation INFORMATION REQUESTED	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 1500.00	

Full Name (Last, First, Middle Initial) WILLIAM D GIVEN		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2014	
Mailing Address HC 74 BOX 312		Transaction ID : SA11A1.8918	
City STRANGE CREEK	State WV	Zip Code 25063	Amount of Each Receipt this Period _____ 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer COMMUNITY CARE OF WEST VIRGINIA		Occupation PHYSICIAN	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 350.00	

Full Name (Last, First, Middle Initial) JOEL GOLDY		Date of Receipt M M / D D / Y Y Y Y 07 / 03 / 2014	
Mailing Address 187 KINETIC DR.		Transaction ID : SA11A1.7247	
City HUNTINGTON	State WV	Zip Code 25701	Amount of Each Receipt this Period _____ 2600.00
FEC ID number of contributing federal political committee. C			
Name of Employer GOLDY AUTO		Occupation PRESIDENT	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date _____ 2600.00	

SUBTOTAL of Receipts This Page (optional).....	_____ 4150.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JOHN GRANTHAM

Mailing Address 110 WAGON RD LN

City TERRACE PARK State OH Zip Code 45174

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

Name of Employer RIVER TRADING COMPANY Occupation PARTNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
545.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.9021

Amount of Each Receipt this Period
45.00

B. Full Name (Last, First, Middle Initial)
CARL C GROVER

Mailing Address 1 ELECTRIC DR

City MILTON State WV Zip Code 25541

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

Name of Employer ENGINE'S INC Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.8785

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
DAVID HADEN

Mailing Address PO BOX 1428

City CHARLESTON State WV Zip Code 25325

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

Name of Employer SELF-EMPLOYED Occupation SALES

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 02 / 2014

Transaction ID : SA11AI.8718

Amount of Each Receipt this Period
100.00

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

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

2145.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BRAD HALL

Mailing Address **446 CLEMANS ROAD**

City **FLEMINGTON** State **WV** Zip Code **26347**

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

Name of Employer **SELF-EMPLOYED** Occupation **PHYSICIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 30 / 2014

Transaction ID : SA11AI.8472

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
STERLING HALL

Mailing Address **1558 WASHIGHTON BLVD**

City **HUNTINGTON** State **WV** Zip Code **25701**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 01 / 2014

Transaction ID : SA11AI.7240

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
ALLENE L HALL

Mailing Address **60 FAIRFAX DR.**

City **HUNTINGTON** State **WV** Zip Code **25705**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11AI.8751

Amount of Each Receipt this Period
500.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 42 OF 174	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
THOMAS R HALLORAN

Mailing Address 2506 KANAWHA AVE SE

City Charleston State WV Zip Code 25304

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

Name of Employer AQUA-CLEAR INC Occupation MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 06 / 2014

Transaction ID : SA11AI.8569

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
STEVE HAMER

Mailing Address 1 GREENBRIER MOUNTAIN

City HUNTINGTON State WV Zip Code 25705

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

Name of Employer SELF EMPLOYED Occupation HARDWOOD MANUFACTURER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11AI.8876

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
DOUGLAS HARDMAN

Mailing Address 2 SIERRA CR.

City HUNTINGTON State WV Zip Code 25705

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

Name of Employer JH FLETCHER AND CO. Occupation VICE CHAIRMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 21 / 2014

Transaction ID : SA11AI.8905

Amount of Each Receipt this Period
500.00

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

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

2500.00

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

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

FOR LINE NUMBER: PAGE 43 OF 174
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PHYLLIS S. HARRAH

Mailing Address 1975 WILTSHIRE BLVD.

City State Zip Code
HUNTINGTON WV 25701

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11AI.8862

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
JAMES T HARRIS

Mailing Address RT. 2 BOX 221

City State Zip Code
FAYETTEVILLE WV 25840

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.8778

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MICHAEL S. HARVEY

Mailing Address 6004 PINNACLE VIEW

City State Zip Code
HURRICANE WV 25826

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.9059

Amount of Each Receipt this Period
500.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 44 OF 174	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MARK HATFIELD

Mailing Address 1621 WOODVALE DR.

City Charleston State WV Zip Code 25314

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

Name of Employer RETINA CONSULTANTS Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.9072

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
MARCIA L HATTEN

Mailing Address 101 STRATMORE DR.

City Greer State SC Zip Code 29650

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.8801

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
ROBIN L HAYHURST

Mailing Address 16 BOGGESS ST.

City BUCKHANNON State WV Zip Code 26201

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11AI.8897

Amount of Each Receipt this Period
250.00

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

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RONALD L HAYHURST

Mailing Address **PO BOX 5010**

City **FAIRMONT** State **WV** Zip Code **26555**

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

Name of Employer
INFORMATION REQUESTED

Occupation
INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 22 / 2014

Transaction ID : SA11AI.8898

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
G. CASEY HILL

Mailing Address **140 THIRD AVE. W**

City **HUNTINGTON** State **WV** Zip Code **25701**

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

Name of Employer
INFORMATION REQUESTED

Occupation
INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11AI.8766

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
RONALD HOOSER

Mailing Address **PO BOX 35**

City **HAMLIN** State **WV** Zip Code **25523**

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

Name of Employer
INFORMATION REQUESTED

Occupation
INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11AI.8753

Amount of Each Receipt this Period
1000.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JAMES C HOWAT

Mailing Address 3015 CLIFFSIDE RD.

City HURRICANE State WV Zip Code 25526

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 25 / 2014

Transaction ID : SA11AI.8629

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
LISA D HRUTKAY

Mailing Address 1464 STOOLFIRE RD

City VALLEY GROVE State WV Zip Code 26060

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

Name of Employer SELF EMPLOYED Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
900.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 04 / 2014

Transaction ID : SA11AI.8740

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
TIMOTHY E. HUFFMAN

Mailing Address 738 MYRTLE ROAD

City CHARLESTON State WV Zip Code 25314

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

Name of Employer JACKSON KELLY Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1300.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.9056

Amount of Each Receipt this Period
500.00

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

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

1700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ERIC J. HULETT

Mailing Address 142 INTERNATIONAL CT.

City MARTINSBURG State WV Zip Code 25403

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

Name of Employer STEPTOE AND JOHNSON Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.9042

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
JEFFREY HURT

Mailing Address 29425 CHAGRIN BLVD., SUITE 300

City PEPPER PIKE State OH Zip Code 44122

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

Name of Employer DIVERSIFIED RESOURCES, INC Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 04 / 2014

Transaction ID : SA11AI.7947

Amount of Each Receipt this Period
5000.00

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
JEFFREY HURT

Mailing Address 29425 CHAGRIN BLVD., SUITE 300

City PEPPER PIKE State OH Zip Code 44122

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

Name of Employer DIVERSIFIED RESOURCES, INC Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 01 / 2014

Transaction ID : SA11AI.8550

Amount of Each Receipt this Period
-2400.00

[MEMO ITEM]
 REATTRIBUTED TO PIUNNO-HURT, JILL

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

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GEORGE E ISAACS

Mailing Address **PO BOX 10280**

City **HONOLULU** State **HI** Zip Code **96816**

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

Name of Employer
INFORMATION REQUESTED

Occupation
INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 22 / 2014

Transaction ID : SA11AI.8917

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
THOMAS E JECKERING

Mailing Address **7720 MAYFIELD RD.**

City **GATES MILLS** State **OH** Zip Code **44040**

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

Name of Employer
INFORMATION REQUESTED

Occupation
INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11AI.8806

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
VIRGINIA E JECKERING

Mailing Address **7720 MAYFIELD RD.**

City **GATES MILLS** State **OH** Zip Code **44040**

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

Name of Employer
INFORMATION REQUESTED

Occupation
INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2400.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11AI.8807

Amount of Each Receipt this Period
2400.00

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

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

5250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CARLOS JIMENEZ

Mailing Address 618 WOODRIDGE DR

City State Zip Code
GLEN DALE WV 26038

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

Name of Employer Occupation
SELF-EMPLOYED PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 03 / 2014

Transaction ID : SA11AI.8724

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
WILLIAM M JOHNSTON

Mailing Address 3786 NIAMI ST.

City State Zip Code
SEAFORD NY 11783

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

Name of Employer Occupation
HUB INTERNATIONAL NE ACCOUNT EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
509.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 11 / 2014

Transaction ID : SA11AI.8425

Amount of Each Receipt this Period
5.00

C. Full Name (Last, First, Middle Initial)
WILLIAM M JOHNSTON

Mailing Address 3786 NIAMI ST.

City State Zip Code
SEAFORD NY 11783

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

Name of Employer Occupation
HUB INTERNATIONAL NE ACCOUNT EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
514.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 16 / 2014

Transaction ID : SA11AI.8433

Amount of Each Receipt this Period
5.00

SUBTOTAL of Receipts This Page (optional).....	510.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) WILLIAM M JOHNSTON		Date of Receipt M M / D D / Y Y Y Y 07 / 27 / 2014	
Mailing Address 3786 MIAMI ST.		Transaction ID : SA11AI.8464	
City SEAFORD	State NY	Zip Code 11783	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00	
Name of Employer HUB INTERNATIONAL NE	Occupation ACCOUNT EXECUTIVE		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 524.00		

Full Name (Last, First, Middle Initial) WILLIAM M JOHNSTON		Date of Receipt M M / D D / Y Y Y Y 08 / 06 / 2014	
Mailing Address 3786 MIAMI ST.		Transaction ID : SA11AI.8577	
City SEAFORD	State NY	Zip Code 11783	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00	
Name of Employer HUB INTERNATIONAL NE	Occupation ACCOUNT EXECUTIVE		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 529.00		

Full Name (Last, First, Middle Initial) WILLIAM M JOHNSTON		Date of Receipt M M / D D / Y Y Y Y 08 / 08 / 2014	
Mailing Address 3786 MIAMI ST.		Transaction ID : SA11AI.8582	
City SEAFORD	State NY	Zip Code 11783	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.00	
Name of Employer HUB INTERNATIONAL NE	Occupation ACCOUNT EXECUTIVE		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 534.00		

SUBTOTAL of Receipts This Page (optional).....	20.00
TOTAL This Period (last page this line number only).....	[Empty Box]

**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 51 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WILLIAM M JOHNSTON

Mailing Address 3786 MIAMI ST.

City SEAFORD State NY Zip Code 11783

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

Name of Employer HUB INTERNATIONAL NE Occupation ACCOUNT EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
539.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 17 / 2014

Transaction ID : SA11AI.8593

Amount of Each Receipt this Period
5.00

B. Full Name (Last, First, Middle Initial)
WILLIAM M JOHNSTON

Mailing Address 3786 MIAMI ST.

City SEAFORD State NY Zip Code 11783

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

Name of Employer HUB INTERNATIONAL NE Occupation ACCOUNT EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
544.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 29 / 2014

Transaction ID : SA11AI.8694

Amount of Each Receipt this Period
5.00

C. Full Name (Last, First, Middle Initial)
WILLIAM M JOHNSTON

Mailing Address 3786 MIAMI ST.

City SEAFORD State NY Zip Code 11783

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

Name of Employer HUB INTERNATIONAL NE Occupation ACCOUNT EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
549.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 30 / 2014

Transaction ID : SA11AI.8699

Amount of Each Receipt this Period
5.00

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

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

15.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WILLIAM M JOHNSTON

Mailing Address 3786 MIAMI ST.

City SEAFORD State NY Zip Code 11783

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

Name of Employer HUB INTERNATIONAL NE Occupation ACCOUNT EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
554.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 17 / 2014

Transaction ID : SA11AI.8885

Amount of Each Receipt this Period
5.00

B. Full Name (Last, First, Middle Initial)
WILLIAM M JOHNSTON

Mailing Address 3786 MIAMI ST.

City SEAFORD State NY Zip Code 11783

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

Name of Employer HUB INTERNATIONAL NE Occupation ACCOUNT EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
559.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 21 / 2014

Transaction ID : SA11AI.8906

Amount of Each Receipt this Period
5.00

C. Full Name (Last, First, Middle Initial)
ROBERT M JONES

Mailing Address 805 TANAGER DR.

City BLUEFIELD State VA Zip Code 24605

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

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 03 / 2014

Transaction ID : SA11AI.8736

Amount of Each Receipt this Period
500.00

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

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

510.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KURT KAUFMANN

Mailing Address 6556 S COOK CT.

City CENTENNIAL State CO Zip Code 80121

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

Name of Employer SHERMAN & HOWARD Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 12 / 2014

Transaction ID : SA11AI.8426

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
STEPHEN KEEN

Mailing Address PO BOX 1727

City CRAIGSVILLE State WV Zip Code 26205

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
635.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.9007

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
NITA SUE KENT

Mailing Address 133 WOODLAND DR

City HUNTINGTON State WV Zip Code 25705

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : SA11AI.8933

Amount of Each Receipt this Period
500.00

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

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

1050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
EZRA KEST

Mailing Address 16030 VENTURA BLVD. #240

City ENCINO	State CA	Zip Code 93160
----------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 10 / 2014

Transaction ID : SA11AI.8421

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
EZRA KEST

Mailing Address 16030 VENTURA BLVD. #240

City ENCINO	State CA	Zip Code 93160
----------------	-------------	-------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 07 / 2014

Transaction ID : SA11AI.8949

Amount of Each Receipt this Period
-400.00

[MEMO ITEM]
REATTRIBUTED TO KEST, LAUREN

C. Full Name (Last, First, Middle Initial)
LAUREN KEST

Mailing Address 16030 VENTURA BLVD #240

City ENCINO	State CA	Zip Code 93160
----------------	-------------	-------------------

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

Name of Employer SELF-EMPLOYED	Occupation REAL ESTATE MANAGEMENT
-----------------------------------	--------------------------------------

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 07 / 2014

Transaction ID : SA11AI.8950

Amount of Each Receipt this Period
400.00

[MEMO ITEM]
REATTRIBUTED FROM KEST, EZRA

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
EVANS L. KING

Mailing Address 423 STANLEY AVE.

City State Zip Code
CLARKSBURG WV 26301

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

Name of Employer Occupation
STEPTOE AND JOHNSON ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11A1.9040

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
OREN KITTS

Mailing Address 1509 MOUNT VERNON ROAD

City State Zip Code
CHARLESTON WV 25314

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

Name of Employer Occupation
ALPHA NATURAL RESOURCES SENIOR ENVIRONMENTAL AFFAIRS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2750.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11A1.9015

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
PETER KOHUT

Mailing Address 67544 POGUE RD

City State Zip Code
ST. CLAIRSVILLE OH 43950

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

Name of Employer Occupation
LARROL SUPPLY INC EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 04 / 2014

Transaction ID : SA11A1.7945

Amount of Each Receipt this Period
3000.00

[MEMO ITEM]
REATTRIBUTION REQUESTED

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

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

600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PETER KOHUT

Mailing Address 67544 POGUE RD

City State Zip Code
ST. CLAIRSVILLE OH 43950

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

Name of Employer Occupation
LARROL SUPPLY INC EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
MM / DD / YYYY
07 / 01 / 2014

Transaction ID : SA11AI.8552

Amount of Each Receipt this Period
-400.00

[MEMO ITEM]
REATTRIBUTED TO KOHUT, CATHY

B. Full Name (Last, First, Middle Initial)
CATHY S KOHUT

Mailing Address 67544 POGUE ROAD

City State Zip Code
ST CLAIRSVILLE OH 43950

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
MM / DD / YYYY
07 / 01 / 2014

Transaction ID : SA11AI.8553

Amount of Each Receipt this Period
400.00

[MEMO ITEM]
REATTRIBUTED FROM KOHUT, PETER

C. Full Name (Last, First, Middle Initial)
DR. MICHAEL V KORONA JR.

Mailing Address 118 LAUREL CROSSING

City State Zip Code
HUNTINGTON WV 25705

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

Name of Employer Occupation
RADIOLOGY, INC. PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
MM / DD / YYYY
09 / 11 / 2014

Transaction ID : SA11AI.8769

Amount of Each Receipt this Period
1000.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MUTHUSAMI KUPPUSAMI

Mailing Address 109 WINDSOR CR

City State Zip Code
BLUEFIELD VA 24605

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1050.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 31 2014

Transaction ID : SA11AI.8475

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MUTHUSAMI KUPPUSAMI

Mailing Address 109 WINDSOR CR

City State Zip Code
BLUEFIELD VA 24605

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 13 2014

Transaction ID : SA11AI.8833

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
MARGARET A LAVERY

Mailing Address 208 SANDALWOOD DR.

City State Zip Code
HUNTINGTON WV 25705

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 11 2014

Transaction ID : SA11AI.8755

Amount of Each Receipt this Period
500.00

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HENRY LAWRENCE

Mailing Address 411 W PHILADELPHIA AVE.

City BRIDGEPORT State WV Zip Code 26330

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

Name of Employer STEPTOE AND JOHNSON PLLC Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.9039

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
JEFFREY L LEABERRY

Mailing Address 11 SUNSET DR.

City HUNTINGTON State WV Zip Code 25701

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

Name of Employer RIVER CITIES ANESTHESIA Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.8775

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
JOSEPH M LETNAUNCHYN

Mailing Address 225 ARIEL HEIGHTS

City CHARLESTON State WV Zip Code 25311

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

Name of Employer WEST VIRGINIA HOSPITAL ASSOC. Occupation PRESIDENT & CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 03 / 2014

Transaction ID : SA11AI.8735

Amount of Each Receipt this Period
500.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. GEORGE LINSENMEYER III		Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2014	
Mailing Address 4 HICKORY LN		Transaction ID : SA11AI.8738	
City HUNTINGTON	State WV	Zip Code 25705	Amount of Each Receipt this Period _____ 1500.00
FEC ID number of contributing federal political committee.		C	
Name of Employer HIMG	Occupation PHYSICIAN		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2500.00		

Full Name (Last, First, Middle Initial) B. EDWARD A LOZICK		Date of Receipt M M / D D / Y Y Y Y 08 / 06 / 2014	
Mailing Address 29425 CHAGRIN BLVD. STE. 201		Transaction ID : SA11AI.8564	
City PEPPER PIKE	State OH	Zip Code 44122	Amount of Each Receipt this Period _____ 2500.00
FEC ID number of contributing federal political committee.		C	
Name of Employer SWAGELOK COMPANY	Occupation CHAIRMAN OF THE BOARD		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2500.00		

Full Name (Last, First, Middle Initial) C. THOMAS F LOZICK		Date of Receipt M M / D D / Y Y Y Y 08 / 25 / 2014	
Mailing Address 1069 ROYAL MILE		Transaction ID : SA11AI.8615	
City BIRMINGHAM	State AL	Zip Code 35242	Amount of Each Receipt this Period _____ 1000.00
FEC ID number of contributing federal political committee.		C	
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 1000.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 5000.00
TOTAL This Period (last page this line number only).....	_____

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

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

FOR LINE NUMBER: PAGE 60 OF 174
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ERIN MAGEE

Mailing Address 1332 MORNINGSID DR

City Charleston State WV Zip Code 25314

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

Name of Employer JACKSON KELLY Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.9024

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
LAWRENCE J. MALONE

Mailing Address 907 HIGHLAND RD.

City Charleston State WV Zip Code 25302

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.9062

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
GEORGE MARSHALL

Mailing Address PO BOX 758

City MORGANTOWN State WV Zip Code 26507

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

Name of Employer PETITTO MINE EQUIPMENT, INC. Occupation OFFICER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 16 / 2014

Transaction ID : SA11AI.8434

Amount of Each Receipt this Period
100.00

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

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

700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) GEORGE MARSHALL		Date of Receipt M M / D D / Y Y Y Y 07 / 29 / 2014
Mailing Address PO BOX 758		Transaction ID : SA11AI.8467
City MORGANTOWN	State WV	Zip Code 26507
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer PETITTO MINE EQUIPMENT, INC.	Occupation OFFICER	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00	

Full Name (Last, First, Middle Initial) GEORGE MARSHALL		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address PO BOX 758		Transaction ID : SA11AI.8859
City MORGANTOWN	State WV	Zip Code 26507
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer PETITTO MINE EQUIPMENT, INC.	Occupation OFFICER	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00	

Full Name (Last, First, Middle Initial) GAYLE MCCROSKEY		Date of Receipt M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 213 N COURT ST.		Transaction ID : SA11AI.8422
City LEWISBURG	State WV	Zip Code 24901
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer SELF-EMPLOYED	Occupation CPA	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GRANT MCGUIRE

Mailing Address **PO BOX 1835**

City **HUNTINGTON** State **WV** Zip Code **25719**

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

Name of Employer **CAMPBELL WOODS PLLC** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 06 / 2014

Transaction ID : SA11A1.8563

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
JEFFEREY MCINTYRE

Mailing Address **210 KANAWHA AVENUE SOUTH**

City **NITRO** State **WV** Zip Code **25143**

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

Name of Employer **WV AMERICAN WATER** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 30 / 2014

Transaction ID : SA11A1.8700

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
JEFFEREY MCINTYRE

Mailing Address **210 KANAWHA AVENUE SOUTH**

City **NITRO** State **WV** Zip Code **25143**

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

Name of Employer **WV AMERICAN WATER** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 29 / 2014

Transaction ID : SA11A1.9000

Amount of Each Receipt this Period
100.00

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

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

1350.00

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

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

FOR LINE NUMBER: PAGE 63 OF 174
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LESLIE J. MCINTYRE

Mailing Address 4 ROCKLEDGE DR

City Charleston State WV Zip Code 25302

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

Name of Employer JACKSON KELLY Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.9025

Amount of Each Receipt this Period
 50.00

B. Full Name (Last, First, Middle Initial)
DOUGLAS MCKINNEY

Mailing Address 127 WILLIS AVE

City BRIDGEPORT State WV Zip Code 26330

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

Name of Employer ST. JOSEPH'S HOSPITAL Occupation UROLOGIST

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 4100.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.8810

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
ROBERT G. MCLUSKY

Mailing Address 1869 LOUDEN HEIGHTS RD

City CHARLESTON State WV Zip Code 25314

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

Name of Employer JACKSON KELLY Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.9060

Amount of Each Receipt this Period
 500.00

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

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

1050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RICHARD E MCWHORTER

Mailing Address 22 CHESTNUT DR

City HUNTINGTON State WV Zip Code 25706

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

Name of Employer RADIOLOGY, INC. Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 21 / 2014

Transaction ID : SA11A1.8440

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
RICHARD E MCWHORTER

Mailing Address 22 CHESTNUT DR

City HUNTINGTON State WV Zip Code 25706

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

Name of Employer RADIOLOGY, INC. Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 25 / 2014

Transaction ID : SA11A1.8611

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
RICHARD E MCWHORTER

Mailing Address 22 CHESTNUT DR

City HUNTINGTON State WV Zip Code 25706

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

Name of Employer RADIOLOGY, INC. Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11A1.8805

Amount of Each Receipt this Period
100.00

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

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

300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CORBIN MILLER

Mailing Address 1165 5TH AVENUE

City State Zip Code
NEW YORK NY 10029

FEC ID number of contributing federal political committee.

Name of Employer Occupation
SELF-EMPLOYED PRIVATE INVESTIGATOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.8997

Amount of Each Receipt this Period

B. Full Name (Last, First, Middle Initial)
MATT MILLER

Mailing Address 1316 12TH ST

City State Zip Code
HUNTINGTON WV 25701

FEC ID number of contributing federal political committee.

Name of Employer Occupation
DUTCH MILLTER AUTO EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.8782

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)
CASSIE A MILLER

Mailing Address 2106 WILTSHIRE BLVD

City State Zip Code
HUNTINGTON WV 25701

FEC ID number of contributing federal political committee.

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 / /

Transaction ID : SA11AI.8787

Amount of Each Receipt this Period

REFUND PENDING

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

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SAMUEL B MILLER

Mailing Address 219 HOLSWADE DR

City HUNTINGTON State WV Zip Code 25701

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

Name of Employer DUTCH MILLTER AUTO Occupation AUTO DEALER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.8781

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
CHRISTOPHER D MILLER

Mailing Address 2106 WILTSHIRE BLVD.

City HUNTINGTON State WV Zip Code 25701

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

Name of Employer DUTCH MILLER KIA Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3200.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.8786

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
GLENN MILLER

Mailing Address 1011 SAVILE LN.

City MCLEAN State VA Zip Code 22101

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

Name of Employer KATTEN MUCHIN Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 09 / 2014

Transaction ID : SA11AI.8417

Amount of Each Receipt this Period
250.00

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

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

4850.00

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

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

FOR LINE NUMBER: PAGE 67 OF 174
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CAROL D MILLER

Mailing Address 1316 12TH ST.

City State Zip Code
HUNTINGTON WV 25701

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 11 2014

Transaction ID : SA11A1.8783

Amount of Each Receipt this Period
1400.00

B. Full Name (Last, First, Middle Initial)
SARAH M MINEAR

Mailing Address 2020 GEORGIAN LANE

City State Zip Code
MORGANTOWN WV 26508

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
360.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 29 2014

Transaction ID : SA11A1.9001

Amount of Each Receipt this Period
110.00

C. Full Name (Last, First, Middle Initial)
HARRY J MITCHELL

Mailing Address 4604 NORMAR RD.

City State Zip Code
SOUTH CHARLESTON WV 25309

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

Name of Employer Occupation
VERIZON COMMUNICATIONS DIRECTOR OF PUBLIC RELATIONS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 11 2014

Transaction ID : SA11A1.8800

Amount of Each Receipt this Period
50.00

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

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

1560.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JOSEPH MOMEN

Mailing Address 7 CHENOWETH DRIVE

City State Zip Code
BRIDGEPORT WV 26330

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

Name of Employer Occupation
PEDIATRIC ASSOCIATES PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.8809

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
DR. ROCCO A MORABITO SR.

Mailing Address 20 KENSINGTON LN.

City State Zip Code
HUNTINGTON WV 25705

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

Name of Employer Occupation
ST. MARY'S MEDICAL MANAGEMENT PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.8749

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
ROCCO A MORABITO JR.

Mailing Address 53 PRIVATE DR.
#633

City State Zip Code
CHESAPEAKE OH 45619

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.8767

Amount of Each Receipt this Period
500.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CRAIG M MORGAN M.D.

Mailing Address 1611 13TH AVE.

City HUNTINGTON State WV Zip Code 25701

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

Name of Employer EYE CONSULTANTS OF HUNTINGTON Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 14 / 2014

Transaction ID : SA11AI.8429

Amount of Each Receipt this Period
 500.00

B. Full Name (Last, First, Middle Initial)
CRAIG M MORGAN M.D.

Mailing Address 1611 13TH AVE.

City HUNTINGTON State WV Zip Code 25701

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

Name of Employer EYE CONSULTANTS OF HUNTINGTON Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 26 / 2014

Transaction ID : SA11AI.8644

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
RHONDA MORGAN

Mailing Address 1611 13TH AVE.

City HUNTINGTON State WV Zip Code 25701

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 09 / 2014

Transaction ID : SA11AI.8743

Amount of Each Receipt this Period
 1500.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SHERRY MORRIS		Date of Receipt MM / DD / YYYY 06 / 05 / 2014
Mailing Address 45 LEBANON RD		Transaction ID : SA11AI.8344
City GALATIA	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 4200.00
Name of Employer JOE MORRIS EXCAVATING LLC	Occupation OWNER	[MEMO ITEM] REATTRIBUTION REQUESTED
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4200.00	

Full Name (Last, First, Middle Initial) B. SHERRY MORRIS		Date of Receipt MM / DD / YYYY 07 / 01 / 2014
Mailing Address 45 LEBANON RD		Transaction ID : SA11AI.8554
City GALATIA	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -1600.00
Name of Employer JOE MORRIS EXCAVATING LLC	Occupation OWNER	[MEMO ITEM] REATTRIBUTED TO MORRIS, JOE
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

Full Name (Last, First, Middle Initial) C. JOE MORRIS		Date of Receipt MM / DD / YYYY 07 / 01 / 2014
Mailing Address 45 LEBANON RD		Transaction ID : SA11AI.8555
City GALATIA	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1600.00
Name of Employer JOE MORRIS EXCAVATING	Occupation OWNER	[MEMO ITEM] REATTRIBUTED FROM MORRIS, SHERRY
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1600.00	

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DAVID MORRISON

Mailing Address 1401 AARON SMITH DR.

City State Zip Code
BRIDGEPORT WV 26330

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

Name of Employer Occupation
STEPTOE AND JOHNSON PLLC ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.9038

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MARSHA A MOSES

Mailing Address 22 GREEN SPRING DR.

City State Zip Code
HUNTINGTON WV 25705

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.8788

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
HALCYON F MOSES

Mailing Address 28 PINECREST DR

City State Zip Code
HUNTINGTON WV 25705

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : SA11AI.8934

Amount of Each Receipt this Period
2000.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
FRANK MURPHY III

Mailing Address 5311 SOUTH 122 EAST AVENUE

City State Zip Code
TULSA OK 74146

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

Name of Employer Occupation
CHESAPEAKE CAPITAL GROUP CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 22 / 2014

Transaction ID : SA11AI.8912

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
RYAN L NAPIER

Mailing Address 5192 SEA PINES CIR.

City State Zip Code
CANTON OH 44718

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

Name of Employer Occupation
TGD RESTAURANTS, LLC OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 15 / 2014

Transaction ID : SA11AI.8871

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
RYAN L NAPIER

Mailing Address 5192 SEA PINES CIR.

City State Zip Code
CANTON OH 44718

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

Name of Employer Occupation
TGD RESTAURANTS, LLC OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
725.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11AI.9080

Amount of Each Receipt this Period
500.00

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

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

3125.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
C R NEIGHBORGALL IV

Mailing Address 2105 CHERRY AVE.

City HUNTINGTON State WV Zip Code 25701

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.8799

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
ROGER NICHOLSON

Mailing Address 1557 QUARRIER STREET

City CHARLESTON State WV Zip Code 25311

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

Name of Employer SELF-EMPLOYED Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2300.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 14 / 2014

Transaction ID : SA11AI.8430

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
ROGER NICHOLSON

Mailing Address 1557 QUARRIER STREET

City CHARLESTON State WV Zip Code 25311

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

Name of Employer SELF-EMPLOYED Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2800.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 22 / 2014

Transaction ID : SA11AI.8603

Amount of Each Receipt this Period
500.00

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
THOMAS OBROKTA JR.

Mailing Address 6001 PINNACLE VIEW RD

City State Zip Code
HURRICANE WV 25526

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

Name of Employer Occupation
BRICKSTREET COO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 25 / 2014

Transaction ID : SA11AI.8630

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
DAVID OSBOURN

Mailing Address 1824 FOXCROFT LANE UNIT 706

City State Zip Code
ALLISON PARK PA 15101

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

Name of Employer Occupation
RESCHINI GROUP EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2400.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11AI.9017

Amount of Each Receipt this Period
2400.00

C. Full Name (Last, First, Middle Initial)
RAJESH V PATEL

Mailing Address 123 FAR COUNTRY DR.

City State Zip Code
DANIELS WV 25832

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11AI.8777

Amount of Each Receipt this Period
750.00

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

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

4150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
H R PEROT JR.

Mailing Address **PO BOX 269014**

City **PLANO** State **TX** Zip Code **75026**

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

Name of Employer **PEROT SERVIVES COMPANY, LLC** Occupation **PARTNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 22 / 2014

Transaction ID : SA11AI.8895

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
JAY PERRY

Mailing Address **111 CAMELOT DRIVE**

City **HUNTINGTON** State **WV** Zip Code **25701**

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

Name of Employer **NRP** Occupation **REGIONAL MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 31 / 2014

Transaction ID : SA11AI.8478

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
JAMES L. PETITTO

Mailing Address **PO BOX 758**

City **MORGANTOWN** State **WV** Zip Code **26507**

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

Name of Employer **PETITTO MINE EQUIPMENT, INC.** Occupation **OFFICER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 15 / 2014

Transaction ID : SA11AI.8845

Amount of Each Receipt this Period
250.00

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

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

3050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JACK R PHILLIPS

Mailing Address 430 W FENWAY DR.

City: HERNANDO State: FL Zip Code: 34442

FEC ID number of contributing federal political committee: C

Name of Employer: INFORMATION REQUESTED Occupation: INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 09 / 11 / 2014

Transaction ID : SA11AI.8791

Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
MARK PINSON

Mailing Address 101 RIDGEWOOD RD

City: HUNTINGTON State: WV Zip Code: 25701

FEC ID number of contributing federal political committee: C

Name of Employer: INFORMATION REQUESTED Occupation: INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2000.00

Date of Receipt: 09 / 24 / 2014

Transaction ID : SA11AI.8924

Amount of Each Receipt this Period: 2000.00

C. Full Name (Last, First, Middle Initial)
JILL A PIUNNO-HURT

Mailing Address 250 CAMDEN

City: AURORA State: OH Zip Code: 44202

FEC ID number of contributing federal political committee: C

Name of Employer: INFORMATION REQUESTED Occupation: INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2400.00

Date of Receipt: 07 / 01 / 2014

Transaction ID : SA11AI.8551

Amount of Each Receipt this Period: 2400.00

[MEMO ITEM]
REATTRIBUTED FROM HURT, JEFFREY

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MELODY POTTER

Mailing Address 105 NEWCOMER RD.

City State Zip Code
S. CHARLESTON WV 25309

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

Name of Employer Occupation
TRI-STAR COAL SALES COMPANY OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 20 / 2014

Transaction ID : SA11AI.8596

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
CHAD PRATHER

Mailing Address 227 SANTORINI AVE.

City State Zip Code
MORGANTOWN WV 26508

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 14 / 2014

Transaction ID : SA11AI.8428

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
SHAWN D REESMAN

Mailing Address 505 OLD FARM RD.

City State Zip Code
DANIELS WV 25832

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

Name of Employer Occupation
RALEIGH RADIOLOGY INC PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.8776

Amount of Each Receipt this Period
500.00

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JOHN REIFSTECK

Mailing Address 2145 PRESIDENTIAL DR

City Charleston State WV Zip Code 25314

FEC ID number of contributing federal political committee. C

Name of Employer ASSOCIATED RADIOLOGISTS Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 450.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : SA11AI.8921

Amount of Each Receipt this Period
 100.00

B. Full Name (Last, First, Middle Initial)
MATTHEW RICE

Mailing Address 7800 RT. 145 S

City HARRISBURG State IL Zip Code 62946

FEC ID number of contributing federal political committee. C

Name of Employer DATE MINING SERVICES Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 04 / 2014

Transaction ID : SA11AI.7951

Amount of Each Receipt this Period
 10000.00

**[MEMO ITEM]
 REATTRIBUTION REQUESTED/REFUND PENDING**

C. Full Name (Last, First, Middle Initial)
MATTHEW RICE

Mailing Address 7800 RT. 145 S

City HARRISBURG State IL Zip Code 62946

FEC ID number of contributing federal political committee. C

Name of Employer DATE MINING SERVICES Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 7400.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 15 / 2014

Transaction ID : SA11AI.8437

Amount of Each Receipt this Period
 -2600.00

**[MEMO ITEM]
 REATTRIBUTED TO RICE, STACI**

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

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

100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
STACI RICE

Mailing Address 7800 RT 145 SOUTH

City HARRISBURG State IL Zip Code 62946

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 15 / 2014

Transaction ID : SA11AI.8438

Amount of Each Receipt this Period
2600.00

[MEMO ITEM]
REATTRIBUTED FROM RICE, MATTHEW

B. Full Name (Last, First, Middle Initial)
STEPHEN G. ROBERTS

Mailing Address 1326 MORNINGSIDE DR

City CHARLESTON State WV Zip Code 25314

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

Name of Employer WV CHAMBER OF COMMERCE Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.9028

Amount of Each Receipt this Period
2600.00

C. Full Name (Last, First, Middle Initial)
MARIE ROSE D ROMERO

Mailing Address 110 SOURWOOD LN.

City DANIELS State WV Zip Code 25832

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

Name of Employer RALEIGH COUNTY MEDICAL SOCIETY Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1300.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 25 / 2014

Transaction ID : SA11AI.8632

Amount of Each Receipt this Period
300.00

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

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

2900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JERRY ROSEBERRY

Mailing Address RT. 3 BOX 75

City ONA State WV Zip Code 25545

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

Name of Employer RICHWOOD Occupation MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 28 / 2014

Transaction ID : SA11AI.8653

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
TIMOTHY P RYAN

Mailing Address 8080 WOODBERRY BLVD.

City CHAGRIN FALLS State OH Zip Code 44023

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

Name of Employer GREAT LAKES GROWERS LLC Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 06 / 2014

Transaction ID : SA11AI.8565

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
MARK A SADD

Mailing Address 207 BEAUREGARD ST.

City CHARLESTON State WV Zip Code 25301

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

Name of Employer LEWIS GLASSER CASEY AND ROLLIN Occupation PARTNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 25 / 2014

Transaction ID : SA11AI.8640

Amount of Each Receipt this Period
 100.00

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

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

2100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MARK A SADD

Mailing Address 207 BEAUREGARD ST.

City Charleston State WV Zip Code 25301

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

Name of Employer LEWIS GLASSER CASEY AND ROLLIN Occupation PARTNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 03 / 2014

Transaction ID : SA11AI.8720

Amount of Each Receipt this Period
 100.00

B. Full Name (Last, First, Middle Initial)
HOSSEIN SAKHAI

Mailing Address 3006 STAUNTON RD.

City HUNTINGTON State WV Zip Code 25702

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

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.8794

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
ZIAD SALEM

Mailing Address 121 GOLF MEADOWS LN.

City CHAPMANVILLE State WV Zip Code 25508

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

Name of Employer LOGAN REGIONAL MEDICAL CENTER Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 24 / 2014

Transaction ID : SA11AI.8922

Amount of Each Receipt this Period
 1000.00

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

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

1350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PACITA S SALON

Mailing Address 812 CLUB CIR.

City DANIELS State WV Zip Code 25832

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

Name of Employer SELF EMPLOYED Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 25 / 2014

Transaction ID : SA11A1.8631

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
JOSEPH M SANDERS

Mailing Address 1315 WHITETHORN ST

City BLUEFIELD State WV Zip Code 24701

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 25 / 2014

Transaction ID : SA11A1.8617

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
CAROLE M SCARING

Mailing Address 411 CLUB CIR.

City DANIELS State WV Zip Code 25832

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 25 / 2014

Transaction ID : SA11A1.8633

Amount of Each Receipt this Period
200.00

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

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

900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WINFRED L SCHREWSBURY

Mailing Address **PO BOX 1120**

City **ATHENS** State **WV** Zip Code **24712**

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

Name of Employer **SHREWSBURY MACHINE & GEAR INC** Occupation **CEO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 21 / 2014

Transaction ID : SA11A1.8452

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
DOUGLAS SCHWAB

Mailing Address **2820 WYNNLAND ROAD**

City **GLENSHAW** State **PA** Zip Code **15116**

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

Name of Employer **RESCHINI GROUP** Occupation **INSURANCE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2400.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11A1.9016

Amount of Each Receipt this Period
2400.00

C. Full Name (Last, First, Middle Initial)
J. W. SEARS II

Mailing Address **1221 4TH AVE.**

City **HUNTINGTON** State **WV** Zip Code **25701**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 15 / 2014

Transaction ID : SA11A1.8865

Amount of Each Receipt this Period
500.00

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

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

3900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ALBERT F. SEBOK

Mailing Address **PO BOX 569**

City **HURRICANE** State **WV** Zip Code **25526**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11AI.9027

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
MICHAEL SELLARDS

Mailing Address **60 MAYFAIR WAY**

City **HUNTINGTON** State **WV** Zip Code **25705**

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

Name of Employer **ST. MARY'S MEDICAL CENTER** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11AI.8774

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
ROBERT SELLARDS

Mailing Address **208 SENECA RD**

City **HUNTINGTON** State **WV** Zip Code **25705**

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

Name of Employer **NELSON MULLINS** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11AI.8768

Amount of Each Receipt this Period
1000.00

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

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

2300.00

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

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

FOR LINE NUMBER: PAGE 85 OF 174
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DR, SANJEEV SHARMA

Mailing Address 4 WINDSOR DR.

City HUNTINGTON State WV Zip Code 25705

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

Name of Employer PREMIER RADIATION ONCOLOGY Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 03 / 2014

Transaction ID : SA11AI.8739

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
JULIE A SHEILS

Mailing Address 124 BRADY DR.

City BARBOURSVILLE State WV Zip Code 25504

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.8757

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
MARK SHERIDAN

Mailing Address 138 WOODLAND DR

City HUNTINGTON State WV Zip Code 25705

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

Name of Employer TRI-STATE OTOLARYNGOLOGY Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.8773

Amount of Each Receipt this Period
1000.00

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MICHAEL SHOTT

Mailing Address **PO BOX 989**

City **CORNELIUS** State **NC** Zip Code **28031**

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

Name of Employer **JANPAK** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 03 / 2014

Transaction ID : SA11A1.8733

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
STEPHEN SHY

Mailing Address **3174 ROUTE 75**

City **HUNTINGTON** State **WV** Zip Code **25704**

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

Name of Employer **SELF-EMPLOYED** Occupation **PHYSICIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 01 / 2014

Transaction ID : SA11A1.8712

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
WILLIAM SIGNORELLI

Mailing Address **PO BOX 4314**

City **CHARLESTON** State **WV** Zip Code **25364**

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

Name of Employer **SECURITY AMERICA** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 06 / 2014

Transaction ID : SA11A1.8558

Amount of Each Receipt this Period
500.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ALLEN H SIMON

Mailing Address 1383 N CRISS ST

City CHANDLER State AZ Zip Code 85226

FEC ID number of contributing federal political committee. C

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 220.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 17 / 2014

Transaction ID : SA11AI.8884

Amount of Each Receipt this Period
 95.00

B. Full Name (Last, First, Middle Initial)
CHRISTOPHER SLAUGHTER

Mailing Address 4129 CYPRESS CIRCLE

City CULLODEN State WV Zip Code 25510

FEC ID number of contributing federal political committee. C

Name of Employer SELF-EMPLOYED Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.8754

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
CHRISTOPHER SLAUGHTER

Mailing Address 4129 CYPRESS CIRCLE

City CULLODEN State WV Zip Code 25510

FEC ID number of contributing federal political committee. C

Name of Employer SELF-EMPLOYED Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 3100.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.9037

Amount of Each Receipt this Period
 500.00

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

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

1095.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LECIA SMITH

Mailing Address 3245 LAUREL DR

City State Zip Code
BLACKSBURG VA 24060

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

Name of Employer Occupation
NONE HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7800.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.9010

Amount of Each Receipt this Period
2600.00

REATTRIBUTION REQUESTED

B. Full Name (Last, First, Middle Initial)
BRADLEY SMITH

Mailing Address 338 COBURN AVE.

City State Zip Code
MORGANTOWN WV 26501

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

Name of Employer Occupation
STEPTOE & JOHNSON ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 02 / 2014

Transaction ID : SA11AI.8719

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
ELIZABETH G. SMITH

Mailing Address 2727 BRANDONVILLE PIKE

City State Zip Code
TERRA ALTA WV 26764

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11AI.8856

Amount of Each Receipt this Period
2600.00

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

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

5450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SCOTT SMITH

Mailing Address **2727 BRANDONVILLE PIKE**

City **TERRA ALTA** State **WV** Zip Code **26764**

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

Name of Employer
INFORMATION REQUESTED

Occupation
INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 15 / 2014

Transaction ID : SA11AI.8857

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
CYNTHIA SOWDER

Mailing Address **397 AMES HGTS RD**

City **LANSING** State **WV** Zip Code **25862**

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

Name of Employer
INFORMATION REQUESTED

Occupation
INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 25 / 2014

Transaction ID : SA11AI.8608

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
JAMES A. SPADE

Mailing Address **596 SHAWVER BRIDGE RD.**

City **HICO** State **WV** Zip Code **25854**

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

Name of Employer
INFORMATION REQUESTED

Occupation
INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11AI.9029

Amount of Each Receipt this Period
250.00

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

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

3350.00

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

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

FOR LINE NUMBER: PAGE 90 OF 174
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
FRED ST JOHN

Mailing Address **234 SPARROW STREET**

City **PRINCETON** State **WV** Zip Code **24740**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11AI.8963

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
ARTHUR STANDISH

Mailing Address **186 SCOTTSCLAIRE LN**

City **CHARLESTON** State **WV** Zip Code **25304**

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

Name of Employer **STEPTOE AND JOHNSON PLLC** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11AI.9036

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
ROBERT M STEPTOE JR.

Mailing Address **400 WHITEOAKS BLVD.**

City **BRIDGEPORT** State **WV** Zip Code **26330**

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

Name of Employer **STEPTOE AND JOHNSON** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11AI.8819

Amount of Each Receipt this Period
250.00

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

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

1250.00

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

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

FOR LINE NUMBER: PAGE 91 OF 174
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ROBERT M STEPTOE JR.

Mailing Address 400 WHITEOAKS BLVD.

City State Zip Code
BRIDGEPORT WV 26330

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

Name of Employer Occupation
STEPTOE AND JOHNSON ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1750.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 30 2014

Transaction ID : SA11AI.9035

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
PHILLIP STEVENS

Mailing Address 535 12TH AVE

City State Zip Code
HUNTINGTON WV 25701

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

Name of Employer Occupation
TRI STATE OTOLARYNGOLOGY PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 11 2014

Transaction ID : SA11AI.8784

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
JILL B STEVENS

Mailing Address 701 SOUTH BLVD.

City State Zip Code
HUNTINGTON WV 25701

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 22 2014

Transaction ID : SA11AI.8901

Amount of Each Receipt this Period
500.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
RONALD G. STOVASH

Mailing Address 5820 WINDSOR DR

City MCDONALD State PA Zip Code 15057

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

Name of Employer MURRAY Occupation MAINT. PLANNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11AI.8858

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
ANGELA SWEARINGEN

Mailing Address 3788 BLUE SULPHUR RD

City ONA State WV Zip Code 25545

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

Name of Employer ST. MARY'S Occupation CFO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.8758

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
STANLEY TAO

Mailing Address 302 TURNBERRY POINTE

City BARBOURSVILLE State WV Zip Code 25504

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

Name of Employer SCOTT ORTHOPEDIC CENTER Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.8764

Amount of Each Receipt this Period
500.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 93 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
E. LEE TAYLOR M.D.

Mailing Address 103 CAMBRIDGE

City HUNTINGTON State WV Zip Code 25705

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

Name of Employer ST. MARY'S MEDICAL CENTER Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.8750

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
W L THORNHILL

Mailing Address PO BOX 340

City PECKSMILL State WV Zip Code 25547

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 25 / 2014

Transaction ID : SA11AI.8628

Amount of Each Receipt this Period
 2000.00

C. Full Name (Last, First, Middle Initial)
DR. JAMES P TIERNEY

Mailing Address 4504 KANAWHA AVE SE

City CHARLESTON State WV Zip Code 25304

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

Name of Employer CAMC PHYSICIANS GROUP Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 25 / 2014

Transaction ID : SA11AI.8624

Amount of Each Receipt this Period
 1000.00

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

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

4000.00

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

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

FOR LINE NUMBER: PAGE 94 OF 174
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
LYDIA TUDOR

Mailing Address **21 KENSINGTON LANE**

City **HUNTINGTON** State **WV** Zip Code **25705**

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

Name of Employer **TUDORS BISCUIT WORLD** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1100.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
08 / 31 / 2014

Transaction ID : SA11A1.8704

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
BRIAN ULERY

Mailing Address **2 W COVENTRY ROAD**

City **CHARLESTON** State **WV** Zip Code **25309**

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

Name of Employer **THOMAS HEALTH SYSTEM** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11A1.9004

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
JOHN A WADE JR.

Mailing Address **340 SNOWCREST LN.**

City **POINT PLEASANT** State **WV** Zip Code **25550**

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

Name of Employer **SELF EMPLOYED** Occupation **PHYSICIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 / 03 / 2014

Transaction ID : SA11A1.8728

Amount of Each Receipt this Period
1000.00

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JOHN WALDEN

Mailing Address 1501 MIDDLE RIVER DR

City State Zip Code
FT. LAUDERDALE FL 33304

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

Name of Employer Occupation
SELF EMPLOYED PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.8816

Amount of Each Receipt this Period
150.00

B. Full Name (Last, First, Middle Initial)
MICHAEL S. WALKER

Mailing Address 24 OAK RIDGE DRIVE

City State Zip Code
MORGANTOWN WV 26508

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
4100.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11AI.8866

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
MICHAEL S. WALKER

Mailing Address 24 OAK RIDGE DRIVE

City State Zip Code
MORGANTOWN WV 26508

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5100.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.9011

Amount of Each Receipt this Period
1000.00

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

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

2650.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) DAVID WALKER		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 24 / 2014
Mailing Address 1410 CONNELL RD		Transaction ID : SA11AI.8920
City CHARLESTON	State WV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) CHARLES I WALL		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 06 / 2014
Mailing Address HC 71 BOX 153		Transaction ID : SA11AI.8562
City MEADOW BLUFF	State WV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) CHARLES I WALL		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 22 / 2014
Mailing Address HC 71 BOX 153		Transaction ID : SA11AI.8894
City MEADOW BLUFF	State WV	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00	

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DAVID WALLACE

Mailing Address 11800 HARMONY CHURCH RD

City WEST FRANKFORT State IL Zip Code 62896

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

Name of Employer WALLACE ELECTRICAL SYSTEMS Occupation BUSINESS OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 04 / 2014

Transaction ID : SA11AI.7950

Amount of Each Receipt this Period
5200.00

**[MEMO ITEM]
REATTRIBUTION REQUESTED**

B. Full Name (Last, First, Middle Initial)
DAVID WALLACE

Mailing Address 11800 HARMONY CHURCH RD

City WEST FRANKFORT State IL Zip Code 62896

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

Name of Employer WALLACE ELECTRICAL SYSTEMS Occupation BUSINESS OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 01 / 2014

Transaction ID : SA11AI.8548

Amount of Each Receipt this Period
-2600.00

**[MEMO ITEM]
REATTRIBUTED TO WALLACE, REBECCA**

C. Full Name (Last, First, Middle Initial)
REBECCA WALLACE

Mailing Address 11800 HARMONY CHURCH RD

City WEST FRANKFORT State IL Zip Code 62896

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 01 / 2014

Transaction ID : SA11AI.8549

Amount of Each Receipt this Period
2600.00

**[MEMO ITEM]
REATTRIBUTED FROM WALLACE, DAVID**

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

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

0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 98 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DAVID WALSH

Mailing Address **PO BOX 11450**

City **JACKSON** State **WY** Zip Code **83002**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 29 / 2014

Transaction ID : SA11AI.8696

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
WILLIAM G WARREN

Mailing Address **2243 JORDAN VALLEY CT**

City **HENDERSON** State **NV** Zip Code **89044**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 15 / 2014

Transaction ID : SA11AI.8873

Amount of Each Receipt this Period
75.00

C. Full Name (Last, First, Middle Initial)
MELISSA S. WATKINS

Mailing Address **1009 AUTUMN AVE.**

City **MORGANTOWN** State **WV** Zip Code **26508**

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

Name of Employer **STEPTOE AND JOHNSON** Occupation **ATTORNEY**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11AI.9033

Amount of Each Receipt this Period
500.00

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

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

1575.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CHARLES WEILER

Mailing Address 2840 N. STAUNTON ROAD

City HUNTINGTON State WV Zip Code 25702

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.8821

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
CHARLES WEILER

Mailing Address 2840 N. STAUNTON ROAD

City HUNTINGTON State WV Zip Code 25702

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.8823

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
JOHN WEILER

Mailing Address 78 OAKWOOD RD.

City HUNTINGTON State WV Zip Code 25701

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 09 / 2014

Transaction ID : SA11AI.8744

Amount of Each Receipt this Period
500.00

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

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

700.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
MARK WEILER

Mailing Address 914 PINE RD.

City Charleston State WV Zip Code 25314

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

Name of Employer WV CHAMBER Occupation SPECIAL PROJECTS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11AI.9020

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
ROB WERNER

Mailing Address PO BOX 3906

City Big Bear Lake State CA Zip Code 92315

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11AI.8899

Amount of Each Receipt this Period
 225.00

C. Full Name (Last, First, Middle Initial)
ROBERT WHEELER

Mailing Address PO BOX 286

City Lewisburg State WV Zip Code 24904

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

Name of Employer GREENBRIER PHYSICIAN Occupation PHYSICIAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 29 / 2014

Transaction ID : SA11AI.8996

Amount of Each Receipt this Period
 1000.00

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

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

1475.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
SHIRLEY L WHITAKER

Mailing Address 35 FAIRVIEW HEIGHTS

City State Zip Code
PARKERSBURG WV 26101

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

Name of Employer Occupation
SELF-EMPLOYED OFFICE MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 25 / 2014

Transaction ID : SA11AI.8622

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
JANIS P WHITE M.D.

Mailing Address 512 HILLCREST CIR.

City State Zip Code
BRIDGEPORT WV 26330

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

Name of Employer Occupation
STEPTOE & JOHNSON, PLLC ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.8808

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
KELLI A WHITFIELD

Mailing Address 1315 LAKE DR.

City State Zip Code
DANIELS WV 25832

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.8779

Amount of Each Receipt this Period
1500.00

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

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

2750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
STEPHEN B WHITFIELD

Mailing Address 1315 LAKE DR.

City DANIELS State WV Zip Code 25832

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.8780

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
BARAT B WILCOX

Mailing Address 4 WOODRIDGE CT

City HUNTINGTON State WV Zip Code 25705

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 25 / 2014

Transaction ID : SA11AI.8613

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
BARAT B WILCOX

Mailing Address 4 WOODRIDGE CT

City HUNTINGTON State WV Zip Code 25705

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.8762

Amount of Each Receipt this Period
500.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HENRY K WILLARD

Mailing Address PO BOX 3269

City State Zip Code
SHEPERDSTOWN WV 25443

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

Name of Employer Occupation
NONE RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 25 / 2014

Transaction ID : SA11AI.8637

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
JILL WOISNET

Mailing Address 150 LAMPLIGHTER DR.

City State Zip Code
MORGANTOWN WV 26508

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11AI.8870

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
SUSAN L WRIGHT

Mailing Address 6312 HIGHLAND DR.

City State Zip Code
HUNTINGTON WV 25705

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11AI.8796

Amount of Each Receipt this Period
250.00

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. TODD M YOUNG		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2014	
Mailing Address 109 RAIN TREE DRIVE		Transaction ID : SA11AI.8877	
City HURRICANE	State WV	Zip Code 25526	Amount of Each Receipt this Period _____ 50.00
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer TRUCKS, INC.	Occupation SALES		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 360.00		

Full Name (Last, First, Middle Initial) B. RICHARD M. YURKO JR.		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address 55 SMALL ESTATES DR.		Transaction ID : SA11AI.9032	
City BRIDGEPORT	State WV	Zip Code 26330	Amount of Each Receipt this Period _____ 250.00
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer STEPTOE AND JOHNSON	Occupation ATTORNEY		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

Full Name (Last, First, Middle Initial) C. LARRY A. ZINK		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2014	
Mailing Address 3711 NW WHIPPLE AVE		Transaction ID : SA11AI.9019	
City CANTON	State OH	Zip Code 44718	Amount of Each Receipt this Period _____ 150.00
FEC ID number of contributing federal political committee.		_____ C _____	
Name of Employer ZINK LAW	Occupation ATTORNEY		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 300.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 450.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 105 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) WILLIAM ZITTER		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 21 / 2014
Mailing Address 1637 MCCOY RD		Transaction ID : SA11AI.8442
City HUNTINGTON	State WV	Zip Code 25701
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1250.00	

Full Name (Last, First, Middle Initial) WILLIAM ZITTER		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 11 / 2014
Mailing Address 1637 MCCOY RD		Transaction ID : SA11AI.8748
City HUNTINGTON	State WV	Zip Code 25701
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1750.00	

Full Name (Last, First, Middle Initial) WILLIAM ZITTER		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 24 / 2014
Mailing Address 1637 MCCOY RD		Transaction ID : SA11AI.8935
City HUNTINGTON	State WV	Zip Code 25701
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2750.00	

SUBTOTAL of Receipts This Page (optional).....	1750.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 174
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JOHN T. ZITTER

Mailing Address 530 FOSTER RD

City State Zip Code
HUNTINGTON WV 25701

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

Name of Employer Occupation
STERLING SUPPLY COMPANY PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 21 / 2014

Transaction ID : SA11AI.8443

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
JOHN T. ZITTER

Mailing Address 530 FOSTER RD

City State Zip Code
HUNTINGTON WV 25701

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

Name of Employer Occupation
STERLING SUPPLY COMPANY PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 25 / 2014

Transaction ID : SA11AI.8626

Amount of Each Receipt this Period
1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1250.00

195505.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 107 OF 174	
	<input type="checkbox"/> 11a 12	<input checked="" type="checkbox"/> 11b 13a	<input 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)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BOONE REPUBLICAN EXECUTIVE COMMITTEE

Mailing Address 114 CENTER ST

City MADISON State WV Zip Code 25130

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
800.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 25 / 2014

Transaction ID : SA11B.8621

Amount of Each Receipt this Period
800.00

B. Full Name (Last, First, Middle Initial)
RITCHIE CO. REPUBLICAN COMMITTEE

Mailing Address 225 SCHOOL ST.

City HARRISVILLE State WV Zip Code 26362

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 06 / 2014

Transaction ID : SA11B.8570

Amount of Each Receipt this Period
200.00

PERMISSIBLE FUNDS

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1000.00

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 174
	<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)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AKSM UROLOGY POLITICAL ACTION COMMITTEE 'AKSM UROLOGY PAC'

Mailing Address 100 WEST THIRD AVE SUITE 350

City Columbus State OH Zip Code 43201

FEC ID number of contributing federal political committee. **C** C00489419

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11C.8838

Amount of Each Receipt this Period
 5000.00

B. Full Name (Last, First, Middle Initial)
ALTICOR POLITICAL ACTION COMMITTEE ALTIPAC

Mailing Address 7575 E FULTON ROAD
ATTN: SCOTT SMOES 56-3S

City ADA State MI Zip Code 49355

FEC ID number of contributing federal political committee. **C** C00034884

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 25 / 2014

Transaction ID : SA11C.8605

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
AMERICAN PRINCIPLES

Mailing Address 20533 BISCAYNE BLVD
#250

City MIAMI State FL Zip Code 33180

FEC ID number of contributing federal political committee. **C** C00492579

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 1250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.9075

Amount of Each Receipt this Period
 750.00

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

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

6750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 174
	<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)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN SOCIETY OF ANESTHESIOLOGISTS PAC

Mailing Address 520 N NORTHWEST HWY

City State Zip Code
PARK RIDGE IL 60068

FEC ID number of contributing federal political committee. **C C00255752**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11C.8892

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
AMPAC

Mailing Address 25 MASSACHUSETTS AVE NW, SUITE 600

City State Zip Code
WASHINGTON DC 20001

FEC ID number of contributing federal political committee. **C C00000422**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 25 / 2014

Transaction ID : SA11C.8614

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
ANDY BARR FOR CONGRESS, INC.

Mailing Address PO BOX 2059

City State Zip Code
LEXINGTON KY 40588

FEC ID number of contributing federal political committee. **C C00467571**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : SA11C.8926

Amount of Each Receipt this Period
1000.00

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

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

11000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 110 OF 174	
	<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)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ASSOCIATED BUILDERS AND CONTRACTORS POLITICAL ACTION COMMITTEE (ABC PAC)

Mailing Address 440 FIRST STREET NW
SUITE 200

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00010421

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 15 / 2014

Transaction ID : SA11C.8841

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
AUTOMOTIVE FREE INTERNATIONAL TRADE PAC

Mailing Address 1625 PRINCE STREET
SUITE 225

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C** C00250399

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 24 / 2014

Transaction ID : SA11C.8925

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
BADLANDS PAC

Mailing Address PO BOX 26141

City ALEXANDRIA State VA Zip Code 22313

FEC ID number of contributing federal political committee. **C** C00543207

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11C.8985

Amount of Each Receipt this Period
1000.00

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

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

11000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 111 OF 174
	<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)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
BLESSINGS OF LIBERTY PAC (BOLPAC)

Mailing Address 8001 IRVINE CENTER DR. #400

City State Zip Code
IRVINE CA 92618

FEC ID number of contributing federal political committee. **C** C00564658

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11C.9067

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
CONSERVATIVE ROUNDTABLE

Mailing Address PO BOX 97275

City State Zip Code
RALEIGH NC 27624

FEC ID number of contributing federal political committee. **C** C00549725

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 22 / 2014

Transaction ID : SA11C.8893

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
DEALERS ELECTION ACTION COMMITTEE OF THE NATIONAL AUTOMOTIVE DEALERS ASSOCIATION

Mailing Address 8400 WESTPARK DRIVE

City State Zip Code
MCLEAN VA 22102

FEC ID number of contributing federal political committee. **C** C00040998

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 25 / 2014

Transaction ID : SA11C.8627

Amount of Each Receipt this Period
5000.00

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

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

8000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 174
	<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)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
DEVON ENERGY CORPORATION POLITICAL ACTION COMMITTEE (DEC PAC)

Mailing Address **333 WEST SHERIDAN**

City State Zip Code
OKLAHOMA CITY OK 73102

FEC ID number of contributing federal political committee. **C C00354753**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 21 2014

Transaction ID : SA11C.8449

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
EVOC REGULATORY SERVICES, INC. POLITICAL ACTION COMMITTEE

Mailing Address **1001 FANNIN ST
SUITE 800**

City State Zip Code
HOUSTON TX 77002

FEC ID number of contributing federal political committee. **C C00513671**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **5000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 11 2014

Transaction ID : SA11C.8813

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
EXPRESS SCRIPTS INC. POLITICAL FUND (A/K/A EXPRESS SCRIPTS PAC)

Mailing Address **ONE EXPRESS WAY**

City State Zip Code
ST. LOUIS MO 63121

FEC ID number of contributing federal political committee. **C C00365072**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)
 Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
09 30 2014

Transaction ID : SA11C.8984

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 174
	<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)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
FIFTH THIRD BANCORP POLITICAL ACTION COMMITTEE

Mailing Address 550 E. WALNUT ST

City State Zip Code
COLUMBUS OH 43215

FEC ID number of contributing federal political committee. **C** C00290502

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 11 / 2014

Transaction ID : SA11C.8789

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
FREEDOM AND SECURITY PAC

Mailing Address 228 S. WASHINGTON ST., STE. 115

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing federal political committee. **C** C00437061

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.9071

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
FRIENDS OF SUSAN BROOKS

Mailing Address 9425 N MERIDIAN STREET
237

City State Zip Code
INDIANAPOLIS IN 46260

FEC ID number of contributing federal political committee. **C** C00500207

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11C.8861

Amount of Each Receipt this Period
1000.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 174
	<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)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
GOOD FUND, THE

Mailing Address **PO BOX 3404**

City **ALEXANDRIA** State **VA** Zip Code **22302**

FEC ID number of contributing federal political committee. **C C00409185**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11C.8986

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
HALLIBURTON COMPANY PAC

Mailing Address **801 17TH ST NW 10TH FLOOR**

City **WASHINGTON** State **DC** Zip Code **20006**

FEC ID number of contributing federal political committee. **C C00035691**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 03 / 2014

Transaction ID : SA11C.8721

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
HEARTDOCPAC

Mailing Address **PO BOX 628**

City **EVANSVILLE** State **IN** Zip Code **47704**

FEC ID number of contributing federal political committee. **C C00523381**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
08 / 06 / 2014

Transaction ID : SA11C.8559

Amount of Each Receipt this Period
1000.00

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

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

3500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 174
	<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)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HEARTLAND PAC

Mailing Address 5580 SPRING GROVE DRIVE

City SOLON State OH Zip Code 44139

FEC ID number of contributing federal political committee. **C** C00131557

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.9064

Amount of Each Receipt this Period
 1000.00

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

Mailing Address PO BOX 370672

City LAS VEGAS State NV Zip Code 89137

FEC ID number of contributing federal political committee. **C** C00471607

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.9061

Amount of Each Receipt this Period
 5000.00

C. Full Name (Last, First, Middle Initial)
HUCK PAC

Mailing Address PO BOX 2008

City LITTLE ROCK State AR Zip Code 72203

FEC ID number of contributing federal political committee. **C** C00448373

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.8981

Amount of Each Receipt this Period
 2000.00

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

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

8000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 174
	<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)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
IMPACT COMMITTEE

Mailing Address 100 LUNA PARK DRIVE
STE. 156

City State Zip Code
ALEXANDRIA VA 22305

FEC ID number of contributing federal political committee. **C** C00525238

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 22 / 2014

Transaction ID : SA11C.8908

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
IPAA WILDCATTERS FUND

Mailing Address 1201 15TH STREET, NW
SUITE 300

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00246306

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11C.8814

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
J H FLETCHER AND CO POLITICAL ACTION COMMITTEE JH FLETCHER PAC

Mailing Address 402 HIGH ST

City State Zip Code
HUNTINGTON WV 25705

FEC ID number of contributing federal political committee. **C** C00496257

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 11 / 2014

Transaction ID : SA11C.8772

Amount of Each Receipt this Period
2500.00

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

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

4500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 117 OF 174
	<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)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KOCH INDUSTRIES INC POLITICAL ACTION COMMITTEE (KOCHPAC)

Mailing Address 600 14TH STREET, NW
SUITE 800

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C C00236489**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 22 / 2014

Transaction ID : SA11C.8896

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
NATIONAL EMERGENCY MEDICINE POLITICAL ACTION COMMITTEE

Mailing Address 1125 EXECUTIVE CIRCLE

City IRVING State TX Zip Code 75038

FEC ID number of contributing federal political committee. **C C00140061**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.9068

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
NEXT CENTURY FUND

Mailing Address 116 S ROYAL STREET

City ALEXANDRIA State VA Zip Code 22314

FEC ID number of contributing federal political committee. **C C00343947**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 06 / 2014

Transaction ID : SA11C.8561

Amount of Each Receipt this Period
2500.00

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

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

10000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 118 OF 174
	<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)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NFIB THE VOICE OF FREE ENTERPRISE INC.

Mailing Address 1201 F STREET
SUITE 200

City WASHINGTON State DC Zip Code 20004

FEC ID number of contributing federal political committee. **C** C90013509

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 25 / 2014

Transaction ID : SA11C.8610

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
OB-GYN PAC

Mailing Address 409 12TH ST. SW

City WASHINGTON State DC Zip Code 20024

FEC ID number of contributing federal political committee. **C** C00364158

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
7500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 03 / 2014

Transaction ID : SA11C.8730

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
PANCAKE POLITICAL ACTION COMMITTEE

Mailing Address 1340 HAMLET AVENUE

City CLEARWATER State FL Zip Code 33756

FEC ID number of contributing federal political committee. **C** C00482463

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : SA11C.8923

Amount of Each Receipt this Period
1000.00

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

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

11000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 174
	<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)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PHYSICIAN INSURERS ASSOCIATION OF AMERICA POLITICAL ACTION COMMITTEE (PIAAPAC)

Mailing Address 2275 RESEARCH BLVD
SUITE 250

City State Zip Code
ROCKVILLE MD 20850

FEC ID number of contributing federal political committee. **C** C00319319

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.8965

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
POLITICAL ACTION COMMITTEE OF THE AAOS

Mailing Address 317 MASSACHUSETTS AVE. NE

City State Zip Code
WASHINGTON DC 20002

FEC ID number of contributing federal political committee. **C** C00343137

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11C.8839

Amount of Each Receipt this Period
5000.00

C. Full Name (Last, First, Middle Initial)
PRICE FOR CONGRESS

Mailing Address P.O. BOX 425

City State Zip Code
ROSWELL GA 30077

FEC ID number of contributing federal political committee. **C** C00386755

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.8962

Amount of Each Receipt this Period
2000.00

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

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

8000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 174
	<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)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial)
PROPERTY CASUALTY INSURERS ASSOCIATION OF AMERICA POLITICAL ACTION COMMITTEE (PCIPAC)

A. Mailing Address 8700 WEST BRYN MAWR SUITE 1200S
City CHICAGO State IL Zip Code 60631

Date of Receipt
M M / D D / Y Y Y Y
08 / 06 / 2014

Transaction ID : SA11C.8575

FEC ID number of contributing federal political committee. **C** C00066472

Amount of Each Receipt this Period
1000.00

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Full Name (Last, First, Middle Initial)
PROSPERITY ACTION INC.

B. Mailing Address 1006 PENDLETON STREET
City ALEXANDRIA State VA Zip Code 22314

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2014

Transaction ID : SA11C.8930

FEC ID number of contributing federal political committee. **C** C00377689

Amount of Each Receipt this Period
5000.00

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10000.00

Full Name (Last, First, Middle Initial)
REPUBLICAN JEWISH COALITION-POLITICAL ACTION COMMITTEE (RJC-PAC)

C. Mailing Address 50 F STREET NW SUITE 100
City WASHINGTON State DC Zip Code 20001

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2014

Transaction ID : SA11C.8927

FEC ID number of contributing federal political committee. **C** C00345132

Amount of Each Receipt this Period
5000.00

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

SUBTOTAL of Receipts This Page (optional).....	11000.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 121 OF 174
	<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)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ROTHFUS FOR CONGRESS

Mailing Address **PO BOX 435**

City **SEWICKLEY** State **PA** Zip Code **15143**

FEC ID number of contributing federal political committee. **C C00497115**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA11C.9066

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
SECURE ENERGY FOR AMERICA POLITICAL ACTION COMMITTEE (SEA PAC)

Mailing Address **801 PENNSYLVANIA AVENUE, NW
SUITE 612**

City **WASHINGTON** State **DC** Zip Code **20004**

FEC ID number of contributing federal political committee. **C C00466458**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
09 / 15 / 2014

Transaction ID : SA11C.8840

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
STAND TALL AMERICA PAC (STAPAC)

Mailing Address **PO BOX 2382**

City **AMARILLO** State **TX** Zip Code **79105**

FEC ID number of contributing federal political committee. **C C00404418**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y
08 / 25 / 2014

Transaction ID : SA11C.8636

Amount of Each Receipt this Period
2000.00

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

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

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 122 OF 174
	<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)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
TACO POLITICAL ACTION COMMITTEE

Mailing Address 6405 METCALF AVENUE, SUITE 503

City State Zip Code
SHAWNEE MISSION KS 66202

FEC ID number of contributing federal political committee. **C** C00330118

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 24 / 2014

Transaction ID : SA11C.8929

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
UPPER HAND FUND

Mailing Address PO BOX 2485

City State Zip Code
SPRINGFIELD VA 22152

FEC ID number of contributing federal political committee. **C** C00503151

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.9073

Amount of Each Receipt this Period
 1000.00

C. Full Name (Last, First, Middle Initial)
VOTETIPTON.COM

Mailing Address PO BOX 1582

City State Zip Code
CORTEZ CO 81321

FEC ID number of contributing federal political committee. **C** C00470757

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA11C.8983

Amount of Each Receipt this Period
 2000.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 123 OF 174
	<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)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WV FARM PAC

Mailing Address 1 RED ROCK RD.

City BUCKHANNON State WV Zip Code 26201

FEC ID number of contributing federal political committee. **C** C00380956

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 25 / 2014

Transaction ID : SA11C.8609

Amount of Each Receipt this Period
 1000.00

B. Full Name (Last, First, Middle Initial)
WV FARM PAC

Mailing Address 1 RED ROCK RD.

City BUCKHANNON State WV Zip Code 26201

FEC ID number of contributing federal political committee. **C** C00380956

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 15 / 2014

Transaction ID : SA11C.8837

Amount of Each Receipt this Period
 1000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

2000.00

116250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 174
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
WEST VIRGINIANS FOR A BRIGHTER FUTURE

Mailing Address 500 CUMMINGS CENTER STE. 4400

City State Zip Code
BEVERLY MA 01915

FEC ID number of contributing federal political committee. **C** C00566844

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 22 / 2014

Transaction ID : SA12.8919

Amount of Each Receipt this Period
2000.00
REPAYMENT FOR ADVANCE OF JFC FUNDS

B. Full Name (Last, First, Middle Initial)
WEST VIRGINIANS FOR A BRIGHTER FUTURE

Mailing Address 500 CUMMINGS CENTER STE. 4400

City State Zip Code
BEVERLY MA 01915

FEC ID number of contributing federal political committee. **C** C00566844

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
10020.58

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA12.9063

Amount of Each Receipt this Period
8020.58
TRANSFER IN AFFILIATED

C. Full Name (Last, First, Middle Initial)
STEPHANIE ABRAMOWITZ

Mailing Address 12 STONY POINT RD

City State Zip Code
CHARLESTON WV 25314

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
433.33

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA12.9083

Amount of Each Receipt this Period
333.33
[MEMO ITEM]

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

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

10020.58

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 125 OF 174
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
EDDY BIEHL

Mailing Address 1101 BLENNERHASSETT AVENUE

City State Zip Code
BELPRE OH 45714

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

Name of Employer Occupation
STONEBRIDGE OPERATING CO, LLC GENERAL MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1666.67

Date of Receipt
 M M / D D / Y Y Y Y
 09 30 2014

Transaction ID : SA12.9084

Amount of Each Receipt this Period
1666.67

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
JAMES L BROGAN

Mailing Address PO BOX 898

City State Zip Code
ATHENS WV 24712

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

Name of Employer Occupation
MIS, INC. CORPORATE PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 30 2014

Transaction ID : SA12.9085

Amount of Each Receipt this Period
500.00

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
MARK W BROWNING

Mailing Address 789 ECHO ROAD

City State Zip Code
CHARLESTON WV 25303

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

Name of Employer Occupation
HENDRICKSON AND LONG ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
83.33

Date of Receipt
 M M / D D / Y Y Y Y
 09 30 2014

Transaction ID : SA12.9086

Amount of Each Receipt this Period
83.33

[MEMO ITEM]

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

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

0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 126 OF 174
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
R WADE CASKEY

Mailing Address 1569 NOTTINGHAM ROAD

City Charleston State WV Zip Code 25314

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 333.33

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA12.9087

Amount of Each Receipt this Period
 _____ 333.33

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
LOUISE F COOK

Mailing Address 925 LICOLN DRIVE

City SO. CHARLESTON State WV Zip Code 25309

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 66.67

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA12.9088

Amount of Each Receipt this Period
 _____ 66.67

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
TOM S CUSHMAN

Mailing Address 120 DANIEL STREET

City BECKLEY State WV Zip Code 25801

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

Name of Employer PHILLIPS MACHINE Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 333.33

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA12.9089

Amount of Each Receipt this Period
 _____ 333.33

[MEMO ITEM]

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

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

_____ 0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 127 OF 174
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
J FRANK DEEM

Mailing Address 5518 2ND AVENUE

City State Zip Code
VIENNA WV 26105

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
166.67

Date of Receipt
 M M / D D / Y Y Y Y
 09 30 2014

Transaction ID : SA12.9090

Amount of Each Receipt this Period
166.67

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
DIANE S DOTY

Mailing Address 12 CHATWOOD ROAD

City State Zip Code
CHARLESTON WV 25304

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
333.33

Date of Receipt
 M M / D D / Y Y Y Y
 09 30 2014

Transaction ID : SA12.9091

Amount of Each Receipt this Period
333.33

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
BRETT E ECKLEY

Mailing Address 101 HAWKSBURY TRCE

City State Zip Code
BECKLEY WV 25801

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
83.33

Date of Receipt
 M M / D D / Y Y Y Y
 09 30 2014

Transaction ID : SA12.9092

Amount of Each Receipt this Period
83.33

[MEMO ITEM]

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

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

0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 128 OF 174
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
NANCY FOSTER

Mailing Address **PO BOX 467**

City **SCOTT DEPOT** State **WV** Zip Code **25560**

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

Name of Employer **HOME INSTEAD** Occupation **OWNER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2666.67

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA12.9093

Amount of Each Receipt this Period
1666.67

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
CHARLES R HAGEBOECK

Mailing Address **PO BOX 7520**

City **CHARLESTON** State **WV** Zip Code **26356**

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

Name of Employer **CITY HOLDING** Occupation **PRESIDENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA12.9094

Amount of Each Receipt this Period
1500.00

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
MICHAEL R HASTINGS

Mailing Address **359 FAR COUNTRY DR**

City **DANIELS** State **WV** Zip Code **25832**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
233.33

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA12.9095

Amount of Each Receipt this Period
33.33

[MEMO ITEM]

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

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

0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 129 OF 174
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CLAUDE R HILL

Mailing Address 233 HAWKS CHASE LANE

City DANIELS State WV Zip Code 25832

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

Name of Employer PHILLIPS MACHINE Occupation CFO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 333.33

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA12.9096

Amount of Each Receipt this Period
 _____ 333.33

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
THOMAS W JARRETT

Mailing Address 1333 LAKE DRIVE

City DANIELS State WV Zip Code 25832

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

Name of Employer ENTREPRENEUR Occupation ENTREPRENEUR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 333.33

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA12.9097

Amount of Each Receipt this Period
 _____ 333.33

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
CHARLES T JONES

Mailing Address #2 PORT AMHERST DRIVE

City CHARLESTON State WV Zip Code 25306

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 333.33

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA12.9098

Amount of Each Receipt this Period
 _____ 333.33

[MEMO ITEM]

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

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

_____ 0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 130 OF 174
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
ANDREW B JORDON

Mailing Address **ONE NORWOOD ROAD**

City **CHARLESTON** State **WV** Zip Code **25314**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
333.33

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA12.9099

Amount of Each Receipt this Period
333.33

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
IRENE MELIS

Mailing Address **1108 SKYTOP CIRCLE**

City **CHARLESTON** State **WV** Zip Code **25314**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
666.67

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA12.9100

Amount of Each Receipt this Period
666.67

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
BRENDA H MILLER

Mailing Address **176 DOEWOOD DRIVE**

City **PRINCETON** State **WV** Zip Code **24740**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
91.67

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA12.9101

Amount of Each Receipt this Period
66.67

[MEMO ITEM]

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

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

0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 131 OF 174
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JEANNIE L MINARDI

Mailing Address **8 QUARRY RIDGE ROAD**

City **CHARLESTON** State **WV** Zip Code **25304**

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

Name of Employer **SELF** Occupation **PHYSICIAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1666.67

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA12.9102

Amount of Each Receipt this Period
1666.67

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
JANICE L MORGAN

Mailing Address **311 W AVIS AVENUE**

City **MAN** State **WV** Zip Code **25635**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
16.67

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA12.9103

Amount of Each Receipt this Period
16.67

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
JEFFREY K. MULLINS

Mailing Address **1204 LAKE DR.**

City **DANIELS** State **WV** Zip Code **25832**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1166.67

Date of Receipt
 M M / D D / Y Y Y Y
09 / 30 / 2014

Transaction ID : SA12.9104

Amount of Each Receipt this Period
166.67

[MEMO ITEM]

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

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

0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 132 OF 174
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
JOSEPH M ROMAGNOLI

Mailing Address 14 FOX CHASE ROAD

City Charleston State WV Zip Code 25304

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 333.33

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA12.9105

Amount of Each Receipt this Period
 _____ 333.33

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
DOUGLAS SAYRE

Mailing Address 138 JORDAN LN

City DANIELS State WV Zip Code 25832

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

Name of Employer ROCK & COAL CONSTRUCTION, INC Occupation PRESIDENT/OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 2083.33

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA12.9106

Amount of Each Receipt this Period
 _____ 333.33

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
ANDREW K TEETER

Mailing Address 4307 KANAWHA AVENUE SE

City CHARLESTON State WV Zip Code 25304

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 333.33

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA12.9107

Amount of Each Receipt this Period
 _____ 333.33

[MEMO ITEM]

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

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

_____ 0.00

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

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

FOR LINE NUMBER: PAGE 133 OF 174
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input checked="" 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)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
KATHERINE F WELLFORD

Mailing Address 1615 RIDGEVIEW RD

City Charleston State WV Zip Code 25314

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1383.33

Date of Receipt
M M / D D / Y Y Y Y Y Y
09 / 30 / 2014

Transaction ID : SA12.9108

Amount of Each Receipt this Period
333.33

[MEMO ITEM]

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

0.00

10020.58

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 134 OF 174
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input checked="" type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
FIFTH THIRD BANK

Mailing Address 517 9TH STREET

City HUNTINGTON State WV Zip Code 25701

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
244.80

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2014

Transaction ID : SA15.8674

Amount of Each Receipt this Period
64.48

INTEREST

B. Full Name (Last, First, Middle Initial)
FIFTH THIRD BANK

Mailing Address 517 9TH STREET

City HUNTINGTON State WV Zip Code 25701

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
304.28

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 30 / 2014

Transaction ID : SA15.9145

Amount of Each Receipt this Period
59.48

INTEREST

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

123.94

123.94

**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 135 OF 174	
	<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)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MICHAEL CHIRICO		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 32 WOODLAND DRIVE		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB17.8495
City HUNTINGTON State WV Zip Code 25705	Purpose of Disbursement STRATEGY CONSULTING Candidate Name Category/Type 001	
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) B. MICHAEL CHIRICO		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014
Mailing Address 32 WOODLAND DRIVE		Amount of Each Disbursement this Period 929.36 Transaction ID : SB17.8658
City HUNTINGTON State WV Zip Code 25705	Purpose of Disbursement MILEAGE Candidate Name Category/Type 001	
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. COMCAST		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 1701 JOHN F KENNEDY BLVD		Amount of Each Disbursement this Period 503.33 Transaction ID : SB17.8516
City PHILADELPHIA State PA Zip Code 19103	Purpose of Disbursement INTERNET Candidate Name Category/Type 001	
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).....	3432.69
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 136 OF 174	
	<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)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. COMCAST		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address 1701 JOHN F KENNEDY BLVD		Amount of Each Disbursement this Period 232.39 Transaction ID : SB17.8597
City PHILADELPHIA State PA Zip Code 19103	Purpose of Disbursement INTERNET 001 Category/Type	
Candidate Name	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) B. COMCAST		Date of Disbursement M M / D D / Y Y Y Y 09 / 16 / 2014
Mailing Address 1701 JOHN F KENNEDY BLVD		Amount of Each Disbursement this Period 332.34 Transaction ID : SB17.9127
City PHILADELPHIA State PA Zip Code 19103	Purpose of Disbursement INTERNET 001 Category/Type	
Candidate Name	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. DMM MEDIA		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 3299 K ST NW #200		Amount of Each Disbursement this Period 12000.00 Transaction ID : SB17.8491
City WASHINGTON State DC Zip Code 20007	Purpose of Disbursement MEDIA BUY 001 Category/Type	
Candidate Name	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).....	12564.73
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 137 OF 174			
	<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)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. DMM MEDIA		Date of Disbursement M M / D D / Y Y Y Y 09 / 26 / 2014
Mailing Address 3299 K ST NW #200		Amount of Each Disbursement this Period 127852.01 Transaction ID : SB17.8940
City WASHINGTON	State DC	
Zip Code 20007	Purpose of Disbursement MEDIA BUY	Category/ Type 001
Candidate Name	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) B. ELECTEKUSA		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2014
Mailing Address PO BOX 23715		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.8436
City CHAGRIN FALLS	State OH	
Zip Code 44023	Purpose of Disbursement COMPLIANCE SOFTWARE	Category/ Type 001
Candidate Name	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. ELECTEKUSA		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2014
Mailing Address PO BOX 23715		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.9114
City CHAGRIN FALLS	State OH	
Zip Code 44023	Purpose of Disbursement SOFTWARE	Category/ Type 001
Candidate Name	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).....	130852.01
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 138 OF 174			
	<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)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ELECTEKUSA		Date of Disbursement M M / D D / Y Y Y Y 08 / 29 / 2014
Mailing Address PO BOX 23715		Amount of Each Disbursement this Period 750.00 Transaction ID : SB17.8657
City CHAGRIN FALLS	State OH	
Zip Code 44023	Purpose of Disbursement SOFTWARE	Category/ Type 001
Candidate Name	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) B. ELECTEKUSA		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address PO BOX 23715		Amount of Each Disbursement this Period 750.00 Transaction ID : SB17.8663
City CHAGRIN FALLS	State OH	
Zip Code 44023	Purpose of Disbursement SOFTWARE	Category/ Type 001
Candidate Name	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. EXXON MOBIL		Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 1400 BRIDGE RD		Amount of Each Disbursement this Period 58.39 Transaction ID : SB17.8534
City CHARLESTON	State WV	
Zip Code 25314	Purpose of Disbursement TRAVEL EXPENSE	Category/ Type 001
Candidate Name	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).....	1558.39
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 139 OF 174			
	<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)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. EXXON MOBIL		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address 1400 BRIDGE RD		Amount of Each Disbursement this Period 57.67 Transaction ID : SB17.8533
City CHARLESTON State WV Zip Code 25314	Purpose of Disbursement TRAVEL EXPENSE 001 Category/Type	
Candidate Name	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) B. EXXON MOBIL		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address 1400 BRIDGE RD		Amount of Each Disbursement this Period 53.49 Transaction ID : SB17.8535
City CHARLESTON State WV Zip Code 25314	Purpose of Disbursement TRAVEL EXPENSE 001 Category/Type	
Candidate Name	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. FIFTH THIRD BANK		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 517 9TH STREET		Amount of Each Disbursement this Period 241.91 Transaction ID : SB17.8490
City HUNTINGTON State WV Zip Code 25701	Purpose of Disbursement BANK FEES 001 Category/Type	
Candidate Name	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).....	353.07
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 140 OF 174	
	<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)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FIFTH THIRD BANK		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014
Mailing Address 517 9TH STREET		Amount of Each Disbursement this Period 120.00 Transaction ID : SB17.8747
City HUNTINGTON	State WV	
Zip Code 25701	Purpose of Disbursement BANK FEES	Category/ Type 001
Candidate Name	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) B. FRONTIER COMMUNICATIONS		Date of Disbursement M M / D D / Y Y Y Y 07 / 31 / 2014
Mailing Address 3 HIGH RIDGE PARK		Amount of Each Disbursement this Period 8.47 Transaction ID : SB17.8501
City STAMFORD	State CT	
Zip Code 06905	Purpose of Disbursement INTERNET	Category/ Type 001
Candidate Name	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. FRONTIER COMMUNICATIONS		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 3 HIGH RIDGE PARK		Amount of Each Disbursement this Period 42.47 Transaction ID : SB17.8667
City STAMFORD	State CT	
Zip Code 06905	Purpose of Disbursement INTERNET	Category/ Type 001
Candidate Name	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).....	170.94
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 141 OF 174	
	<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)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FRANK FUSCARDO		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2014
Mailing Address 124 STAMFORD PARK DRIVE		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.8492
City HUNTINGTON State WV Zip Code 25705	Purpose of Disbursement OFFICE RENT 001 Category/Type	
Candidate Name	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) B. FRANK FUSCARDO		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 124 STAMFORD PARK DRIVE		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.8678
City HUNTINGTON State WV Zip Code 25705	Purpose of Disbursement FIELD CONSULTING 001 Category/Type	
Candidate Name	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. FRANK FUSCARDO		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 124 STAMFORD PARK DRIVE		Amount of Each Disbursement this Period 134.59 Transaction ID : SB17.8679
City HUNTINGTON State WV Zip Code 25705	Purpose of Disbursement MILEAGE 001 Category/Type	
Candidate Name	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).....	2134.59
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 142 OF 174	
	<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)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. FRANK FUSCARDO		Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2014
Mailing Address 124 STAMFORD PARK DRIVE		Amount of Each Disbursement this Period 115.17 Transaction ID : SB17.9119
City HUNTINGTON	State WV	
Zip Code 25705	Purpose of Disbursement MILEAGE	Category/ Type 001
Candidate Name	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) B. GOOGLE		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 1600 AMPITHEATRE PARKWAY		Amount of Each Disbursement this Period 38.50 Transaction ID : SB17.8513
City MOUNTAIN VEIW	State CA	
Zip Code 94043	Purpose of Disbursement ONLINE ADVERTISING	Category/ Type 001
Candidate Name	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. GOOGLE		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 1600 AMPITHEATRE PARKWAY		Amount of Each Disbursement this Period 40.63 Transaction ID : SB17.8514
City MOUNTAIN VEIW	State CA	
Zip Code 94043	Purpose of Disbursement ONLINE ADVERTISING	Category/ Type 001
Candidate Name	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).....	194.30
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 143 OF 174	
	<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)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. GOOGLE		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 1600 AMPITHEATRE PARKWAY		Amount of Each Disbursement this Period 48.38 Transaction ID : SB17.8671
City MOUNTAIN VEIW State CA Zip Code 94043	Purpose of Disbursement ONLINE ADVERTISING 001 Category/Type	
Candidate Name	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) B. HARPER POLLING		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 121 STATE ST		Amount of Each Disbursement this Period 2952.00 Transaction ID : SB17.8661
City HARRISBURG State PA Zip Code 17101	Purpose of Disbursement POLLING 001 Category/Type	
Candidate Name	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. CAITLIN IRR		Date of Disbursement M M / D D / Y Y Y Y 08 / 15 / 2014
Mailing Address 601 12TH AVE		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.9139
City HUNTINGTON State WV Zip Code 25701	Purpose of Disbursement ADMINISTRATIVE CONSULTING 001 Category/Type	
Candidate Name	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).....	4000.38
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 144 OF 174			
	<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)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. CAITLIN IRR		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 601 12TH AVE		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.8660
City HUNTINGTON	State WV	
Zip Code 25701	Purpose of Disbursement ADMINISTRATIVE CONSULTING	Category/ Type 001
Candidate Name	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) B. CAITLIN IRR		Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 601 12TH AVE		Amount of Each Disbursement this Period 195.76 Transaction ID : SB17.8664
City HUNTINGTON	State WV	
Zip Code 25701	Purpose of Disbursement MILEAGE	Category/ Type 001
Candidate Name	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. CAITLIN IRR		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 601 12TH AVE		Amount of Each Disbursement this Period 1000.00 Transaction ID : SB17.8828
City HUNTINGTON	State WV	
Zip Code 25701	Purpose of Disbursement ADMINISTRATIVE CONSULTING	Category/ Type 001
Candidate Name	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).....	2195.76
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 145 OF 174			
	<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)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MARK BLANKENSHIP ENTERPRISES		Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2014
Mailing Address 723 KANAWHA BLVD EAST STE 800		Amount of Each Disbursement this Period 2120.00 Transaction ID : SB17.8544
City CHARLESTON State WV Zip Code 25301	Purpose of Disbursement POLLING 001 Category/Type	
Candidate Name	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) B. MAYFAIR STREET LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address 3101 N HAMPTON DRIVE UNIT 404		Amount of Each Disbursement this Period 14000.00 Transaction ID : SB17.8479
City ALEXANDRIA State VA Zip Code 22302	Purpose of Disbursement STRATEGY CONSULTING 001 Category/Type	
Candidate Name	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. MAYFAIR STREET LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 3101 N HAMPTON DRIVE UNIT 404		Amount of Each Disbursement this Period 7000.00 Transaction ID : SB17.8659
City ALEXANDRIA State VA Zip Code 22302	Purpose of Disbursement STRATEGY CONSULTING 001 Category/Type	
Candidate Name	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).....	23120.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 146 OF 174	
	<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)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. MY CAMPAIGN STORE		Date of Disbursement M M / D D / Y Y Y Y 07 / 11 / 2014
Mailing Address 304 WHITTINGTON PKWY STE 201		Amount of Each Disbursement this Period 330.00 Transaction ID : SB17.8485
City LOUISVILLE State KY Zip Code 40222	Purpose of Disbursement PRINTING 001 Category/Type	
Candidate Name	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) B. MY CAMPAIGN STORE		Date of Disbursement M M / D D / Y Y Y Y 08 / 21 / 2014
Mailing Address 304 WHITTINGTON PKWY STE 201		Amount of Each Disbursement this Period 391.27 Transaction ID : SB17.8602
City LOUISVILLE State KY Zip Code 40222	Purpose of Disbursement PRINTING 001 Category/Type	
Candidate Name	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. PROFESSIONAL DATA SERVICES		Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014
Mailing Address 2470 DANIELS BRIDGE RD STE 121		Amount of Each Disbursement this Period 3103.73 Transaction ID : SB17.8482
City ATHENS State GA Zip Code 30606	Purpose of Disbursement COMPLIANCE CONSULTING 001 Category/Type	
Candidate Name	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).....	3825.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 147 OF 174			
	<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)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. PROFESSIONAL DATA SERVICES			Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014		
Mailing Address 2470 DANIELS BRIDGE RD STE 121			Amount of Each Disbursement this Period 1536.00		
City ATHENS	State GA	Zip Code 30606	Transaction ID : SB17.8829		
Purpose of Disbursement COMPLIANCE CONSULTING		001 Category/ Type			
Candidate Name					
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) B. KARIE SHARP			Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014		
Mailing Address 204 BROADWAY AVE			Amount of Each Disbursement this Period 300.00		
City NITRO	State WV	Zip Code 25143	Transaction ID : SB17.8460		
Purpose of Disbursement ADMINISTRATIVE CONSULTING		001 Category/ Type			
Candidate Name					
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. KARIE SHARP			Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014		
Mailing Address 204 BROADWAY AVE			Amount of Each Disbursement this Period 300.00		
City NITRO	State WV	Zip Code 25143	Transaction ID : SB17.8662		
Purpose of Disbursement ADMINISTRATIVE CONSULTING		001 Category/ Type			
Candidate Name					
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)	2136.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 148 OF 174			
	<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)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. KARIE SHARP			Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014	
Mailing Address 204 BROADWAY AVE			Amount of Each Disbursement this Period 300.00	
City NITRO	State WV	Zip Code 25143	Transaction ID : SB17.8891	
Purpose of Disbursement ADMINISTRATIVE CONSUNTING		001 Category/ Type		
Candidate Name				
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) B. STRATEGIC MEDIA SERVICES			Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014	
Mailing Address 3299 K ST NW #200			Amount of Each Disbursement this Period 11752.00	
City WASHINGTON	State DC	Zip Code 20007	Transaction ID : SB17.8502	
Purpose of Disbursement MEDIA BUY		001 Category/ Type		
Candidate Name				
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. STRATEGIC MEDIA SERVICES			Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2014	
Mailing Address 3299 K ST NW #200			Amount of Each Disbursement this Period 11752.00	
City WASHINGTON	State DC	Zip Code 20007	Transaction ID : SB17.8578	
Purpose of Disbursement MEDIA BUY		001 Category/ Type		
Candidate Name				
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).....	23804.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 149 OF 174			
	<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)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. STRATEGIC MEDIA SERVICES			Date of Disbursement M M / D D / Y Y Y Y 08 / 25 / 2014	
Mailing Address 3299 K ST NW #200			Amount of Each Disbursement this Period 61000.00	
City WASHINGTON	State DC	Zip Code 20007	Transaction ID : SB17.8650	
Purpose of Disbursement MEDIA BUY		Category/ Type 001		
Candidate Name				
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) B. STRATEGIC MEDIA SERVICES			Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2014	
Mailing Address 3299 K ST NW #200			Amount of Each Disbursement this Period 15558.00	
City WASHINGTON	State DC	Zip Code 20007	Transaction ID : SB17.8649	
Purpose of Disbursement MEDIA BUY		Category/ Type 001		
Candidate Name				
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. STRATEGIC MEDIA SERVICES			Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2014	
Mailing Address 3299 K ST NW #200			Amount of Each Disbursement this Period 29837.71	
City WASHINGTON	State DC	Zip Code 20007	Transaction ID : SB17.8675	
Purpose of Disbursement MEDIA BUY		Category/ Type 001		
Candidate Name				
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).....	106395.71
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 150 OF 174			
	<input checked="" type="checkbox"/> 17 <input type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21	

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. STRATEGIC MEDIA SERVICES			Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2014	
Mailing Address 3299 K ST NW #200			Amount of Each Disbursement this Period 47592.19	
City WASHINGTON	State DC	Zip Code 20007	Transaction ID : SB17.9118	
Purpose of Disbursement MEDIA BUY		Category/ Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:		
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) B. STRATEGIC MEDIA SERVICES			Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014	
Mailing Address 3299 K ST NW #200			Amount of Each Disbursement this Period 112147.00	
City WASHINGTON	State DC	Zip Code 20007	Transaction ID : SB17.8890	
Purpose of Disbursement MEDIA BUY		Category/ Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:		
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) C. STRIPE			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014	
Mailing Address 3180 18TH ST			Amount of Each Disbursement this Period 139.75	
City SAN FRANCISCO	State CA	Zip Code 94110	Transaction ID : SB17.7288	
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001		
Candidate Name				
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:		
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional).....	159878.94
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 151 OF 174			
	<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)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. STRIPE		Date of Disbursement MM / DD / YYYY 07 / 03 / 2014
Mailing Address 3180 18TH ST		Amount of Each Disbursement this Period 205.70 Transaction ID : SB17.7289
City SAN FRANCISCO	State CA	
Zip Code 94110	Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001
Candidate Name	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) B. STRIPE		Date of Disbursement MM / DD / YYYY 07 / 16 / 2014
Mailing Address 3180 18TH ST		Amount of Each Disbursement this Period 831.42 Transaction ID : SB17.9147
City SAN FRANCISCO	State CA	
Zip Code 94110	Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001
Candidate Name	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. STRIPE		Date of Disbursement MM / DD / YYYY 07 / 21 / 2014
Mailing Address 3180 18TH ST		Amount of Each Disbursement this Period 32.48 Transaction ID : SB17.9116
City SAN FRANCISCO	State CA	
Zip Code 94110	Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001
Candidate Name	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).....	1069.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 152 OF 174			
	<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)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. STRIPE		Date of Disbursement M M / D D / Y Y Y Y 07 / 22 / 2014
Mailing Address 3180 18TH ST		Amount of Each Disbursement this Period 2.98 Transaction ID : SB17.8457
City SAN FRANCISCO	State CA	
Zip Code 94110	Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001
Candidate Name	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) B. STRIPE		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 3180 18TH ST		Amount of Each Disbursement this Period 19.99 Transaction ID : SB17.9137
City SAN FRANCISCO	State CA	
Zip Code 94110	Purpose of Disbursement CC TRANSACTIONS	Category/ Type 001
Candidate Name	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. STRIPE		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address 3180 18TH ST		Amount of Each Disbursement this Period 9.90 Transaction ID : SB17.9138
City SAN FRANCISCO	State CA	
Zip Code 94110	Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001
Candidate Name	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).....	32.87
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 153 OF 174			
	<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)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. STRIPE		Date of Disbursement M M / D D / Y Y Y Y 08 / 13 / 2014
Mailing Address 3180 18TH ST		Amount of Each Disbursement this Period 563.94 Transaction ID : SB17.9144
City SAN FRANCISCO	State CA	
Zip Code 94110	Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001
Candidate Name	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) B. STRIPE		Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014
Mailing Address 3180 18TH ST		Amount of Each Disbursement this Period 831.42 Transaction ID : SB17.9146
City SAN FRANCISCO	State CA	
Zip Code 94110	Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001
Candidate Name	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. STRIPE		Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2014
Mailing Address 3180 18TH ST		Amount of Each Disbursement this Period 518.80 Transaction ID : SB17.9134
City SAN FRANCISCO	State CA	
Zip Code 94110	Purpose of Disbursement CC TRANSACTION FEES	Category/ Type 001
Candidate Name	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).....	1914.16
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 154 OF 174			
	<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)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. STRIPE		Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 3180 18TH ST		Amount of Each Disbursement this Period 742.94
City SAN FRANCISCO	State CA	
Zip Code 94110	Purpose of Disbursement CC TRANSACTION FEES	Transaction ID : SB17.9149
Candidate Name	Category/ Type 001	
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) B. STRIPE		Date of Disbursement M M / D D / Y Y Y Y 09 / 13 / 2014
Mailing Address 3180 18TH ST		Amount of Each Disbursement this Period 361.84
City SAN FRANCISCO	State CA	
Zip Code 94110	Purpose of Disbursement CC TRANSACTION FEES	Transaction ID : SB17.9120
Candidate Name	Category/ Type 001	
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. STRIPE		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 3180 18TH ST		Amount of Each Disbursement this Period 323.68
City SAN FRANCISCO	State CA	
Zip Code 94110	Purpose of Disbursement CC TRANSACTION FEES	Transaction ID : SB17.9132
Candidate Name	Category/ Type 001	
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).....	742.94
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 155 OF 174			
	<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)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. STRIPE		Date of Disbursement M M / D D / Y Y Y Y 09 / 21 / 2014
Mailing Address 3180 18TH ST		Amount of Each Disbursement this Period 554.20
City SAN FRANCISCO	State CA	
Zip Code 94110		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001
Candidate Name		
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) B. STRIPE		Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2014
Mailing Address 3180 18TH ST		Amount of Each Disbursement this Period 946.61
City SAN FRANCISCO	State CA	
Zip Code 94110		
Purpose of Disbursement CC TRANSACTION FEES		Category/ Type 001
Candidate Name		
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. TARGETED CREATIVE SERVICES		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address 106 S COLUMBUS ST		Amount of Each Disbursement this Period 4665.00
City ALEXANDRIA	State VA	
Zip Code 22314		
Purpose of Disbursement PRINTING		Category/ Type 001
Candidate Name		
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).....	6165.81
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 156 OF 174			
	<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)
JENKINS FOR CONGRESS

A. TARGETED VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address 1033 NORTH FAIRFAX ST STE 400

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement LIST RENTAL

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 15 / 2014

Amount of Each Disbursement this Period: 107.60

Transaction ID : SB17.8830

Category/Type: 001

B. THE GREENBRIAR HOTEL

Full Name (Last, First, Middle Initial)
Mailing Address 300 W MAIN ST

City WHITE SULPHUR SPRI State WV Zip Code 24986

Purpose of Disbursement MEETING EXPENSE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 22 / 2014

Amount of Each Disbursement this Period: 371.20

Transaction ID : SB17.8937

Category/Type: 001

C. THE MONROE WATCHMAN

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 179

City UNION State WV Zip Code 24983

Purpose of Disbursement ADVERTISING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 09 / 17 / 2014

Amount of Each Disbursement this Period: 981.00

Transaction ID : SB17.8883

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional) 1459.80

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 157 OF 174			
	<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)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THE NICHOLAS CHRONICLE		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address PO BOX 503		Amount of Each Disbursement this Period 308.35 Transaction ID : SB17.8515
City SUMMERSVILLE	State WV	
Zip Code 26651	Purpose of Disbursement ADVERTISING	Category/ Type 001
Candidate Name	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) B. THE NICHOLAS CHRONICLE		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address PO BOX 503		Amount of Each Disbursement this Period 308.35 Transaction ID : SB17.8486
City SUMMERSVILLE	State WV	
Zip Code 26651	Purpose of Disbursement ADVERTISING	Category/ Type 001
Candidate Name	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. THE NICHOLAS CHRONICLE		Date of Disbursement M M / D D / Y Y Y Y 08 / 05 / 2014
Mailing Address PO BOX 503		Amount of Each Disbursement this Period 308.35 Transaction ID : SB17.8487
City SUMMERSVILLE	State WV	
Zip Code 26651	Purpose of Disbursement ADVERTISING	Category/ Type 001
Candidate Name	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).....	925.05
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 158 OF 174			
	<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)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THE NICHOLAS CHRONICLE		Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2014
Mailing Address PO BOX 503		Amount of Each Disbursement this Period 308.35 Transaction ID : SB17.9140
City SUMMERSVILLE	State WV	
Zip Code 26651	Purpose of Disbursement ADVERTISING	Category/ Type 001
Candidate Name	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) B. THE NICHOLAS CHRONICLE		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address PO BOX 503		Amount of Each Disbursement this Period 308.35 Transaction ID : SB17.8669
City SUMMERSVILLE	State WV	
Zip Code 26651	Purpose of Disbursement ADVERTISING	Category/ Type 001
Candidate Name	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. THE POCAHONTAS TIMES		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 206 8TH ST		Amount of Each Disbursement this Period 247.91 Transaction ID : SB17.8509
City MARLINTON	State WV	
Zip Code 24954	Purpose of Disbursement ADVERTISING	Category/ Type 001
Candidate Name	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).....	864.61
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 159 OF 174			
	<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)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THE POCAHONTAS TIMES			Date of Disbursement M M / D D / Y Y Y Y 08 / 06 / 2014	
Mailing Address 206 8TH ST			Amount of Each Disbursement this Period 991.64	
City MARLINTON	State WV	Zip Code 24954	Transaction ID : SB17.8488	
Purpose of Disbursement ADVERTISING		Category/ Type 001		
Candidate Name				
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) B. THE POCAHONTAS TIMES			Date of Disbursement M M / D D / Y Y Y Y 08 / 14 / 2014	
Mailing Address 206 8TH ST			Amount of Each Disbursement this Period 247.91	
City MARLINTON	State WV	Zip Code 24954	Transaction ID : SB17.9141	
Purpose of Disbursement ADVERTISING		Category/ Type 001		
Candidate Name				
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. THE POCAHONTAS TIMES			Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2014	
Mailing Address 206 8TH ST			Amount of Each Disbursement this Period 247.91	
City MARLINTON	State WV	Zip Code 24954	Transaction ID : SB17.8598	
Purpose of Disbursement ADVERTISING		Category/ Type 001		
Candidate Name				
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).....	991.64
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 160 OF 174			
	<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)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THE POCAHONTAS TIMES		Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2014
Mailing Address 206 8TH ST		Amount of Each Disbursement this Period 247.91 Transaction ID : SB17.8687
City MARLINTON State WV Zip Code 24954	Purpose of Disbursement ADVERTISING 001 Category/Type	
Candidate Name	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) B. THEODORE COMPANY LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014
Mailing Address 8616 BUCKBOARD DR		Amount of Each Disbursement this Period 9403.06 Transaction ID : SB17.8496
City ALEXANDIRA State VA Zip Code 22308	Purpose of Disbursement FUNDRAISING CONSULTING 001 Category/Type	
Candidate Name	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. THEODORE COMPANY LLC		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 8616 BUCKBOARD DR		Amount of Each Disbursement this Period 13336.00 Transaction ID : SB17.8543
City ALEXANDIRA State VA Zip Code 22308	Purpose of Disbursement FUNDRAISING CONSULTING 001 Category/Type	
Candidate Name	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).....	22986.97
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 161 OF 174			
	<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)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. THEODORE COMPANY LLC		Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2014
Mailing Address 8616 BUCKBOARD DR		Amount of Each Disbursement this Period 1025.00 Transaction ID : SB17.8831
City ALEXANDIRA State VA Zip Code 22308	Purpose of Disbursement FUNDRAISING CONSULTING 001 Category/Type	
Candidate Name	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) B. BRETT TUBBS		Date of Disbursement M M / D D / Y Y Y Y 08 / 19 / 2014
Mailing Address 1225 STAUTON RD		Amount of Each Disbursement this Period 1500.00 Transaction ID : SB17.8589
City CHARLESTON State WV Zip Code 25314	Purpose of Disbursement FIELD CONSULTING 001 Category/Type	
Candidate Name	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. BRETT TUBBS		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 1225 STAUTON RD		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.8889
City CHARLESTON State WV Zip Code 25314	Purpose of Disbursement FIELD CONSULTING 001 Category/Type	
Candidate Name	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).....	3025.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 162 OF 174			
	<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)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. UBER TECHNOLOGIES			Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014	
Mailing Address 1455 MARKET ST			Amount of Each Disbursement this Period 33.19	
City SAN FRANCISCO	State CA	Zip Code 94103	Transaction ID : SB17.8537	
Purpose of Disbursement TRAVEL EXPENSE		001 Category/ Type		
Candidate Name				
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) B. UBER TECHNOLOGIES			Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014	
Mailing Address 1455 MARKET ST			Amount of Each Disbursement this Period 30.84	
City SAN FRANCISCO	State CA	Zip Code 94103	Transaction ID : SB17.8538	
Purpose of Disbursement TRAVEL EXPENSE		001 Category/ Type		
Candidate Name				
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. US AIRWAYS			Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2014	
Mailing Address 4000 E SKY HARBOR BLVD			Amount of Each Disbursement this Period 720.20	
City PHOENIX	State AZ	Zip Code 85034	Transaction ID : SB17.9123	
Purpose of Disbursement AIRFARE		001 Category/ Type		
Candidate Name				
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).....	784.23
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 163 OF 174			
	<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)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial)		Date of Disbursement											
A. USPS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>15</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	07		15		2014
M M	/	D D	/	Y Y Y Y									
07		15		2014									
Mailing Address 1200 VETERANS MEMORIAL BLVD		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>HUNTINGTON</td> <td>WV</td> <td>25701</td> </tr> </table>		City	State	Zip Code	HUNTINGTON	WV	25701	<table border="1"> <tr> <td>64.00</td> </tr> </table>		64.00			
City	State	Zip Code											
HUNTINGTON	WV	25701											
64.00													
Purpose of Disbursement POSTAGE		Transaction ID : SB17.8526											
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)		Date of Disbursement											
B. USPS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>21</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	07		21		2014
M M	/	D D	/	Y Y Y Y									
07		21		2014									
Mailing Address 1200 VETERANS MEMORIAL BLVD		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>HUNTINGTON</td> <td>WV</td> <td>25701</td> </tr> </table>		City	State	Zip Code	HUNTINGTON	WV	25701	<table border="1"> <tr> <td>49.98</td> </tr> </table>		49.98			
City	State	Zip Code											
HUNTINGTON	WV	25701											
49.98													
Purpose of Disbursement POSTAGE		Transaction ID : SB17.8527											
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)		Date of Disbursement											
C. USPS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>19</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	08		19		2014
M M	/	D D	/	Y Y Y Y									
08		19		2014									
Mailing Address 1200 VETERANS MEMORIAL BLVD		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>HUNTINGTON</td> <td>WV</td> <td>25701</td> </tr> </table>		City	State	Zip Code	HUNTINGTON	WV	25701	<table border="1"> <tr> <td>441.00</td> </tr> </table>		441.00			
City	State	Zip Code											
HUNTINGTON	WV	25701											
441.00													
Purpose of Disbursement POSTAGE		Transaction ID : SB17.8601											
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).....	554.98
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 164 OF 174		
	<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)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. USPS		M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 1200 VETERANS MEMORIAL BLVD		Amount of Each Disbursement this Period 5.60
City HUNTINGTON State WV Zip Code 25701	Purpose of Disbursement POSTAGE	
Candidate Name	001	Transaction ID : SB17.8670
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)		Date of Disbursement
B. USPS		M M / D D / Y Y Y Y 09 / 03 / 2014
Mailing Address 1200 VETERANS MEMORIAL BLVD		Amount of Each Disbursement this Period 98.00
City HUNTINGTON State WV Zip Code 25701	Purpose of Disbursement POSTAGE	
Candidate Name	001	Transaction ID : SB17.8672
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)		Date of Disbursement
C. USPS		M M / D D / Y Y Y Y 09 / 04 / 2014
Mailing Address 1200 VETERANS MEMORIAL BLVD		Amount of Each Disbursement this Period 98.00
City HUNTINGTON State WV Zip Code 25701	Purpose of Disbursement POSTAGE	
Candidate Name	001	Transaction ID : SB17.8684
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).....	201.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 165 OF 174			
	<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)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2014
Mailing Address 1200 VETERANS MEMORIAL BLVD		Amount of Each Disbursement this Period 299.75
City HUNTINGTON State WV Zip Code 25701	Purpose of Disbursement POSTAGE 001 Category/Type	
Candidate Name		Transaction ID : SB17.9122
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. USPS		Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2014
Mailing Address 1200 VETERANS MEMORIAL BLVD		Amount of Each Disbursement this Period 5.95
City HUNTINGTON State WV Zip Code 25701	Purpose of Disbursement POSTAGE 001 Category/Type	
Candidate Name		Transaction ID : SB17.8936
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. WALMART		Date of Disbursement M M / D D / Y Y Y Y 07 / 07 / 2014
Mailing Address 702 SW 8TH STREET		Amount of Each Disbursement this Period 113.56
City BENTONVILLE State AR Zip Code 72716	Purpose of Disbursement OFFICE SUPPLIES 001 Category/Type	
Candidate Name		Transaction ID : SB17.8521
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	419.26
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 166 OF 174			
	<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)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WALMART		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014
Mailing Address 702 SW 8TH STREET		Amount of Each Disbursement this Period 95.21 Transaction ID : SB17.8520
City BENTONVILLE State AR Zip Code 72716	Purpose of Disbursement OFFICE SUPPLIES Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. WALMART		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014
Mailing Address 702 SW 8TH STREET		Amount of Each Disbursement this Period 161.98 Transaction ID : SB17.8519
City BENTONVILLE State AR Zip Code 72716	Purpose of Disbursement OFFICE SUPPLIES Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. WALMART		Date of Disbursement M M / D D / Y Y Y Y 07 / 24 / 2014
Mailing Address 702 SW 8TH STREET		Amount of Each Disbursement this Period 83.74 Transaction ID : SB17.8518
City BENTONVILLE State AR Zip Code 72716	Purpose of Disbursement OFFICE SUPPLIES Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	340.93
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 167 OF 174			
	<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)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WALMART		Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2014
Mailing Address 702 SW 8TH STREET		Amount of Each Disbursement this Period 98.02 Transaction ID : SB17.8522
City BENTONVILLE State AR Zip Code 72716	Purpose of Disbursement OFFICE SUPPLIES Candidate Name Category/Type 001	
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) B. WALMART		Date of Disbursement M M / D D / Y Y Y Y 07 / 29 / 2014
Mailing Address 702 SW 8TH STREET		Amount of Each Disbursement this Period 25.81 Transaction ID : SB17.8523
City BENTONVILLE State AR Zip Code 72716	Purpose of Disbursement OFFICE SUPPLIES Candidate Name Category/Type 001	
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. WALMART		Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2014
Mailing Address 702 SW 8TH STREET		Amount of Each Disbursement this Period 101.96 Transaction ID : SB17.8524
City BENTONVILLE State AR Zip Code 72716	Purpose of Disbursement OFFICE SUPPLIES Candidate Name Category/Type 001	
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).....	225.79
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 168 OF 174			
	<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)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WALMART		Date of Disbursement M M / D D / Y Y Y Y 09 / 02 / 2014
Mailing Address 702 SW 8TH STREET		Amount of Each Disbursement this Period 15.39
City BENTONVILLE	State AR Zip Code 72716	
Purpose of Disbursement OFFICE SUPPLIES	Category/Type 001	Transaction ID : SB17.8665
Candidate Name		
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) B. WEBSTER ECHO		Date of Disbursement M M / D D / Y Y Y Y 07 / 09 / 2014
Mailing Address 1 BACK FORK STREET		Amount of Each Disbursement this Period 236.00
City WEBSTER SPRINGS	State WV Zip Code 26288	
Purpose of Disbursement PRINTING	Category/Type 001	Transaction ID : SB17.8489
Candidate Name		
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. WEBSTER ECHO		Date of Disbursement M M / D D / Y Y Y Y 07 / 25 / 2014
Mailing Address 1 BACK FORK STREET		Amount of Each Disbursement this Period 1180.00
City WEBSTER SPRINGS	State WV Zip Code 26288	
Purpose of Disbursement PRINTING	Category/Type 001	Transaction ID : SB17.8459
Candidate Name		
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).....	1431.39
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 169 OF 174			
	<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)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. JUSTIN ZINK		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 1415 4TH AVE APT 338		Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17.7244
City HUNTINGTON	State WV	
Zip Code 25701	Purpose of Disbursement FIELD CONSULTING	Category/ Type 001
Candidate Name	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) B. JUSTIN ZINK		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 1415 4TH AVE APT 338		Amount of Each Disbursement this Period 728.96 Transaction ID : SB17.7245
City HUNTINGTON	State WV	
Zip Code 25701	Purpose of Disbursement MILEAGE	Category/ Type 001
Candidate Name	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. JUSTIN ZINK		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 1415 4TH AVE APT 338		Amount of Each Disbursement this Period 727.69 Transaction ID : SB17.8493
City HUNTINGTON	State WV	
Zip Code 25701	Purpose of Disbursement MILEAGE	Category/ Type 001
Candidate Name	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).....	6456.65
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 170 OF 174			
	<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)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. JUSTIN ZINK		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 1415 4TH AVE APT 338		Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17.9117
City HUNTINGTON State WV Zip Code 25701	Purpose of Disbursement STRATEGY CONSULTING Category/Type 001	
Candidate Name	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) B. JUSTIN ZINK		Date of Disbursement M M / D D / Y Y Y Y 08 / 28 / 2014
Mailing Address 1415 4TH AVE APT 338		Amount of Each Disbursement this Period 6100.14 Transaction ID : SB17.8648
City HUNTINGTON State WV Zip Code 25701	Purpose of Disbursement FIELD CONSULTING Category/Type 001	
Candidate Name	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 M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City State Zip Code	Purpose of Disbursement Category/Type	
Candidate Name	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).....	11100.14
TOTAL This Period (last page this line number only).....	538309.93

**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 171 OF 174	
	<input type="checkbox"/> 17 20a	<input checked="" type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. WEST VIRGINIANS FOR A BRIGHTER FUTURE		Date of Disbursement M M / D D / Y Y Y Y 08 / 12 / 2014
Mailing Address 500 CUMMINGS CENTER STE. 4400		Amount of Each Disbursement this Period 2000.00 Transaction ID : SB18.8586
City BEVERLY State MA Zip Code 01915	Purpose of Disbursement 008 Category/Type	
Candidate Name WEST VIRGINIANS FOR A BRIGHTER FUTURE		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City _____ State _____ Zip Code _____	Purpose of Disbursement Category/Type	
Candidate Name		
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 M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City _____ State _____ Zip Code _____	Purpose of Disbursement Category/Type	
Candidate Name		
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).....	2000.00
TOTAL This Period (last page this line number only).....	2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 172 OF 174	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. SHELLEY ALLEN		Date of Disbursement MM / DD / YYYY 08 / 29 / 2014
Mailing Address ROUTE 2 BOX 135		Amount of Each Disbursement this Period 1400.00 Transaction ID : SB20A.8656
City DAHLGREN	State IL	
Zip Code 62828	Purpose of Disbursement CONTRIBUTION REFUND	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. COURTLAND J HELBIG		Date of Disbursement MM / DD / YYYY 08 / 03 / 2014
Mailing Address 3029 GREYSTONE DR		Amount of Each Disbursement this Period 2250.00 Transaction ID : SB20A.8953
City MORGANTOWN	State WV	
Zip Code 26508	Purpose of Disbursement CONTRIBUTION REFUND	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. MICHAEL A KELLY		Date of Disbursement MM / DD / YYYY 08 / 04 / 2014
Mailing Address 1 PAVILION DR.		Amount of Each Disbursement this Period 1800.00 Transaction ID : SB20A.8954
City DANIELS	State WV	
Zip Code 25832	Purpose of Disbursement CONTRIBUTION REFUND	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	5450.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 173 OF 174	
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a	<input type="checkbox"/> 18 <input type="checkbox"/> 20b	<input type="checkbox"/> 19a <input type="checkbox"/> 20c	<input type="checkbox"/> 19b <input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)
JENKINS FOR CONGRESS

Full Name (Last, First, Middle Initial) A. ANNA-MARIE RESCHINI		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 6333 HOWE ST		Amount of Each Disbursement this Period 2400.00 Transaction ID : SB20A.8946
City PITTSBURGH	State PA	
Zip Code 15206	Purpose of Disbursement CONTRIBUTION REFUND	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. JOSEPH RESCHINI		Date of Disbursement M M / D D / Y Y Y Y 08 / 04 / 2014
Mailing Address 922 PHILADELPHIA ST		Amount of Each Disbursement this Period 2400.00 Transaction ID : SB20A.8948
City INDIANA	State PA	
Zip Code 15701	Purpose of Disbursement CONTRIBUTION REFUND	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) C. MATTHEW RICE		Date of Disbursement M M / D D / Y Y Y Y 07 / 21 / 2014
Mailing Address 7800 RT. 145 S		Amount of Each Disbursement this Period 4800.00 Transaction ID : SB20A.8494
City HARRISBURG	State IL	
Zip Code 62946	Purpose of Disbursement CONTRIBUTION REFUND	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	9600.00
TOTAL This Period (last page this line number only).....	15050.00

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

FOR LINE NUMBER: (check only one) 9 10

NAME OF COMMITTEE (In Full)

JENKINS FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
EVAN H JENKINS

Nature of Debt (Purpose):
TRAVEL EXPENSES, MEETING EXPENSES,
OFFICE SUPPLIES, PRINTING, POSTAGE

Mailing Address 121 OAK LANE

City State Zip Code
HUNTINGTON WV 25701

Outstanding Balance Beginning This Period

Transaction ID : SD10.1

5045.46

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

0.00

0.00

5045.46

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ▶

5045.46

2) **TOTALS** This Period (last page this line number only) ▶

5045.46

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

5045.46