

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
FEC MAIL CENTER

2016 FEB -3 AM 11:40

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

REGENERATE WEST VIRGINIA

ADDRESS (number and street)

PO BOX 11376

Check if different than previously reported. (ACC)

CHARLESTON

WV

25339-11376

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

00551770

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

(b) Monthly Report Due On:

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

(c) 12-Day PRE-Election Report for the:

- Primary (12P)
- Convention (12C)
- General (12G)
- Special (12S)
- Runoff (12R)

Election on

MM / DD / YYYY

in the State of

XX

(d) 30-Day POST-Election Report for the:

- General (30G)
- Runoff (30R)
- Special (30S)

Election on

MM / DD / YYYY

in the State of

XX

5. Covering Period

MM / DD / YYYY
01 / 01 / 2015

through

MM / DD / YYYY
06 / 30 / 2015

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

Type or Print Name of Treasurer JULIE ANN ARCHER

Signature of Treasurer *Julie Ann Archer*

Date MM / DD / YYYY
01 / 29 / 2015

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

Office Use Only

FEC FORM 3X
Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

REGENERATE WEST VIRGINIA

Report Covering the Period: From:

MM / DD / YYYY
01 / 01 / 2015

To:

MM / DD / YYYY
06 / 30 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2015		7495.53
(b) Cash on Hand at Beginning of Reporting Period.....	7495.53	
(c) Total Receipts (from Line 19)	3102.00	3102.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	10597.53	10597.53
7. Total Disbursements (from Line 31).....	3851.12	3851.12
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	6746.41	6746.41
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

REGENERATE WEST VIRGINIA

Report Covering the Period: From:

MEM / DD / YYYY
01 / 01 / 2015

To:

MEM / DD / YYYY
06 / 30 / 2015

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other Than Political Committees

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

3,002.00

3,002.00

(ii) Unitemized.....

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

3,002.00

3,002.00

(b) Political Party Committees.....

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

1,000.00

1,000.00

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

3,102.00

3,102.00

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

13. All Loans Received.....

14. Loan Repayments Received.....

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

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

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

18. Transfers from Non-Federal and Levin Funds

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

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

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

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

3,102.00

3,102.00

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

3,102.00

3,102.00

NON-FEDERAL AND LEVIN FUNDS

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1,351.12	1,351.12
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2,500.00	2,500.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		
29. Other Disbursements		
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add ... Lines 30(a)(i), 30(a)(ii) and 30(b)).....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	3,851.12	3,851.12
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3,851.12	3,851.12

2010 RELEASE UNDER E.O. 13526

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

33. Total Contributions (other than loans) (from Line 11(d), page 3)	3,102.00	3,102.00
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3,102.00	3,102.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1,351.12	1,351.12
37. Offsets to Operating Expenditures (from Line 15, page 3)		
3. Net Operating Expenditures (subtract Line 37 from Line 36)	1,351.12	1,351.12

NOTATION ON BOTTOM

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE	OF	7					
	(check only one)	<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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

NAME OF COMMITTEE (In Full)

REGENERATE WEST VIRGINIA

Full Name (Last, First, Middle Initial)

A. Reneta Park

Mailing Address

2311 Woodlark

City

Charleston

State

WV

Zip Code

25303

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

West Virginians for Affordable Health Care

Health Policy Director

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

03 / 19 / 2015

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

3. Dawn Wzfeld

Mailing Address

1535 Lee Street East

City

Charleston

State

WV

Zip Code

25311

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

WV State Auditor

Attorney

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 09 / 2015

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Richard Lindsey

Mailing Address

505 Nancy Street

City

Charleston

State

WV

Zip Code

25311

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Taber Lindsey & Associates

Attorney

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 09 / 2015

Amount of Each Receipt this Period

250.00

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

750.00

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

750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE <u>2</u> OF <u>7</u>
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
REGENERATE WEST VIRGINIA

A. **Rosemary Eddington**
 Full Name (Last, First, Middle Initial)
 Mailing Address: **1409 Quazner Street**
 City: **Charleston** State: **WV** Zip Code: **25301**
 Date of Receipt: **04 / 09 / 2015**
 Amount of Each Receipt this Period: **250.00**
 FEC ID number of contributing federal political committee: **C**
 Name of Employer: **United Methodist** Occupation: **Retired Minister**
 Receipt For: **Congregation** Aggregate Year-to-Date: **250.00**
 Primary General
 Other (specify) ▼

3. **Melvin Hoover**
 Full Name (Last, First, Middle Initial)
 Mailing Address: **1409 Quazner Street**
 City: **Charleston** State: **WV** Zip Code: **25301**
 Date of Receipt: **04 / 09 / 2015**
 Amount of Each Receipt this Period: **250.00**
 FEC ID number of contributing federal political committee: **C**
 Name of Employer: **United Methodist** Occupation: **Retired Minister**
 Receipt For: **Congregation** Aggregate Year-to-Date: **250.00**
 Primary General
 Other (specify) ▼

C. **Julie Archer**
 Full Name (Last, First, Middle Initial)
 Mailing Address: **PO Box 207**
 City: **Summers** State: **WV** Zip Code: **25567**
 Date of Receipt: **04 / 09 / 2015**
 Amount of Each Receipt this Period: **250.00**
 FEC ID number of contributing federal political committee: **C**
 Name of Employer: **WV Citizen Action Group** Occupation: **Project Manager**
 Receipt For: **Project Manager** Aggregate Year-to-Date: **250.00**
 Primary General
 Other (specify) ▼

SUBTOTAL of Receipts This Page (optional)..... **750.00**
 TOTAL This Period (last page this line number only).....

NATIONAL ORGANIZATION OF BOBBYBROTHERS

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)

PAGE 3 OF 7

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

REGENERATE WEST VIRGINIA

Full Name (Last, First, Middle Initial)

A. Julie Pratt

Mailing Address

104 Buckhorn Road

City

Charleston

State

WV

Zip Code

25314

FEC ID number of contributing federal political committee.

C

Date of Receipt

04 / 09 / 2015

Amount of Each Receipt this Period

250.00

Name of Employer

Self/Ridgeline: Ideas in Action

Occupation

Writer/Nonprofit Consultant

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Full Name (Last, First, Middle Initial)

B. Brian Pompanio

Mailing Address

1237 Highland Road

City

Charleston

State

WV

Zip Code

25302

FEC ID number of contributing federal political committee.

C

Date of Receipt

04 / 13 / 2015

Amount of Each Receipt this Period

250.00

Name of Employer

Mountain State Justice

Occupation

Attorney

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Full Name (Last, First, Middle Initial)

C. Margaret Chapman Pompanio

Mailing Address

1237 Highland Road

City

Charleston

State

WV

Zip Code

25302

FEC ID number of contributing federal political committee.

C

Date of Receipt

04 / 13 / 2015

Amount of Each Receipt this Period

250.00

Name of Employer

WV FREE

Occupation

Executive Director

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

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

750.00

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

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 4 OF 7
 (check only one)
 11a 13 14 11c 15 12 16 17

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NAME OF COMMITTEE (In Full)

REGENERATE WEST VIRGINIA

Full Name (Last, First, Middle Initial)

A. **Justin Williams**

Mailing Address

11 Brizer Hill Road

City

Charleston

State

WV

Zip Code

25314

FEC ID number of contributing federal political committee.

C

Name of Employer

WV Secretary of State

Occupation

Policy Director

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

02 / 15 / 2015

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

3. **Bill Price**

Mailing Address

19 Bradford Street

City

Charleston

State

WV

Zip Code

25301

FEC ID number of contributing federal political committee.

C

Name of Employer

Sierra Club

Occupation

Organizer

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

7,500

Date of Receipt

03 / 04 / 2015

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

4. **Pamela M Van Horn**

Mailing Address

1620 A Franklin Avenue

City

Charleston

State

WV

Zip Code

25311

FEC ID number of contributing federal political committee.

C

Name of Employer

Self/Pam Van Horn, LLC

Occupation

Business Owner

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

1,200

Date of Receipt

03 / 15 / 2015

Amount of Each Receipt this Period

21.00

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

188.00

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

188.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE **5** OF **7**

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NAME OF COMMITTEE (In Full)

REGENERATE WEST VIRGINIA

Full Name (Last, First, Middle Initial)

A. **Kathryn Flack**

Mailing Address

1308 Oakmont Road

City State Zip Code

Charleston, WV 25314

FEC ID number of contributing federal political committee.

C

Name of Employer

WV FREE

Occupation

Development Associate

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

75.00

Date of Receipt

03 / 15 / 2015

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. **Emmett Pepper**

Mailing Address

1563 Quorum Street

City State Zip Code

Charleston, WV 25311

FEC ID number of contributing federal political committee.

C

Name of Employer

WV Citizens Action Group

Occupation

Ex. Director, Energy Efficient WV

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

25.00

Date of Receipt

04 / 09 / 2015

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. **Kate Long**

Mailing Address

18 Arlington Court

City State Zip Code

Charleston, WV 25301

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

50.00

Date of Receipt

04 / 09 / 2015

Amount of Each Receipt this Period

50.00

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

150.00

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

150.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE **6** OF **7**

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

REGENERATE WEST VIRGINIA

Full Name (Last, First, Middle Initial)

A. **Brooke Drake**

Mailing Address

557 Barlow Drive

City **Charleston, WV** State **WV** Zip Code **25302**

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

Name of Employer **Hussens Pizzz** Occupation **Server**

Receipt For: Primary General Other (specify) Aggregate Year-to-Date **100.00**

Date of Receipt

04 / 09 / 2015

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Karen Freeman

Mailing Address

715 Helen Avenue

City **Charleston, WV** State **WV** Zip Code **25302**

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

Name of Employer **WV Citizen Action Group** Occupation **Special Projects Coordinator**

Receipt For: Primary General Other (specify) Aggregate Year-to-Date **100.00**

Date of Receipt

05 / 04 / 2015

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. **Ciera Pennington**

Mailing Address

1210 Garvin Avenue

City **Charleston, WV** State **WV** Zip Code **25302**

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

Name of Employer **WV FREE** Occupation **Field Organizer**

Receipt For: Primary General Other (specify) Aggregate Year-to-Date **300.00**

Date of Receipt

05 / 11 / 2015

Amount of Each Receipt this Period

10.00

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

230.00

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

230.00

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)

PAGE 7 OF 7

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

REGENERATE WEST VIRGINIA

Full Name (Last, First, Middle Initial)

A. Tishz Gay Reed

Mailing Address

703 Keneuhs Avenue

City Nitro State WY Zip Code 25143

FEC ID number of contributing federal political committee.

C

Name of Employer

WV FREE

Occupation

Deputy Director

Receipt For:

Primary General Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

06 / 09 / 2015

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Brad Heflin

Mailing Address

105 Bradford Street, Apt 3

City Charleston State WY Zip Code 25301

FEC ID number of contributing federal political committee.

C

Name of Employer

Rammaker, Inc.

Occupation

Account Executive

Receipt For:

Primary General Other (specify) ▼

Aggregate Year-to-Date ▼

84.00

Date of Receipt

06 / 09 / 2015

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

C. 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) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

184.00

TOTAL This Period (last page this line number only)

3,002.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE | OF |

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

REGENERATE WEST VIRGINIA

Full Name (Last, First, Middle Initial)

A. **Natalie Tennant for Senate, Inc.**

Mailing Address

PO Box 1063

City

Charleston

State

WV

Zip Code

25324

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

100.00

Date of Receipt

04 / 15 / 2015

Amount of Each Receipt this Period

100.00

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) ▼

Aggregate Year-to-Date ▼

Date of Receipt

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) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

100.00

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

100.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 1 OF 2

<input checked="" type="checkbox"/> 27	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b	

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NAME OF COMMITTEE (In Full)

REGENERATE WEST VIRGINIA

Full Name (Last, First, Middle Initial)

Bren Pomponio

Mailing Address

1237 Highland Road

City

Charleston

State

WV

Zip Code

25302

Purpose of Disbursement

Reimbursement - Membership Retreat

Candidate Name

00.1

Category/
Type

Date of Disbursement

01 / 10 / 2015

Amount of Each Disbursement this Period

278.4

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

Kathryn Flack

Mailing Address

1308 Ozkment Road

City

Charleston

State

WV

Zip Code

25314

Purpose of Disbursement

Reimbursement - Membership Retreat

Candidate Name

00.1

Category/
Type

Date of Disbursement

01 / 20 / 2015

Amount of Each Disbursement this Period

276.34

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

T Graphics

Mailing Address

312 Buchanan Street

City

Charleston

State

WV

Zip Code

25302

Purpose of Disbursement

T-Shirts

Candidate Name

0.06

Category/
Type

Date of Disbursement

04 / 13 / 2015

Amount of Each Disbursement this Period

391.39

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

District:

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

695.57

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

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

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

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NAME OF COMMITTEE (In Full)
REGENERATE WEST VIRGINIA

A.

Full Name (Last, First, Middle Initial)
Taylor Books

Mailing Address
226 Capitol Street

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

Purpose of Disbursement
Room Rental - City Council Candidate Forum

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
04 / 16 / 2015

Amount of Each Disbursement this Period
100.00

Category/Type
007

B.

Full Name (Last, First, Middle Initial)
84 Agency

Mailing Address
1542 Lee Street East

City **Charleston** State **WV** Zip Code **25311**

Purpose of Disbursement
Design 3 Print Post Cards for Get Out the Vote

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement
05 / 21 / 2015

Amount of Each Disbursement this Period
555.55

Category/Type
007

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

SUBTOTAL of Disbursements This Page (optional)..... **655.55**

TOTAL This Period (last page this line number only)..... **1,351.12**

20150521 10:00 AM

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE	OF	3
	<input type="checkbox"/> 21b <input type="checkbox"/> 27	<input type="checkbox"/> 22 <input type="checkbox"/> 28a	<input checked="" type="checkbox"/> 23 <input type="checkbox"/> 28b	<input type="checkbox"/> 24 <input type="checkbox"/> 28c	<input type="checkbox"/> 25 <input type="checkbox"/> 29	<input type="checkbox"/> 26 <input type="checkbox"/> 30b			

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NAME OF COMMITTEE (In Full)
REGENERATE WEST VIRGINIA

A. Joe Jenkins for City Council

Full Name (Last, First, Middle Initial)

Mailing Address

City: **Charleston** State: **WV** Zip Code

Purpose of Disbursement: **Campaign Contribution**

Candidate Name: **Joseph Jenkins** Category/Type: **0.1.1**

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

State: **WV** District: **Charleston City Council Ward 12**

Date of Disbursement: **04 / 16 / 2015**

Amount of Each Disbursement this Period: **200.00**

B. Jerry Wenz for City Council

Full Name (Last, First, Middle Initial)

Mailing Address: **702 Garden Drive**

City: **Charleston** State: **WV** Zip Code: **25303**

Purpose of Disbursement: **Campaign Contribution**

Candidate Name: **Jerry Wenz** Category/Type: **0.1.1**

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

State: **WV** District: **Charleston City Council At Large**

Date of Disbursement: **04 / 16 / 2015**

Amount of Each Disbursement this Period: **400.00**

C. Friends of Karen Ireland

Full Name (Last, First, Middle Initial)

Mailing Address: **715 Helen Avenue**

City: **Charleston** State: **WV** Zip Code: **25302**

Purpose of Disbursement: **Campaign Contribution**

Candidate Name: **Karen Ireland** Category/Type: **0.1.1**

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

State: **WV** District: **Charleston City Council At Large**

Date of Disbursement: **04 / 16 / 2015**

Amount of Each Disbursement this Period: **400.00**

SUBTOTAL of Disbursements This Page (optional)..... **1,000.00**

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

11-0001-0000-NO-INE-NO-0000

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 2 OF 3

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REGENERATE WEST VIRGINIA

Full Name (Last, First, Middle Initial)

A. <u>Becky Ceperley for City Council</u>		Date of Disbursement
Mailing Address <u>1524 Stonehenge Road</u>		<input type="checkbox"/> MM / <input type="checkbox"/> DD / <input type="checkbox"/> YYYY <u>04 / 16 / 2015</u>
City	State	Zip Code
<u>Charleston</u>	<u>WV</u>	
Purpose of Disbursement <u>Campaign Contribution</u>		Amount of Each Disbursement this Period <u>400.00</u>
Candidate Name <u>Becky Ceperley</u>		
Office Sought:	Disbursement For:	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: <u>WV</u>	District: <u>Charleston City Council At-Large</u>	

B. <u>Andy Richardson for City Council</u>		Date of Disbursement
Mailing Address <u>PO Box 5597</u>		<input type="checkbox"/> MM / <input type="checkbox"/> DD / <input type="checkbox"/> YYYY <u>04 / 16 / 2015</u>
City	State	Zip Code
<u>Charleston</u>	<u>WV</u>	<u>25361-0597</u>
Purpose of Disbursement <u>Campaign Contribution</u>		Amount of Each Disbursement this Period <u>400.00</u>
Candidate Name <u>Andy Richardson</u>		
Office Sought:	Disbursement For:	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: <u>WV</u>	District: <u>Charleston City Council At-Large</u>	

C. <u>Adam Knuff for City Council</u>		Date of Disbursement
Mailing Address <u>626 Jean Street</u>		<input type="checkbox"/> MM / <input type="checkbox"/> DD / <input type="checkbox"/> YYYY <u>04 / 16 / 2015</u>
City	State	Zip Code
<u>Charleston</u>	<u>WV</u>	<u>25302</u>
Purpose of Disbursement <u>Campaign Contribution</u>		Amount of Each Disbursement this Period <u>200.00</u>
Candidate Name <u>Adam Knuff</u>		
Office Sought:	Disbursement For:	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: <u>WV</u>	District: <u>Charleston City Council Ward 7</u>	

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

1,000.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

REGENERATE WEST VIRGINIA

Full Name (Last, First, Middle Initial)

A. Libby Bellare for City Council

Mailing Address

487 58th Street SE

City State Zip Code

Charleston WV

Purpose of Disbursement

Campaign Contribution

Candidate Name

Libby Bellare

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

State: **WV** District: **Charleston City Council At Large**

Full Name (Last, First, Middle Initial)

Date of Disbursement

04 / 18 / 2015

Amount of Each Disbursement this Period

500.00

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

MM / DD / YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

MM / DD / YYYY

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

500.00

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

2500.00

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked Date of Receipt
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 1/29/16
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked


 PREPARER

2/3/16
 DATE PREPARED

20150303 10:00:00 AM