

GEORGE & LORENSEN P.L.C.

ATTORNEYS AT LAW & PROFESSIONAL LIMITED LIABILITY CORPORATION

1526 KANAWHA BOULEVARD, EAST
CHARLESTON, WEST VIRGINIA 25311

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

TELEPHONE (304) 343-5555
FAX (304) 342-2513

SHAWN P. GEORGE
CHARLES O. LORENSEN

Dec 7 12 36 PM '98

December 2, 1998

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

Gentlemen:

Enclosed is the Post-Election Report of the West Virginia State Democratic Executive Committee which I have executed as treasurer. If you have any questions, please do not hesitate to contact the Committee directly at (304) 342-8121.

Sincerely,



Charles O. Lorensen

Enclosure

cc: Debbie McCormick (w/enclosure)

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

Dec 7 12 36 PM '98

USE REC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) WV State Democratic Executive Committee		2. FEC IDENTIFICATION NUMBER C00162578
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 405 Capitol St, Suite 501		
CITY, STATE and ZIP CODE Charleston, WV 25301		
3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)		

4. TYPE OF REPORT

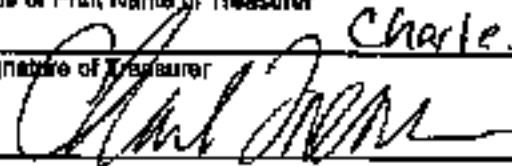
- (a) April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid Year Report (Non-election Year Only)
- Termination Report

Monthly Report Due On:

- February 20 June 20 October 20
- March 20 July 20 November 20
- April 20 August 20 December 20
- May 20 September 20 January 31

- 12-Day Pre-Election Report for the _____
(Type of Election)
election on _____ in the State of _____
- 30-Day Post-Election Report following the General Election
on **11/3/98** in the State of **WV**

(b) Is this Report an Amendment? YES NO

SUMMARY		COLUMN A	COLUMN B
5. Covering Period 10/1/98 through 11/23/98		This Period	Calendar Year-to-Date
6. (a)	Cash on Hand January 1, 19 98		\$ 41838.55
(b)	Cash on Hand at Beginning of Reporting Period	\$ 23527.27	
(c)	Total Receipts (from Line 10)	\$ 81608.72	\$ 152975.24
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 105135.99	\$ 194813.79
7.	Total Disbursements (from Line 30)	\$ 52563.83	\$ 142241.63
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 52572.16	\$ 52572.16
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 31600.00	
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 Charles O. Lawson			
Signature of Treasurer 			Date 12/2/98

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

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FEC FORM 3X
(revised 9/93)

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM SX

(revised 1/1/91)

NAME OF COMMITTEE WV State Democratic Executive Committee		REPORT COVERING PERIOD FROM 10/1/98 TO 11/23/98	
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
I. Itemized (use Schedule A)		28438.08	71840.00
II. Unitemized		23396.50	31296.52
III. Total (add I and II) >		51834.58	103137.16
b. Political Party Committees			
c. Other Political Committees (such as PACs)		27000.00	34250.00
d. Total Contributions (add a III, b and c) >		78834.58	137387.16
12. Transfers From Affiliated/Other Party Committees		2708.85	12989.69
13. All Loans Received			
14. Loan Repayments Received			
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			1241.69
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			
17. Other Federal Receipts (Dividends, Interest, etc.)		65.31	356.70
18. Transfers from Nonfederal Account for Joint Activity			1000.00
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >		81608.72	132975.24
20. Total Federal Receipts (subtract line 18 from line 19) >		81608.72	131975.24
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
I. Federal Share			3822.93
II. Non-Federal Share			1274.35
b. Other Federal Operating Expenditures		52290.85	135850.69
c. Total Operating Expenditures (add a I, a II, and b) >		52290.85	140947.97
22. Transfers to Affiliated/Other Party Committees			
23. Contributions to Federal Candidates/Committees and Other Political Committees			
24. Independent Expenditures (use Schedule E)			
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			
26. Loan Repayments Made		272.98	1293.66
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 a, b and c) >			
29. Other Disbursements			
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >		52563.83	142241.63
31. Total Federal Disbursements (subtract line 21 a II from line 30) >		52563.83	140967.28
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)		78834.58	137387.16
33. Total Contribution Refunds (from line 28d)		-	-
34. Net Contributions (other than loans) (subtract line 33 from 32)		78834.58	137387.16
35. Total Federal Operating Expenditures (add 21 a I and 21 b) >		52290.85	139673.62
36. Offsets to Operating Expenditures (from line 15)		-	1241.69
37. Net Operating Expenditures (subtract line 36 from 35) >		52290.85	138431.93

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 10

FOR LINE NUMBER 11a(1)

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

NAME OF COMMITTEE (in Full) **West Virginia State Executive Committee** C00162578

A. Full Name, Mailing Address and ZIP Code Stephanie Kennedy Coons 1408 Virginia St., E. #2-B Charleston, WV 25301	Name of Employer Self	Date (month, day, year) 10/28/98	Amount of Each Receipt this Period 300.00
	Occupation Consultant Aggregate Year-to-Date > \$ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

B. Full Name, Mailing Address and ZIP Code Gregory Brent Stowers Box 368 Hamlin, WV 25523	Name of Employer Lincoln Co Commission	Date (month, day, year) 10/15/98	Amount of Each Receipt this Period 1000.00
	Occupation Account Clerk Aggregate Year-to-Date > \$ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

C. Full Name, Mailing Address and ZIP Code David F. Pray P.O. Box 3778 Charleston, WV 25337	Name of Employer Self	Date (month, day, year) 10/12/98	Amount of Each Receipt this Period 1000.00
	Occupation Contractor Aggregate Year-to-Date > \$ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

D. Full Name, Mailing Address and ZIP Code Robert B. Allen 927 Matthews Ave Charleston, WV 25302	Name of Employer Robert B. Allen	Date (month, day, year) 10/6/98	Amount of Each Receipt this Period 1000.00
	Occupation Attorney Aggregate Year-to-Date > \$ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

E. Full Name, Mailing Address and ZIP Code Constantino Y. Amores, MD 415 Morris St. Charleston, WV 25301	Name of Employer Self	Date (month, day, year) 10/2/98	Amount of Each Receipt this Period 1000.00
	Occupation Physician Aggregate Year-to-Date > \$ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

F. Full Name, Mailing Address and ZIP Code Oshel B. Conigo 209 1st Ave, South Nitro, WV 25143	Name of Employer President Better Foods Inc.	Date (month, day, year) 10/6/98	Amount of Each Receipt this Period 1000.00
	Occupation President Aggregate Year-to-Date > \$ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

G. Full Name, Mailing Address and ZIP Code Bill J. Crouch 105 Jamestown Rd. Nitro, WV 25143	Name of Employer President Crouch & Associates	Date (month, day, year) 10/6/98	Amount of Each Receipt this Period 1000.00
	Occupation President Aggregate Year-to-Date > \$ 1000.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional) **6300.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 21 OF 10
FOR LINE NUMBER 11a(2)

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)

West Virginia State Executive Committee

C00162578

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Charles Lorensen 950 One Valley Sq. Charleston, WV 25301	Self	10/6/98	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney	Aggregate Year-to-Date > \$ 1000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Dan A. Marshall PO Box 61 Parkersburg, WV 26101	Self	10/6/98	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney	Aggregate Year-to-Date > \$ 1000.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Wesley W. Mathoney 151 Walnut St. Morantown, WV 26505	Self	9/29/98	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney	Aggregate Year-to-Date > \$ 1000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Michael Rass PO Box 219 Coalton, WV 26257-0173	Self	10/6/98	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Oil & Gas	Aggregate Year-to-Date > \$ 1000.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Scott S. Segal 810 Kan. Blvd., E. Chas., WV 25301	Self	9/22/98	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney	Aggregate Year-to-Date > \$ 1000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Edward H. Staats, Jr. P.O. Box 1 Parkersburg, WV 26102	West Virginia treasurer	10/5/98	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Assistant	Aggregate Year-to-Date > \$ 1000.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Albert T. Summers P.O. Box 2388 Charleston, WV 25328	Self	10/6/98	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Businessman	Aggregate Year-to-Date > \$ 1000.00	

SUBTOTAL of Receipts This Page (optional)

7000.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

West Virginia State Executive Committee

C00162578

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lyle C. Stowers P.O. Box 368 Hamlin, WV 25523	Self Occupation: Businessman	9/22/98	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Donald C. Wandling Box 754 Logan, WV 25601-0754	Self Occupation: Attorney	9/18/98	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gaston Carpenter P.O. Box 891 Martinsburg, WV 25401	Farmer Occupation: General	9/25/98	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mark Hrutkay PO Box 306 Logan WV 25601	Self Occupation: Attorney	10/1/98	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 1000.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jim Lees 5 Appaloosa Lane Scott Depot, WV 25560	Hunt, Lee, Ferrell Occupation: Attorney	10/1/98	83.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 664.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles Coeb 1000 Laidley Tower Chas, WV 25301	Jackson + Kelly Occupation: Attorney	10/1/98	83.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 498.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lyle Sattes 110 Ashby Ave Chas, WV 25314	Self Occupation: Attorney	10/1/98	83.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 830.00		

SUBTOTAL of Receipts This Page (optional)

4249.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 10 FOR LINE NUMBER

1141

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NAME OF COMMITTEE (in Full)

West Virginia State Executive Committee

C00162578

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jim Bowen 1210 Blake St. Barboursville, WV 25004 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	USWA Dist. 23 Occupation: Director Aggregate Year-to-Date > \$ 830.00	10/1/98	83.00
Sammie Gee 1612 Virginia St. Chas, WV 25311 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Jackson + Kelly Occupation: Attorney Aggregate Year-to-Date > \$ 830.00	10/1/98	83.00
Paul Nusbaum 2130 Presidential Dr. Chas, WV 25314 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Retired Occupation: Aggregate Year-to-Date > \$ 747.00	10/1/98	83.00
Steven White 378 Knollwood Rd Chas, WV 25302 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Goodwin + Goodwin Occupation: Attorney Aggregate Year-to-Date > \$ 830.00	10/1/98	83.00
Brooks McCabe 1553 Bridge Rd Chas, WV 25314 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	McCabe-Hentley Realty Occupation: Real Estate Developer Aggregate Year-to-Date > \$ 830.00	10/1/98	83.00
Harry Weitzler 4910 Kanawha Ave Chas, WV 25314 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self Occupation: Attorney Aggregate Year-to-Date > \$ 830.00	10/1/98	83.00
Roger Pitt 2558 Rudden Rd Mena, WV 25248 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self Occupation: Aggregate Year-to-Date > \$ 830.00	10/1/98	83.00

SUBTOTAL of Receipts This Page (optional)

581.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 5 OF 10

FOR LINE NUMBER 11(a)

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NAME OF COMMITTEE (In Full)

West Virginia State Executive Committee

C00162578

A. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Robert Cordrick 355 Michlgo Elucra, OH 44035	ATT Occupation	10/11/98	83.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 830.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Ahmed Zabeem 113 Greenwood Rd Beckley, WV 25801	SELF Physician	10/11/98	83.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 830.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Lloyd Jackson PO Box 526 Hamlin, WV 25523	SELF Attorney	10/11/98	83.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 830.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
James Huggins 1215 17th St. NW Washington, DC 20036	The Colton and Huggins Group Consultant	10/11/98	67.08
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 670.80	
E. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Leff Moore 417 Poplar Fork Rd Hurricane, WV 25526	WV Mfg. Housing Assoc. Executive Director	10/11/98	83.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 830.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Allen Prunty 1600 La'alley Tower Chas, WV 25301	Jackson + Kelly Attorney	10/11/98	83.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 830.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation	Date (month, day, year)	Amount of Each Receipt this Period
John Bailey 1500 One Valley Sq. Chas, WV 25301	Goodwin + Goodwin Attorney	10/11/98	83.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date > \$ 830.00	

SUBTOTAL of Receipts This Page (optional) 565.08

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **6** OF **10**

FOR LINE NUMBER **11a(1)**

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NAME OF COMMITTEE (In Full)

West Virginia State Executive Committee

C00162578

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Joe Albright 2213 B Washington St. E Chas, WV 25311 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	WV Supreme Court Occupation: Justice Aggregate Year-to-Date > \$ 747.00	10/1/98	83.00
R.R. Tredeking 511 8th St. Huntington, WV 25701 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self Employed Occupation: Attorney Aggregate Year-to-Date > \$ 1000.00	10/15/98	1000.00
Douglas Pawley 1591 Washington St., E. Suite 200 Chas, WV 25311 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self Occupation: Real Estate Dev. Aggregate Year-to-Date > \$ 1000.00	10/12/98	1000.00
Mark Hrutkay PO Box 306 Logan WV 25601 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self Occupation: Attorney Aggregate Year-to-Date > \$ 2000.00	10/15/98	1000.00
William Titelman 210 N. 3rd St., Suite 600 Harrisburg, PA 17101-1503 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Information Requested Occupation: Aggregate Year-to-Date > \$ 1000.00	11/23/98	1000.00
Raymond F. Schoenke Jr. 20250 Century Blvd., 4th Fl Germantown, MD 20874 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Information Requested Occupation: Aggregate Year-to-Date > \$ 1000.00	11/23/98	1000.00
Paul R. Beirne (Address Requested) Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Information Requested Occupation: Aggregate Year-to-Date > \$ 1000.00	11/23/98	1000.00
SUBTOTAL of Receipts This Page (optional)			6083.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 7 OF 10

FOR LINE NUMBER

1162

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)

WV State Democratic Executive Committee

C00162578

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Derrick Swope 320 Courthouse Rd. Princeton WV 24740	Sanders, Austin, Swope, + Flanigan	10/1/98	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney Aggregate Year-to-Date > \$ 1000.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mark Hrutkay PO Box 306 Loan WV 25801	Self	11/16/98	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney Aggregate Year-to-Date > \$ 3000.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Nancy Peoples 1023 Oakmont Rd Charleston WV 25314	Self	11/16/98	83.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Consultant Aggregate Year-to-Date > \$ 249.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Booth Goodwin 1500 One Valley Square Charleston WV 25328-2107	Goodwin & Goodwin Attorneys at Law	11/16/98	83.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney Aggregate Year-to-Date > \$ 249.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mullett Smith Box 1247 Duckley WV 25805-1247	Former Governor	11/16/98	83.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Retired Aggregate Year-to-Date > \$ 249.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jim Lees 5 Appaloosa Lane Scott Depot, WV 25560	Hunt, Lee, Ferrell	11/16/98	83.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney Aggregate Year-to-Date > \$ 747.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles Loeb 1600 Laidley Tower Chas, WV 25301	Jackson + Kelly	11/16/98	83.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Attorney Aggregate Year-to-Date > \$ 581.00		

SUBTOTAL of Receipts This Page (optional)

2415.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE **8** OF **10**
FOR LINE NUMBER **1162**

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)

WV State Democratic Executive Committee

C00162578

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Lyle Sattes 110 Ashby Ave Chas, WV 25314 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self Occupation: Attorney Aggregate Year-to-Date > \$ 913.00	11/16/98	83.00
B. Full Name, Mailing Address and ZIP Code Jim Bowen 1210 Blake St. Barboursville, WV 25504 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	USWA Dist. 23 Occupation: Director Aggregate Year-to-Date > \$ 913.00	11/16/98	83.00
C. Full Name, Mailing Address and ZIP Code Samme Gee 1612 Virginia St. Chas, WV 25311 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Jackson & Kelly Occupation: Attorney Aggregate Year-to-Date > \$ 913.00	11/16/98	83.00
D. Full Name, Mailing Address and ZIP Code Paul Nusbaum 2130 Presidential Dr. Chas, WV 25314 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Retired Occupation: Aggregate Year-to-Date > \$ 830.00	11/16/98	83.00
E. Full Name, Mailing Address and ZIP Code Brooks McCabe 1553 Bridge Rd Chas, WV 25314 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	McCabe-Hentley Realty Occupation: Real Estate Developer Aggregate Year-to-Date > \$ 913.00	11/16/98	83.00
F. Full Name, Mailing Address and ZIP Code Harry Deitzler 4910 Kanawha Ave Chas, WV 25314 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self Occupation: Attorney Aggregate Year-to-Date > \$ 913.00	11/16/98	83.00
G. Full Name, Mailing Address and ZIP Code Roger Pritt 2558 Oudden Rd Kenne, WV 25248 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self Occupation: Aggregate Year-to-Date > \$ 913.00	11/16/98	83.00

SUBTOTAL of Receipts This Page (optional) _____

581.00

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

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) **WV State Democratic Executive Committee** **C00162578**

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Robert Cordrick 355 Michigo Elyria, OH 44035	ATTY	11/16/98	83.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 913.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ahmed Faheem 113 Greenwood Rd Beckley, WV 25801	SELF	11/16/98	83.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician	Aggregate Year-to-Date > \$ 913.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Lloyd Jackson PO Box 526 Martinsburg, WV 25523	SELF	11/16/98	83.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 913.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Leff Moore 417 Poplar Fork Rd. Hurricane, WV 25526	WV Mfg. Housing Assoc.	11/16/98	83.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Director	Aggregate Year-to-Date > \$ 913.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Allen Prunty 1400 Laidley Tower Chas, WV 25301	Jackson + Kelly	11/16/98	83.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 913.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
John Bailey 1500 One Valley Sq. Chas, WV 25301	Goodwin + Goodwin	11/16/98	83.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Attorney	Aggregate Year-to-Date > \$ 913.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Joe Albright 2213 B Washington St. E Chas, WV 25311	WV Supreme Court	11/16/98	83.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Justice	Aggregate Year-to-Date > \$ 830.00	

SUBTOTAL of Receipts This Page (optional) **581.00**

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 10 OF 10

FOR LINE NUMBER

1141

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)

WV State Democratic Executive Committee

C00162578

A. Full Name, Mailing Address and ZIP Code Alexander Macia 1500 one Valley Sq. Chas, WV 25301	Name of Employer Goodwin + Goodwin Occupation Attorney	Date (month, day, year) 11/16/98	Amount of Each Receipt this Period 83.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 581.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$		

SUBTOTAL of Receipts This Page (optional)

83.00

TOTAL This Period (last page this line number only)

28,438.08

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 2
FOR LINE NUMBER 11C

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)

West Virginia State Executive Committee

C00162578

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Emily's List 805 15th St., N.W. Suite 400 Washington, DC 20005		10/22/98	4000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ 4000.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
CWA-COPE PCC 501 3rd St., N.W. Washington, DC 20001		10/1/98	2500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ 3700.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Keep Nick Rahall in Congress Comm. P.O. Box 64 Beckley, WV 25802-0064		10/8/98	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ 3500.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Sharpe for Senate Comm. 607 Center Ave Weston, WV 26452		10/6/98	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ 1000.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Martha Walker for the Senate 11 Quail Cove Rd. Chas, WV 25314-1634		9/17/98	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ 1000.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Bell Atlantic PAC 1717 Arch St. 47-5 Philadelphia, PA 19103		10/6/98	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ 1000.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Perdue For Treasurer PO Box 426 Detro, WV 25143		10/4/98	1000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
	Aggregate Year-to-Date > \$ 1000.00		

SUBTOTAL of Receipts This Page (optional)

11500.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 2
FOR LINE NUMBER 11C

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)

West Virginia State Executive Committee

C00162578

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Rite Aid PAC P.O. Box 3165 Harrisburg, PA 17105 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		10/12/98	1000.00
Aggregate Year-to-Date > \$ 1000.00			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Committee to Elect Joe Martin PO Box 1998 Elkins, WV 26241 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		10/5/98	1000.00
Aggregate Year-to-Date > \$ 1000.00			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Friends of Mike Oliverio 1484 Western Ave Martinsburg, WV 26505 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		10/13/98	1000.00
Aggregate Year-to-Date > \$ 1000.00			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Friends of Bill Wooten P.O. Box 59 Beckley, WV 25802 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		10/6/98	1000.00
Aggregate Year-to-Date > \$ 1000.00			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Bob Wise for Congress Comm. P.O. Box 5336 Chas., WV 25361 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		11/2/98	7500.00
Aggregate Year-to-Date > \$ 10000.00			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
United Mine Workers of America 900 15th St., NW Washington, DC 20005 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		10/30/98	4000.00
Aggregate Year-to-Date > \$ 4000.00			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Aggregate Year-to-Date > \$			

SUBTOTAL of Receipts This Page (optional)

15,500.00

TOTAL This Period (last page this line number only)

27,000.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 11 OF 11
FOR LINE NUMBER 12

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) **West Virginia State Executive Committee** C00162578

A. Full Name, Mailing Address and ZIP Code Democratic National Committee 430 So. Capitol St., S.E. Washington, DC 20003 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 8767.78	Date (month, day, year) 10/22/98	Amount of Each Receipt this Period 1306.61
B. Full Name, Mailing Address and ZIP Code ASDC Dollars for Democrats 430 So. Capitol St., S.E. Washington, DC 20003 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 3319.09	Date (month, day, year) 10/15/98	Amount of Each Receipt this Period 500.00
C. Full Name, Mailing Address and ZIP Code Democratic Nat'l Committee 430 So. Capitol St., S.E. Washington, DC 20003 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 9670.00	Date (month, day, year) 9/22/98	Amount of Each Receipt this Period 902.22
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) 2708.83

TOTAL This Period (last page this line number only) 2708.83

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full)

WV State Democratic Executive Committee

C00162878

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
One Valley Bank PO Box 1793 Char, WV 25326		10/30/98	4.19
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
One Valley Bank PO Box 1793 Char, WV 25326		10/30/98	61.12
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

65.31

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 7
FOR LINE NUMBER 210

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NAME OF COMMITTEE (In Full)

West Virginia State Executive Committee

C00162578

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
City of Charleston PO Box 2749 Charleston, WV 25330	Parking Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/98	55.00
B. Full Name, Mailing Address and ZIP Code WV Inter. Net 5115 Dover Drive Cross Lanes WV 25313	Internet Svc. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/98	37.95
C. Full Name, Mailing Address and ZIP Code David C. Bailey 1550 Quarrier St. Charleston, WV 25311	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/98	783.11
D. Full Name, Mailing Address and ZIP Code David C. Bailey 1550 Quarrier St. Charleston WV 25311	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/15/98	783.11
E. Full Name, Mailing Address and ZIP Code U.S. Postal Service Charleston, WV 25301	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/27/98	5800.00
F. Full Name, Mailing Address and ZIP Code US Postal Service Charleston, WV 25301	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/29/98	1700.00
G. Full Name, Mailing Address and ZIP Code US Print 810 Virginia St. Charleston, WV 25302	Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/30/98	1255.00
H. Full Name, Mailing Address and ZIP Code David C. Bailey 1550 Quarrier St. Charleston, WV 25311	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/31/98	783.11
I. Full Name, Mailing Address and ZIP Code David C. Bailey 1550 Quarrier St. Charleston, WV 25311	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/13/98	783.11

SUBTOTAL of Disbursements This Page (optional)

11980.39

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 217 OF 216 FOR LINE NUMBER 216

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NAME OF COMMITTEE (in Full)

West Virginia State Executive Committee

C00162578

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
David Bailey 1550 Quarrier St. Charleston, WV 25311	Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/13/98	356.39
B. Full Name, Mailing Address and ZIP Code Mid Town Assoc 405 Capitol St. Chas, WV 25301	Rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/98	897.43
C. Full Name, Mailing Address and ZIP Code Healthplan Svcs, Inc PO Box 31280 Tampa, FL 31280	Health Ins. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/98	461.42
D. Full Name, Mailing Address and ZIP Code Debbie M. McCormick Rt. 1 Box 943 Griffithsville, WV 25521	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/98	1047.79
E. Full Name, Mailing Address and ZIP Code Ervin Leasing PO Box 1689 Ann Arbor, MI 48106-1689	Copier Lease Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/1/98	231.97
F. Full Name, Mailing Address and ZIP Code Fast Signs 5308 McCorkle Ave SW So Chas, WV 25309	Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/7/98	52.50
G. Full Name, Mailing Address and ZIP Code Charleston Farmers MKT. Chas, WV 25301	Flower Gifts Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/9/98	100.00
H. Full Name, Mailing Address and ZIP Code Kinkos 400 Capitol St. Charleston, WV 25301	Printing Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/10/98	185.30
I. Full Name, Mailing Address and ZIP Code Bank One PO Box 1113 Chas, WV 25324	Payroll Taxes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/15/98	1508.25

SUBTOTAL of Disbursements This Page (optional)

4841.05

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE **3** OF **7**
FOR LINE NUMBER **216**

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)

West Virginia State Executive Committee

C00162578

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Debbie McCormick RA 1 Box 943 Griffithsville WV 25521	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/15/98	1047.79
B. Full Name, Mailing Address and ZIP Code Jones Printing P.O. Box 6038 Chas. WV 25312	Printing Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/15/98	2074.42
C. Full Name, Mailing Address and ZIP Code M+M Mailing 1626 6th Ave Chas. WV 25312	Mailings Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/15/98	485.34
D. Full Name, Mailing Address and ZIP Code Fenton Art Glass Co. 700 Elizabeth St. Williamstown WV 26187	Glass Gifts Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/15/98	483.22
E. Full Name, Mailing Address and ZIP Code Bank Card Center P.O. Box 1913 Chas. WV 25327	Travel Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/15/98	300.00
F. Full Name, Mailing Address and ZIP Code Ervin Leasing PO Box 1689 Bon Arbores, MI 48106	Copier Lease Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/15/98	189.97
G. Full Name, Mailing Address and ZIP Code IRS Cincinnati, OH 45999	Payroll TAXES Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/21/98	135.73
H. Full Name, Mailing Address and ZIP Code Healthplan SUCS., INC PO Box 31280 Tampa, FL 31280	Health Ins Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/26/98	428.84
I. Full Name, Mailing Address and ZIP Code Bell Atlantic PO Box 17398 Baltimore, MD 21297-0429	Phone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/27/98	529.01

SUBTOTAL of Disbursements This Page (optional)

5674.32

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 41 OF 7
FOR LINE NUMBER 216

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NAME OF COMMITTEE (In Full)

West Virginia State Executive Committee

C00162578

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Fine Host Catering 200 Civic Center Dr. Chas, WV 25301	Catering Dinner Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/27/98	14844.40
B. Full Name, Mailing Address and ZIP Code Charleston Civic Center 200 Civic Center Dr. Chas WV 25301	SS Dinner Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/27/98	3246.57
C. Full Name, Mailing Address and ZIP Code Staples P.O. Box 182378 Columbus, OH 43218-2378	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/27/98	100.00
D. Full Name, Mailing Address and ZIP Code ATTN PO Box 27-820 Kansas City, MO 64184-0820	Phone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/27/98	26.27
E. Full Name, Mailing Address and ZIP Code WV Dept. Tax and Revenue Charleston, WV	Payroll Taxes Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/27/98	557.10
F. Full Name, Mailing Address and ZIP Code Bank Card Center PO Box 1913 Chas, WV 25327-1913	Misc Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/27/98	200.00
G. Full Name, Mailing Address and ZIP Code Cable Comm PO Box 2673 Chas, WV 25330-2673	Cable Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/27/98	9.24
H. Full Name, Mailing Address and ZIP Code Telec 30680 Montpelier Madison Heights, MI 48071	Phone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/27/98	115.20
I. Full Name, Mailing Address and ZIP Code QRS Newmedia Inc 226 E Street NE Washington, DC 20002	Media Svcs. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/27/98	80.00

SUBTOTAL of Disbursements This Page (optional)

19178.78

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 5 OF 7
FOR LINE NUMBER 216

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NAME OF COMMITTEE (in Full)

West Virginia State Executive Committee

C00162578

ppv. Disc.

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Debbie M. McCormick Rt. 1 Box 943 Griffithsville, WV 25521	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/10/98	1047.79
Computer Care PO Box 2924 Chas, WV 25330	Repairs Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/10/98	79.50
BankCard Center PO Box 1913 Chas, WV 25327-1913	Misc. Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/10/98	2969.46
Mid Town Associates 405 Capital St. Chas, WV 25301	Rent Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/10/98	897.43
Lake Sosin Snell Perry + Assoc. 1730 Rhode Island Ave, NW Washington DC 20036	Consulting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/10/98	1000.00
Debbie M. McCormick Rt. 1 Box 943 Griffithsville, WV 25521	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/10/98	1047.79
Travel Guest Charleston, WV 25301	Winter Meeting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/10/98	371.36
Wynn Ross 919 Gordon Ave Beno, NV 89509	Supplies & Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/23/98	50.00
ATT P.O. Box 27-820 Kansas City, MO 64184-0820	Phone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/23/98	35.10

SUBTOTAL of Disbursements This Page (optional)

7498.43

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 6 OF 7
FOR LINE NUMBER 216

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NAME OF COMMITTEE (in Full)

West Virginia State Executive Committee

C00162578

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Advanced Engineering Assoc, 4913 McCorkle Ave Charleston WV 25304	Video Copies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/23/98	250.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Cable Com PO Box 2673 Charleston WV 25330-2673	Cable Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/23/98	9.24
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Smith, Cochran + Hicks 405 Capital St, Suite 908 Charleston WV 25314	Accounting Svcs Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/23/98	130.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Food Among the Flowers 111 Lee St., E Charleston, WV 25301	JAK Society Receipt. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/23/98	1710.84
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Telec 30680 Montpelier Madison Heights, MI 48071	Phone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/23/98	121.35
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Staples P.O. Box 182378 Columbus, OH 43218-2378	Office Supplies Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/23/98	100.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
WV Inter. Net 5115 Dover Drive Cross Lanes, WV 25313	Svc Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/23/98	37.95
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
US7 + G P.O. Box 0098 Palatine, IL 60055-0098	Liability Ins. Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/23/98	507.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)

2866.38

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 7 OF 11
FOR LINE NUMBER 210

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NAME OF COMMITTEE (In Full)

West Virginia State Executive Committee

C00162578

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
One Valley Bank PO Box 1793 Chas, WV 25326	Interest Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/25/98	25.76
One Valley Bank PO Box 1793 Chas, WV 25326	Interest Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/23/98	24.62
American Express PO Box 53852 Phoenix, AZ 85072	Credit Card Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/30/98	42.69
Bank One Capital - Virginia St Chas, WV 25301	Bank Fee Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/30/98	158.43
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

251.50

TOTAL This Period (last page this line number only)

52290.85

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 26

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NAME OF COMMITTEE (In Full)

West Virginia State Executive Committee

C00162578

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
One Valley Bank PO Box 1793 Chas, WV 25326	Loan Payment Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/25/98	135.92
One Valley Bank PO Box 1793 Chas, WV 25326	Loan Payment Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	11/23/98	137.06
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

272.98

LOANS

Name of Committee (In Full): **WV State Democratic Executive Committee** C 00162578

A. Full Name, Mailing Address and ZIP Code of Loan Source One Valley Bank Box 1793 Chas, WV 25326 Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Original Amount of Loan 5000.00	Cumulative Payment To Date 2182.07	Balance Outstanding at Close of This Period 2817.93
Term: Date Incurred <u>6/25/97</u> Date Due <u>MO</u> Interest Rate <u>10</u> % (APR) <input type="checkbox"/> Secured			

List All Endorsers or Guarantors (if any) to Item A

1. Full Name, Mailing Address and ZIP Code Steve White 378 Knollwood Dr Chas, WV 25302	Name of Employer Goodwin: Goodwin Occupation Attorney Amount Guaranteed Outstanding: \$ 4000.00		
2. Full Name, Mailing Address and ZIP Code Thomas P. Maroney 608 Virginia St E Chas, WV 25301	Name of Employer Self Occupation Attorney Amount Guaranteed Outstanding: \$ 1000.00		
3. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: \$		

B. Full Name, Mailing Address and ZIP Code of Loan Source	Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Term: Date Incurred _____ Date Due _____ Interest Rate _____ % (APR) <input type="checkbox"/> Secured			

List All Endorsers or Guarantors (if any) to Item B

1. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: \$		
2. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: \$		
3. Full Name, Mailing Address and ZIP Code	Name of Employer Occupation Amount Guaranteed Outstanding: \$		

SUBTOTALS This Period This Page (optional) _____

TOTALS This Period (last page in this line only) _____

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page 1 of 2 for
LINE NUMBER _____
(Use separate schedules
for each numbered line)

Name of Debtor (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payments This Period	Outstanding Balance at Close of This Period
WV State Democratic Exec Comm				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Paterno - Wright - Trainer Tennessee Ave Charleston, WV 25303	4200.00			4200.00
Nature of Debt (Purpose): Owed				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Mt State Communications 111 Crescent Dr. St. Albans, WV 25177	230.00			230.00
Nature of Debt (Purpose): Telephone Equipment				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Horizon Communications 311 6th St Washington, DC 20003	72.00			72.00
Nature of Debt (Purpose): Training Manual				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Eastern Long Distance PO Box 5098 Hazlet, NJ 17730	4510.00			4510.00
Nature of Debt (Purpose): Phone Banks				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor C: P Telephone PO Box 3163 Charleston, WV 25303	4016.25			4016.25
Nature of Debt (Purpose): Phone Service				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Discount Office Supply 120 W Washington St Charleston, WV 25303	65.72			65.72
Nature of Debt (Purpose): Office Supplies				
1) SUBTOTALS This Period This Page (optional)				13093.97
2) TOTALS This Period (last page in this line only)				
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				

DEBTS AND OBLIGATIONS
Excluding Loans

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
WV State Democratic Exec Comm				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor The Arnold Agency One Bridge Rd Charleston, WV 25301	756.22			756.22
Nature of Debt (Purpose): News on per Logo				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Smith Cochran ? Nicks 405 Capitol St, Suite 908 Charleston, WV 25301	550.50			550.50
Nature of Debt (Purpose): Accounting				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Lake Research 730 Rhode Island Ave Washington, DC 20036	9640.00			9640.00
Nature of Debt (Purpose): Poll				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor American Executive Air Charter 707 Virginia St, E, Ste 1113 Charleston, WV 25301	4741.44			4741.44
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
1) SUBTOTALS This Period This Page (optional)				15688.16
2) TOTALS This Period (last page in this line only)				28782.13
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)				28779.3
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)				31600.06

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> First Class Mail	POSTMARKED 12-2-98
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
RC	12-7-98
PREPARER	DATE PREPARED