

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="85.90"/>	<input type="text" value="85.90"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="395.90"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="6198.53"/>	<input type="text" value="6508.53"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="6594.43"/>	<input type="text" value="6594.43"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="4652.23"/>	<input type="text" value="4652.23"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="1942.20"/>	<input type="text" value="1942.20"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="10.34"/>	

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)

Write or Type Committee Name

WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

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

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).....	6000.00	6000.00
(ii) Unitemized	198.53	508.53
(iii) TOTAL (add Lines 11(a)(i) and (ii)..... ▶	6198.53	6508.53
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	6198.53	6508.53
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	6198.53	6508.53
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	6198.53	6508.53

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	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	4652.23	4652.23
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	4652.23	4652.23
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4652.23	4652.23

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)	6198.53	6508.53
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6198.53	6508.53
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

**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 176
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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 VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

A. Linda Day
 Full Name (Last, First, Middle Initial)
 Mailing Address 1414 Eastern Ave
 City Morgantown State WV Zip Code 26505
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Pediatric Dentistry Occupation Co-owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 23 / 2012
Transaction ID : SA11AI.4416
 Amount of Each Receipt this Period
 3000.00
 Donation

B. JOHN Reeves RAESE
 Full Name (Last, First, Middle Initial)
 Mailing Address 590 CANYON ROAD
 City MORGANTOWN State WV Zip Code 26508
 FEC ID number of contributing federal political committee. **C S4WV00084**
 Name of Employer Greer Industries Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 23 / 2012
Transaction ID : SA11AI.4789
 Amount of Each Receipt this Period
 3000.00
 Donation

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
 M M M / D D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	6000.00
TOTAL This Period (last page this line number only).....▶	6000.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 7 OF 176
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Clarksburg Publishing Company	Nature of Debt (Purpose): Political Ad
Mailing Address 324 Hewes Ave	
City State Zip Code Clarksburg WV 26301	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4671	
Amount Incurred This Period 138.97	Payment This Period 138.97	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Karen A Cross	Nature of Debt (Purpose): Travel
Mailing Address 1301 Karen Blvd #401	
City State Zip Code Capitol Heights MD 20743	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4666	
Amount Incurred This Period 162.40	Payment This Period 162.40	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Fairmont Printing	Nature of Debt (Purpose): Printing
Mailing Address PO Box 2000	
City State Zip Code Fairmont WV 26555	

Outstanding Balance Beginning This Period 695.78	Transaction ID : SD10.4396	
Amount Incurred This Period 0.00	Payment This Period 695.78	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)..... ▶	0.00
2) TOTALS This Period (last page this line number 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) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 8 OF 176
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Postmaster	Nature of Debt (Purpose): Postage
Mailing Address 300 Postal Plaza	
City State Zip Code Morgantown WV 26505	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4661	
Amount Incurred This Period 398.06	Payment This Period 398.06	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Postmaster	Nature of Debt (Purpose): Postage
Mailing Address 300 Postal Plaza	
City State Zip Code Morgantown WV 26505	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4662	
Amount Incurred This Period 286.40	Payment This Period 286.40	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Postmaster	Nature of Debt (Purpose): Postage
Mailing Address 198 Emily Dr	
City State Zip Code Clarksburg WV 26301	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4663	
Amount Incurred This Period 415.34	Payment This Period 415.34	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)..... ▶	0.00
2) TOTALS This Period (last page this line number 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) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 9 OF 176
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor The Shinnston News and Harrison County	Nature of Debt (Purpose): Political Ad
Mailing Address PO Box 187	
City State Zip Code Shinnston WV 26431-0187	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4670	
Amount Incurred This Period 34.56	Payment This Period 34.56	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc.	Nature of Debt (Purpose): Printing
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period 94.50	Transaction ID : SD10.4139	
Amount Incurred This Period 0.00	Payment This Period 94.50	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc.	Nature of Debt (Purpose): Labels
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period 424.24	Transaction ID : SD10.4140	
Amount Incurred This Period 0.00	Payment This Period 424.24	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)..... ▶	0.00
2) TOTALS This Period (last page this line number 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) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 10 OF 176
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc.	Nature of Debt (Purpose): Postage
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period <input type="text" value="3.92"/>	Transaction ID : SD10.4142	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="3.92"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc.	Nature of Debt (Purpose): Postage
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period <input type="text" value="21.68"/>	Transaction ID : SD10.4143	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="21.68"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc.	Nature of Debt (Purpose): Postage
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period <input type="text" value="24.56"/>	Transaction ID : SD10.4144	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="24.56"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 11 OF 176
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc.	Nature of Debt (Purpose): Postage
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period <input type="text" value="57.32"/>	Transaction ID : SD10.4145	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="57.32"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc.	Nature of Debt (Purpose): Postage
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period <input type="text" value="2.85"/>	Transaction ID : SD10.4146	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="2.85"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc.	Nature of Debt (Purpose): Postage
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period <input type="text" value="3.40"/>	Transaction ID : SD10.4147	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="3.40"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 12 OF 176
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc.	Nature of Debt (Purpose): Printing
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period 3.44	Transaction ID : SD10.4148	
Amount Incurred This Period 0.00	Payment This Period 3.44	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc.	Nature of Debt (Purpose): Postage
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period 6.59	Transaction ID : SD10.4149	
Amount Incurred This Period 0.00	Payment This Period 6.59	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc.	Nature of Debt (Purpose): Delivery of Mailing
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period 42.76	Transaction ID : SD10.4150	
Amount Incurred This Period 0.00	Payment This Period 42.76	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)..... ▶	0.00
2) TOTALS This Period (last page this line number 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) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 13 OF 176
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc.	Nature of Debt (Purpose): Delivery of Mailing
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period <input type="text" value="35.85"/>	Transaction ID : SD10.4151	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="35.85"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc.	Nature of Debt (Purpose): Delivery of Mailing (fuel)
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period <input type="text" value="17.91"/>	Transaction ID : SD10.4152	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="17.91"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc.	Nature of Debt (Purpose): Delivery of Mailing (fuel)
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period <input type="text" value="5.67"/>	Transaction ID : SD10.4153	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="5.67"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 14 OF 176
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc.	Nature of Debt (Purpose): Printing
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period 4.40	Transaction ID : SD10.4154	
Amount Incurred This Period 0.00	Payment This Period 4.40	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc.	Nature of Debt (Purpose): Delivery of Mailing (fuel)
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period 14.40	Transaction ID : SD10.4155	
Amount Incurred This Period 0.00	Payment This Period 14.40	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc.	Nature of Debt (Purpose): Delivery of Mailing (fuel)
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period 22.23	Transaction ID : SD10.4156	
Amount Incurred This Period 0.00	Payment This Period 22.23	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)..... ▶	0.00
2) TOTALS This Period (last page this line number 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) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 15 OF 176
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc.	Nature of Debt (Purpose): Delivery of Mailing
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period <input type="text" value="35.65"/>	Transaction ID : SD10.4157	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="35.65"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc.	Nature of Debt (Purpose): Postage
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period <input type="text" value="37.69"/>	Transaction ID : SD10.4158	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="37.69"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc.	Nature of Debt (Purpose): Print endorsement and postage
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period <input type="text" value="2.24"/>	Transaction ID : SD10.4255	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="2.24"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 16 OF 176
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc.	Nature of Debt (Purpose): Print Labels
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period <input type="text" value="387.51"/>	Transaction ID : SD10.4254	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="387.51"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc.	Nature of Debt (Purpose): Print endorsement flyer
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period <input type="text" value="157.05"/>	Transaction ID : SD10.4253	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="157.05"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc.	Nature of Debt (Purpose): Postage
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period <input type="text" value="14.84"/>	Transaction ID : SD10.4299	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="14.84"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 17 OF 176
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc.	Nature of Debt (Purpose): Postage and Printing
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period <input type="text" value="7.94"/>	Transaction ID : SD10.4300	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="7.94"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc.	Nature of Debt (Purpose): Postage
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period <input type="text" value="29.04"/>	Transaction ID : SD10.4301	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="29.04"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc.	Nature of Debt (Purpose): Postage and Printing
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period <input type="text" value="21.56"/>	Transaction ID : SD10.4302	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="21.56"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 18 OF 176
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc.	Nature of Debt (Purpose): Postage and Printing
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period <input type="text" value="47.59"/>	Transaction ID : SD10.4303	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="47.59"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc.	Nature of Debt (Purpose): Postage
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period <input type="text" value="2.95"/>	Transaction ID : SD10.4304	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="2.95"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc.	Nature of Debt (Purpose): Postage and Printing
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period <input type="text" value="16.20"/>	Transaction ID : SD10.4305	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="16.20"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 19 OF 176
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc.	Nature of Debt (Purpose): Postage and Printing
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period 9.46	Transaction ID : SD10.4306	
Amount Incurred This Period 0.00	Payment This Period 9.46	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc.	Nature of Debt (Purpose): Travel/Deliver Mailings
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4717	
Amount Incurred This Period 16.97	Payment This Period 16.97	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc.	Nature of Debt (Purpose): Fuel/Deliver Mailings
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4718	
Amount Incurred This Period 15.02	Payment This Period 15.02	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)..... ▶	0.00
2) TOTALS This Period (last page this line number 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) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 20 OF 176
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc.	Nature of Debt (Purpose): Postage and Printing
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4722	
Amount Incurred This Period 7.84	Payment This Period 7.84	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc.	Nature of Debt (Purpose): Travel/Deliver Mailings
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4719	
Amount Incurred This Period 33.10	Payment This Period 33.10	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc.	Nature of Debt (Purpose): Fuel/Deliver Mailings
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4720	
Amount Incurred This Period 15.07	Payment This Period 15.07	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)..... ▶	0.00
2) TOTALS This Period (last page this line number 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) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 21 OF 176
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc.	Nature of Debt (Purpose): Postage
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4724	
Amount Incurred This Period 0.45	Payment This Period 0.45	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc.	Nature of Debt (Purpose): Fuel/Deliver Mailings
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4721	
Amount Incurred This Period 11.60	Payment This Period 11.60	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc.	Nature of Debt (Purpose): Printing and Postage
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4723	
Amount Incurred This Period 3.32	Payment This Period 2.87	Outstanding Balance at Close of This Period 0.45

1) SUBTOTALS This Period This Page (optional)..... ▶	0.45
2) TOTALS This Period (last page this line number 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) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 22 OF 176
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc.	Nature of Debt (Purpose): Postage and Printing
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4777	
Amount Incurred This Period 9.89	Payment This Period 0.00	Outstanding Balance at Close of This Period 9.89

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc State PAC Fund	Nature of Debt (Purpose): Postage
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period 83.23	Transaction ID : SD10.4160	
Amount Incurred This Period 0.00	Payment This Period 83.23	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor West Virginians for Life, Inc State PAC Fund	Nature of Debt (Purpose): Postage
Mailing Address 25 Canyon Rd	
City State Zip Code Morgantown WV 26508	

Outstanding Balance Beginning This Period 0.00	Transaction ID : SD10.4660	
Amount Incurred This Period 779.13	Payment This Period 779.13	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)..... ▶	9.89
2) TOTALS This Period (last page this line number only)..... ▶	10.34
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	10.34

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Clarksburg Publishing Company		Date M M M / D D D / Y Y Y Y Y Y 06 / 05 / 2012
Mailing Address 324 Hewes Ave		Amount M M M M M M . M M M M M M 15.45
City Clarksburg	State Zip Code WV 26301	
Purpose of Expenditure Political Ad	Category/ Type M M M M M M	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MANCHIN III		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought M M M M M M . M M M M M M 2203.71		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : SE.4708

Full Name (Last, First, Middle Initial) of Payee Clarksburg Publishing Company		Date M M M / D D D / Y Y Y Y Y Y 06 / 05 / 2012
Mailing Address 324 Hewes Ave		Amount M M M M M M . M M M M M M 15.44
City Clarksburg	State Zip Code WV 26301	
Purpose of Expenditure Political Ad	Category/ Type M M M M M M	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: NEWT GINGRICH		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought M M M M M M . M M M M M M 841.86		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : SE.4709

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	M M M M M M . M M M M M M 30.89
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	M M M M M M . M M M M M M
(c) TOTAL Independent Expenditures.....▶	M M M M M M . M M M M M M

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ **[Electronically Filed]** Date M M M / D D D / Y Y Y Y Y Y
07 / 13 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Clarksburg Publishing Company		Date M M M / D D D / Y Y Y Y Y Y 06 / 05 / 2012
Mailing Address 324 Hewes Ave		Amount M M M M M M . M M M M M M 15.44
City Clarksburg	State Zip Code WV 26301	
Purpose of Expenditure Political Ad	Category/Type M M M M M M	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ron Paul		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought M M M M M M . M M M M M M 857.30		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : SE.4710

Full Name (Last, First, Middle Initial) of Payee Clarksburg Publishing Company		Date M M M / D D D / Y Y Y Y Y Y 06 / 05 / 2012
Mailing Address 324 Hewes Ave		Amount M M M M M M . M M M M M M 15.44
City Clarksburg	State Zip Code WV 26301	
Purpose of Expenditure Political Ad	Category/Type M M M M M M	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CHARLES E. ROEMER III		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought M M M M M M . M M M M M M 872.74		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : SE.4711

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	M M M M M M . M M M M M M 30.88
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	M M M M M M . M M M M M M
(c) TOTAL Independent Expenditures.....▶	M M M M M M . M M M M M M

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
07 / 13 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Clarksburg Publishing Company		Date MM / DD / YYYY 06 / 05 / 2012
Mailing Address 324 Hewes Ave		Amount 15.44
City Clarksburg	State WV	
Zip Code 26301	Transaction ID : SE.4712	
Purpose of Expenditure Political Ad	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 888.18		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Clarksburg Publishing Company		Date MM / DD / YYYY 06 / 05 / 2012
Mailing Address 324 Hewes Ave		Amount 15.44
City Clarksburg	State WV	
Zip Code 26301	Transaction ID : SE.4713	
Purpose of Expenditure Political Ad	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: RICHARD J SANTORUM		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 903.62		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	30.88
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Clarksburg Publishing Company		Date M M M / D D D / Y Y Y Y Y Y 06 / 05 / 2012
Mailing Address 324 Hewes Ave		Amount M M M M M M . M M M M M M 15.44
City Clarksburg	State Zip Code WV 26301	
Purpose of Expenditure Political Ad	Category/Type M M M M M M	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: SHEIRL LEE FLETCHER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought M M M M M M . M M M M M M 2219.15		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : SE.4714

Full Name (Last, First, Middle Initial) of Payee Clarksburg Publishing Company		Date M M M / D D D / Y Y Y Y Y Y 06 / 05 / 2012
Mailing Address 324 Hewes Ave		Amount M M M M M M . M M M M M M 15.44
City Clarksburg	State Zip Code WV 26301	
Purpose of Expenditure Political Ad	Category/Type M M M M M M	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN Reeves RAESE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought M M M M M M . M M M M M M 2234.59		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : SE.4715

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	M M M M M M . M M M M M M 30.88
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	M M M M M M . M M M M M M
(c) TOTAL Independent Expenditures.....▶	M M M M M M . M M M M M M

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
07 / 13 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Fairmont Printing		Date MM / DD / YYYY 05 / 09 / 2012
Mailing Address PO Box 2000		Amount 143.86
City Fairmont	State Zip Code WV 26555	
Purpose of Expenditure Printing	Category/Type	Transaction ID : SE.4432
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MANCHIN III		Office Sought: House State: WV <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
1788.33		Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee Fairmont Printing		Date MM / DD / YYYY 05 / 09 / 2012
Mailing Address PO Box 2000		Amount 143.86
City Fairmont	State Zip Code WV 26555	
Purpose of Expenditure Printing	Category/Type	Transaction ID : SE.4433
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Office Sought: House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
725.59		Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	287.72
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Fairmont Printing		Date MM / DD / YYYY 05 / 09 / 2012
Mailing Address PO Box 2000		Amount 143.87
City Fairmont	State Zip Code WV 26555	
Purpose of Expenditure Printing	Category/Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: SHEIRL LEE FLETCHER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1932.20		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : SE.4434

Full Name (Last, First, Middle Initial) of Payee Fairmont Printing		Date MM / DD / YYYY 05 / 09 / 2012
Mailing Address PO Box 2000		Amount 143.87
City Fairmont	State Zip Code WV 26555	
Purpose of Expenditure Printing	Category/Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN Reeves RAESE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2076.07		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : SE.4435

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	287.74
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Fairmont Printing		Date MM / DD / YYYY 05 / 09 / 2012
Mailing Address PO Box 2000		Amount 65.55
City Fairmont	State Zip Code WV 26555	
Purpose of Expenditure Printing	Category/Type	Transaction ID : SE.4436
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Snuffer		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 290.06		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Fairmont Printing		Date MM / DD / YYYY 05 / 09 / 2012
Mailing Address PO Box 2000		Amount 54.77
City Fairmont	State Zip Code WV 26555	
Purpose of Expenditure Printing	Category/Type	Transaction ID : SE.4437
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID B MCKINLEY		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 236.56		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	120.32
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Postmaster	Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 300 Postal Plaza	Amount 82.24
City Morgantown State WV Zip Code 26505	
Purpose of Expenditure Postage	Category/Type
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MANCHIN III	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 397.00	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Transaction ID : SE.4678

Full Name (Last, First, Middle Initial) of Payee Postmaster	Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 300 Postal Plaza	Amount 82.24
City Morgantown State WV Zip Code 26505	
Purpose of Expenditure Postage	Category/Type
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 274.87	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Transaction ID : SE.4679

(a) SUBTOTAL of Itemized Independent Expenditures.....	164.48
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Postmaster		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 300 Postal Plaza		Amount 57.28
City Morgantown	State Zip Code WV 26505	
Purpose of Expenditure Postage	Category/Type	Transaction ID : SE.4685
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MANCHIN III		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 618.74		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Postmaster		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 300 Postal Plaza		Amount 57.28
City Morgantown	State Zip Code WV 26505	
Purpose of Expenditure Postage	Category/Type	Transaction ID : SE.4686
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 332.15		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		2012 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	114.56
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Postmaster		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 300 Postal Plaza		Amount 57.28
City Morgantown	State Zip Code WV 26505	
Purpose of Expenditure Postage	Category/Type	Transaction ID : SE.4687
Name of Federal Candidate Supported or Opposed by Expenditure: SHEIRL LEE FLETCHER		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 676.02		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Postmaster		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 300 Postal Plaza		Amount 57.28
City Morgantown	State Zip Code WV 26505	
Purpose of Expenditure Postage	Category/Type	Transaction ID : SE.4688
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN Reeves RAESE		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 733.30		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	114.56
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Postmaster		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 300 Postal Plaza		Amount 2.84
City Morgantown	State Zip Code WV 26505	
Purpose of Expenditure Postage	Category/Type	Transaction ID : SE.4689
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Snuffer		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 75.28		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Postmaster		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 300 Postal Plaza		Amount 54.44
City Morgantown	State Zip Code WV 26505	
Purpose of Expenditure Postage	Category/Type	Transaction ID : SE.4690
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID B MCKINLEY		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 139.59		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	57.28
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Mary Anne Buchanan [Electronically Filed] Date **07 / 13 / 2012**

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Postmaster		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 198 Emily Dr		Amount 83.07
City Clarksburg	State WV	
Zip Code 26301	Transaction ID : SE.4691	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MANCHIN III		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 816.37		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Postmaster		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 198 Emily Dr		Amount 83.06
City Clarksburg	State WV	
Zip Code 26301	Transaction ID : SE.4692	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 415.21		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	166.13
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY
07 / 13 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Postmaster		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 198 Emily Dr		Amount 83.06
City Clarksburg	State WV	
Zip Code 26301	Transaction ID : SE.4693	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: SHEIRL LEE FLETCHER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 899.43		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Postmaster		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 198 Emily Dr		Amount 83.07
City Clarksburg	State WV	
Zip Code 26301	Transaction ID : SE.4694	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN Reeves RAESE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 982.50		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	166.13
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Postmaster		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 198 Emily Dr		Amount 40.88
City Clarksburg	State WV	
Zip Code 26301	Transaction ID : SE.4695	
Purpose of Expenditure Postage	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Snuffer		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 116.16		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Postmaster		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 198 Emily Dr		Amount 42.20
City Clarksburg	State WV	
Zip Code 26301	Transaction ID : SE.4696	
Purpose of Expenditure Postage	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID B MCKINLEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 181.79		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	83.08
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Mary Anne Buchanan

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee The Shinnston News and Harrison County		Date MM / DD / YYYY 06 / 05 / 2012
Mailing Address PO Box 187		Amount 3.84
City Shinnston	State WV	
Zip Code 26431-0187		Transaction ID : SE.4699
Purpose of Expenditure Political Ad	Category/Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MANCHIN III		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2180.58		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee The Shinnston News and Harrison County		Date MM / DD / YYYY 06 / 05 / 2012
Mailing Address PO Box 187		Amount 3.84
City Shinnston	State WV	
Zip Code 26431-0187		Transaction ID : SE.4700
Purpose of Expenditure Political Ad	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: NEWT GINGRICH		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 811.06		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	7.68
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY
07 / 13 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee The Shinnston News and Harrison County		Date MM / DD / YYYY 06 / 05 / 2012
Mailing Address PO Box 187		Amount 3.84
City Shinnston	State WV	
Zip Code 26431-0187		Transaction ID : SE.4701
Purpose of Expenditure Political Ad	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ron Paul		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 814.90		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee The Shinnston News and Harrison County		Date MM / DD / YYYY 06 / 05 / 2012
Mailing Address PO Box 187		Amount 3.84
City Shinnston	State WV	
Zip Code 26431-0187		Transaction ID : SE.4702
Purpose of Expenditure Political Ad	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CHARLES E. ROEMER III		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 818.74		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	7.68
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee The Shinnston News and Harrison County		Date MM / DD / YYYY 06 / 05 / 2012
Mailing Address PO Box 187		Amount 3.84
City Shinnston	State WV	
Zip Code 26431-0187		Transaction ID : SE.4703
Purpose of Expenditure Political Ad	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 822.58		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee The Shinnston News and Harrison County		Date MM / DD / YYYY 06 / 05 / 2012
Mailing Address PO Box 187		Amount 3.84
City Shinnston	State WV	
Zip Code 26431-0187		Transaction ID : SE.4704
Purpose of Expenditure Political Ad	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: RICHARD J SANTORUM		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 826.42		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	7.68
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
 Signature _____ [Electronically Filed] Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee The Shinnston News and Harrison County		Date MM / DD / YYYY 06 / 05 / 2012
Mailing Address PO Box 187		Amount 3.84
City Shinnston	State WV	
Zip Code 26431-0187	Transaction ID : SE.4705	
Purpose of Expenditure Political Ad	Category/Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: SHEIRL LEE FLETCHER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2184.42		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee The Shinnston News and Harrison County		Date MM / DD / YYYY 06 / 05 / 2012
Mailing Address PO Box 187		Amount 3.84
City Shinnston	State WV	
Zip Code 26431-0187	Transaction ID : SE.4706	
Purpose of Expenditure Political Ad	Category/Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN Reeves RAESE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2188.26		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	7.68
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee The Shinnston News and Harrison County		Date MM / DD / YYYY 06 / 05 / 2012
Mailing Address PO Box 187		Amount 3.84
City Shinnston	State WV	
Zip Code 26431-0187		Transaction ID : SE.4707
Purpose of Expenditure Political Ad	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID B MCKINLEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 248.51		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 19.48
City Morgantown	State WV	
Zip Code 26508		Transaction ID : SE.4438
Purpose of Expenditure Printing	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: NICK JOE II RAHALL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 102.71		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	23.32
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 21.57
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4439	
Purpose of Expenditure Printing	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MICHAEL A. II OLIVERIO		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 21.57		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 21.58
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4440	
Purpose of Expenditure Printing	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID B MCKINLEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 43.15		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	43.15
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
[Electronically Filed]
Date

Signature **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 93.33
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Print Labels	Category/ Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MANCHIN III		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 186.66		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>Special-General</u>

Transaction ID : SE.4443

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 29.70
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Print Labels	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MICHAEL A. II OLIVERIO		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 72.85		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : SE.4444

(a) SUBTOTAL of Itemized Independent Expenditures.....	123.03
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
Signature

[Electronically Filed] Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 33.95
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Print Labels	Category/ Type	Transaction ID : SE.4445
Office Sought: <input checked="" type="checkbox"/> House State: <u>WV</u> <input type="checkbox"/> Senate District: <u>01</u> <input type="checkbox"/> President		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID B MCKINLEY		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Calendar Year-To-Date Per Election for Office Sought		106.80

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 59.39
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Print Labels	Category/ Type	Transaction ID : SE.4446
Office Sought: <input checked="" type="checkbox"/> House State: <u>WV</u> <input type="checkbox"/> Senate District: <u>03</u> <input type="checkbox"/> President		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: ELLIOTT EDWARD MAYNARD		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Calendar Year-To-Date Per Election for Office Sought		162.10

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	93.34
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 0.98
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4454	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID B MCKINLEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 107.78		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 0.98
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4455	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MANCHIN III		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 187.64		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ <u>Special-General</u>

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1.96
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 0.98
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4456	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MICHAEL A. II OLIVERIO		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 0.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 0.98
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4457	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN Reeves RAESE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 188.62		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>Special-General</u>

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1.96
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
07 / 13 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 6.16
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Postage	Category/Type	Transaction ID : SE.4458
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN Reeves RAESE		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 194.78		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2010 <input checked="" type="checkbox"/> Other (specify) Special-General

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 6.15
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure postage	Category/Type	Transaction ID : SE.4459
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MANCHIN III		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 200.93		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2010 <input checked="" type="checkbox"/> Other (specify) Special-General

(a) SUBTOTAL of Itemized Independent Expenditures.....	12.31
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 3.23
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Postage	Category/ Type	Transaction ID : SE.4460
Name of Federal Candidate Supported or Opposed by Expenditure: ELLIOTT EDWARD MAYNARD		Office Sought: <input checked="" type="checkbox"/> House State: <u>WV</u> <input type="checkbox"/> Senate District: <u>03</u> <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 224.72		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		2010 <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 3.23
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Postage	Category/ Type	Transaction ID : SE.4461
Name of Federal Candidate Supported or Opposed by Expenditure: NICK JOE II RAHALL		Office Sought: <input checked="" type="checkbox"/> House State: <u>WV</u> <input type="checkbox"/> Senate District: <u>03</u> <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 227.95		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		2010 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	6.46
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
Signature

[Electronically Filed] Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 2.91
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4462	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: SHELLEY MOORE MS. CAPITO		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 89.93		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 6.68
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4463	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN Reeves RAESE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 207.61		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ <u>Special-General</u>

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	9.59
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
07 / 13 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 1.06
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID B MCKINLEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 110.88		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 3.50
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: ELLIOTT EDWARD MAYNARD		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 231.45		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	4.56
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
[Electronically Filed]
Date

Signature **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 3.49
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4468	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: NICK JOE II RAHALL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 234.94		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 2.08
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4469	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: SHELLEY MOORE MS. CAPITO		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 92.01		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	5.57
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
Signature

[Electronically Filed] Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 15.60
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Postage	Category/Type	Transaction ID : SE.4470
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN Reeves RAESE		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 229.90		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 15.60
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Postage	Category/Type	Transaction ID : SE.4471
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MANCHIN III		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 245.50		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General

(a) SUBTOTAL of Itemized Independent Expenditures.....	31.20
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 6.11
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4472	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: ELLIOTT EDWARD MAYNARD		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 241.05		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 6.11
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4473	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: NICK JOE II RAHALL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 247.16		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	12.22
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
[Electronically Filed]
Date

Signature **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 4.41
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4474	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MICHAEL A. II OLIVERIO		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
115.29		2010

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 4.41
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4476	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID B MCKINLEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
119.70		2010

(a) SUBTOTAL of Itemized Independent Expenditures.....	8.82
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
[Electronically Filed]
Date

Signature **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 5.08
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Postage	Category/ Type	Transaction ID : SE.4477
Name of Federal Candidate Supported or Opposed by Expenditure: SHELLEY MOORE MS. CAPITO		Office Sought: <input checked="" type="checkbox"/> House State: <u>WV</u> <input type="checkbox"/> Senate District: <u>02</u> <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 97.09		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 0.95
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Postage	Category/ Type	Transaction ID : SE.4478
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN Reeves RAESE		Office Sought: <input type="checkbox"/> House State: <u>WV</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 246.45		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ <u>Special-General</u>

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	6.03
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
Signature

[Electronically Filed] Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 0.95
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Postage	Category/ Type	Transaction ID : SE.4479
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MANCHIN III		Office Sought: <input type="checkbox"/> House State: <u>WV</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 247.40		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>Special-General</u>

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 0.95
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Postage	Category/ Type	Transaction ID : SE.4480
Name of Federal Candidate Supported or Opposed by Expenditure: SHELLEY MOORE MS. CAPITO		Office Sought: <input checked="" type="checkbox"/> House State: <u>WV</u> <input type="checkbox"/> Senate District: <u>02</u> <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 98.04		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	1.90
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
Signature

[Electronically Filed] Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 0.85
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Postage	Category/ Type	Transaction ID : SE.4481
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN Reeves RAESE		Office Sought: <input type="checkbox"/> House State: <u>WV</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 248.25		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>Special-General</u>

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 0.85
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Postage	Category/ Type	Transaction ID : SE.4482
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MANCHIN III		Office Sought: <input type="checkbox"/> House State: <u>WV</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 249.10		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>Special-General</u>

(a) SUBTOTAL of Itemized Independent Expenditures.....	1.70
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
Signature

[Electronically Filed] Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 0.85
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4483	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID B MCKINLEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 120.55		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 0.85
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4484	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MICHAEL A. II OLIVERIO		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 121.40		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1.70
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M / D D / Y Y Y Y Y Y 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 0.86
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Printing	Category/Type 	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN Reeves RAESE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 249.96		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General

Transaction ID : SE.4485

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M / D D / Y Y Y Y Y Y 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 0.87
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Printing	Category/Type 	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MANCHIN III		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 0.87		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-Primary

Transaction ID : SE.4486

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1.73
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
Signature [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
07 / 13 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 0.02
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4489	
Purpose of Expenditure Printing	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: ELLIOTT EDWARD MAYNARD		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 247.18		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 0.02
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4490	
Purpose of Expenditure Printing	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: NICK JOE II RAHALL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 247.20		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.04
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
[Electronically Filed]
Date

Signature **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 1.64
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4491	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN Reeves RAESE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 251.60		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>Special-General</u>

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 1.64
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4492	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MANCHIN III		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 253.24		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>Special-General</u>

(a) SUBTOTAL of Itemized Independent Expenditures.....	3.28
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 0.54
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4493	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MICHAEL A. II OLIVERIO		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 123.61		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 0.55
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4494	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID B MCKINLEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 124.16		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1.09
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
[Electronically Filed]
Date

MM / DD / YYYY
07 / 13 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 1.11
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4495	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: ELLIOTT EDWARD MAYNARD		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 248.31		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 1.11
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4496	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: NICK JOE II RAHALL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 249.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	2.22
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
[Electronically Filed]
Date

Signature **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y Y Y 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 9.44
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Travel/Deliver Mailings	Category/Type 	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN Reeves RAESE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 262.68		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2010 <input checked="" type="checkbox"/> Other (specify) Special-General

Transaction ID : SE.4506

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y Y Y 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 9.44
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Travel/Deliver Mailings	Category/Type 	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MANCHIN III		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 272.12		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2010 <input checked="" type="checkbox"/> Other (specify) Special-General

Transaction ID : SE.4507

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	18.88
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y Y Y
07 / 13 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 5.72
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4508	
Purpose of Expenditure Travel/Deliver Mailings	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: SHELLEY MOORE MS. CAPITO		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 103.76		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 5.63
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4509	
Purpose of Expenditure Travel/Deliver Mailings	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: ELLIOTT EDWARD MAYNARD		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 255.05		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	11.35
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 5.62
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4510	
Purpose of Expenditure Travel/Deliver Mailings	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: NICK JOE II RAHALL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 260.67		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 9.52
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4511	
Purpose of Expenditure Travel/Deliver Mailings	Category/Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN Reeves RAESE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 281.64		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ Special-General

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	15.14
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 9.52
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Travel/Deliver Mailings	Category/Type	Transaction ID : SE.4512
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MANCHIN III		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 291.16		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 6.66
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Travel/Deliver Mailings	Category/Type	Transaction ID : SE.4513
Name of Federal Candidate Supported or Opposed by Expenditure: MICHAEL A. II OLIVERIO		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 130.82		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	16.18
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 6.67
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4514	
Purpose of Expenditure Travel/Deliver Mailings	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID B MCKINLEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 137.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 6.67
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4515	
Purpose of Expenditure Travel/Deliver Mailings	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: SHELLEY MOORE MS. CAPITO		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 110.43		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	13.34
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
07 / 13 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 1.86
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Travel/Deliver Mailings	Category/Type	Transaction ID : SE.4516
Name of Federal Candidate Supported or Opposed by Expenditure: ELLIOTT EDWARD MAYNARD		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 262.53		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 1.86
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Travel/Deliver Mailings	Category/Type	Transaction ID : SE.4517
Name of Federal Candidate Supported or Opposed by Expenditure: NICK JOE II RAHALL		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 264.39		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	3.72
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 4.73
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Fuel/Deliver Mailings	Category/Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MANCHIN III		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 295.89		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 4.72
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Fuel/Deliver Mailings	Category/Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN Reeves RAESE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 300.61		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General

(a) SUBTOTAL of Itemized Independent Expenditures.....	9.45
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
Signature

[Electronically Filed] Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount _____ 2.85
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Fuel/Deliver Mailings	Category/Type _____	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: SHELLEY MOORE MS. CAPITO		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought _____ 113.28		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : SE.4522

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount _____ 1.25
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Fuel/Deliver Mailings	Category/Type _____	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN Reeves RAESE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought _____ 301.86		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ Special-General

Transaction ID : SE.4523

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	_____ 4.10
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	_____
(c) TOTAL Independent Expenditures.....▶	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
07 / 13 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 1.25
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Fuel/Deliver Mailings	Category/Type	Transaction ID : SE.4524
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MANCHIN III		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 303.11		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Special-General

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 0.89
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Fuel/Deliver Mailings	Category/Type	Transaction ID : SE.4525
Name of Federal Candidate Supported or Opposed by Expenditure: MICHAEL A. II OLIVERIO		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 138.38		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	2.14
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
07 / 13 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 0.88
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Fuel/Deliver Mailings	Category/ Type	Transaction ID : SE.4526
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID B MCKINLEY		Office Sought: <input checked="" type="checkbox"/> House State: <u>WV</u> <input type="checkbox"/> Senate District: <u>01</u> <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 139.26		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 0.89
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Fuel/Deliver Mailings	Category/ Type	Transaction ID : SE.4527
Name of Federal Candidate Supported or Opposed by Expenditure: SHELLEY MOORE MS. CAPITO		Office Sought: <input checked="" type="checkbox"/> House State: <u>WV</u> <input type="checkbox"/> Senate District: <u>02</u> <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 114.17		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1.77
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
Signature

[Electronically Filed] Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 0.25
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Fuel/Deliver Mailings	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: ELLIOTT EDWARD MAYNARD		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 270.25		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : SE.4528

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 0.26
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Fuel/Deliver Mailings	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: NICK JOE II RAHALL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 270.51		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : SE.4529

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	0.51
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

[Electronically Filed]

Date

MM / DD / YYYY
07 / 13 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 1.10
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Printing	Category/Type	Transaction ID : SE.4532
Name of Federal Candidate Supported or Opposed by Expenditure: ELLIOTT EDWARD MAYNARD		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 271.61		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 1.10
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Printing	Category/Type	Transaction ID : SE.4533
Name of Federal Candidate Supported or Opposed by Expenditure: NICK JOE II RAHALL		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 272.71		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	2.20
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
Signature

[Electronically Filed] Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 3.39
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Fuel/Deliver Mailings	Category/ Type	Transaction ID : SE.4534
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN Reeves RAESE		Office Sought: <input type="checkbox"/> House State: <u>WV</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
308.70		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>Special-General</u>

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 3.39
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Fuel/Deliver Mailings	Category/ Type	Transaction ID : SE.4535
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MANCHIN III		Office Sought: <input type="checkbox"/> House State: <u>WV</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
312.09		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>Special-General</u>

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	6.78
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 2.54
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Fuel/Deliver Mailings	Category/Type	Transaction ID : SE.4538
Name of Federal Candidate Supported or Opposed by Expenditure: SHELLEY MOORE MS. CAPITO		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 116.71		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 4.63
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Fuel/Deliver Mailings	Category/Type	Transaction ID : SE.4539
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN Reeves RAESE		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 316.72		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ Special-General

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	7.17
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 4.63
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Fuel/Deliver Mailings	Category/ Type	Transaction ID : SE.4540
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MANCHIN III		Office Sought: <input type="checkbox"/> House State: <u>WV</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
321.35		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <u>Special-General</u>

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 4.63
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Fuel/Deliver Mailings	Category/ Type	Transaction ID : SE.4542
Name of Federal Candidate Supported or Opposed by Expenditure: ELLIOTT EDWARD MAYNARD		Office Sought: <input checked="" type="checkbox"/> House State: <u>WV</u> <input type="checkbox"/> Senate District: <u>03</u> <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
277.34		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	9.26
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
Signature

[Electronically Filed] Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 0.93
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4545	
Purpose of Expenditure Fuel/Deliver Mailings	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MICHAEL A. II OLIVERIO		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 145.27		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 0.93
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4546	
Purpose of Expenditure Fuel/Deliver Mailings	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID B MCKINLEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 146.20		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1.86
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
[Electronically Filed]
Date

Signature **07** / **13** / **2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 7.44
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4547	
Purpose of Expenditure Travel/Deliver Mailings	Category/ Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN Reeves RAESE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 328.79		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2010 <input checked="" type="checkbox"/> Other (specify) Special-General

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 7.44
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4548	
Purpose of Expenditure Travel/Deliver Mailings	Category/ Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MANCHIN III		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 336.23		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2010 <input checked="" type="checkbox"/> Other (specify) Special-General

(a) SUBTOTAL of Itemized Independent Expenditures.....	14.88
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
Signature

[Electronically Filed] Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 7.44
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4549	
Purpose of Expenditure Travel/Deliver Mailings	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: ELLIOTT EDWARD MAYNARD		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 289.41		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 7.43
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4550	
Purpose of Expenditure Travel/Deliver Mailings	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: NICK JOE II RAHALL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 296.84		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	14.87
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
Signature

[Electronically Filed] Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 1.48
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Travel/Deliver Mailings	Category/Type	Transaction ID : SE.4553
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID B MCKINLEY		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 149.16		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 18.85
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Postage	Category/Type	Transaction ID : SE.4554
Name of Federal Candidate Supported or Opposed by Expenditure: NICK JOE II RAHALL		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 315.69		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	20.33
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 18.84
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4555	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: ELLIOTT EDWARD MAYNARD		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 334.53		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 3.34
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4556	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MANCHIN III		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 3.34		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	22.18
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
Signature

[Electronically Filed] Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 3.34
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Postage	Category/Type 	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN Reeves RAESE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 6.68		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : SE.4557

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 3.35
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Postage	Category/Type 	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ron Paul		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 3.35		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : SE.4558

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	6.69
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
07 / 13 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 3.36
City Morgantown	State WV	
Purpose of Expenditure Postage	Category/ Type	Transaction ID : SE.4562
Name of Federal Candidate Supported or Opposed by Expenditure: RICHARD J SANTORUM		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
13.43		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 3.35
City Morgantown	State WV	
Purpose of Expenditure Postage	Category/ Type	Transaction ID : SE.4563
Name of Federal Candidate Supported or Opposed by Expenditure: SHEIRL LEE FLETCHER		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
10.03		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	6.71
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
 Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 3.35
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4564	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN Reeves RAESE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 13.38		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 0.39
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4565	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Snuffer		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 0.39		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	3.74
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
Signature

[Electronically Filed] Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 0.56 Transaction ID : SE.4567
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Postage and Printing	Category/Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: SHEIRL LEE FLETCHER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 13.94		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 0.56 Transaction ID : SE.4568
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Postage and Printing	Category/Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN Reeves RAESE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 14.50		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1.12
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Mary Anne Buchanan [Electronically Filed] Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 0.56
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4569	
Purpose of Expenditure Postage and Printing	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Snuffer		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 0.95		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 0.56
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4570	
Purpose of Expenditure Postage and Printing	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID B MCKINLEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 0.56		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1.12
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
Signature [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
07 / 13 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 80.31
City Morgantown	State WV	
Purpose of Expenditure Printing	Category/ Type	Transaction ID : SE.4571
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MANCHIN III		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
94.81		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 80.31
City Morgantown	State WV	
Purpose of Expenditure Printing	Category/ Type	Transaction ID : SE.4572
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
93.74		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	160.62
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Mary Anne Buchanan [Electronically Filed] Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 80.31
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Printing	Category/Type	Transaction ID : SE.4573
Name of Federal Candidate Supported or Opposed by Expenditure: SHEIRL LEE FLETCHER		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
175.12		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 80.31
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Printing	Category/Type	Transaction ID : SE.4574
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN Reeves RAESE		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
255.43		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	160.62
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
Signature

[Electronically Filed] Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 32.29
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4575	
Purpose of Expenditure Printing	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Snuffer		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 33.24		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 33.98
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4576	
Purpose of Expenditure Printing	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID B MCKINLEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 34.54		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	66.27
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
 Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 17.81
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4577	
Purpose of Expenditure Printing	Category/ Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MANCHIN III		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 273.24		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 17.80
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4578	
Purpose of Expenditure Printing	Category/ Type	Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: NEWT GINGRICH		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 111.54		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	35.61
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY
07 / 13 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 17.80
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Printing	Category/Type	Transaction ID : SE.4579
Name of Federal Candidate Supported or Opposed by Expenditure: Ron Paul		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
129.34		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
2012		

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 17.81
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Printing	Category/Type	Transaction ID : SE.4580
Name of Federal Candidate Supported or Opposed by Expenditure: CHARLES E. ROEMER III		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
147.15		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
2012		

(a) SUBTOTAL of Itemized Independent Expenditures.....	35.61
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY
07 / 13 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 17.81
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4581	
Purpose of Expenditure Printing	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 164.96		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 17.81
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4582	
Purpose of Expenditure Printing	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: RICHARD J SANTORUM		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 182.77		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	35.62
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
07 / 13 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 8.42
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Printing	Category/ Type	Transaction ID : SE.4585
Office Sought: <input checked="" type="checkbox"/> House State: <u>WV</u> <input type="checkbox"/> Senate District: <u>03</u> <input type="checkbox"/> President		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Snuffer		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Calendar Year-To-Date Per Election for Office Sought		41.66

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 6.19
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Printing	Category/ Type	Transaction ID : SE.4586
Office Sought: <input checked="" type="checkbox"/> House State: <u>WV</u> <input type="checkbox"/> Senate District: <u>01</u> <input type="checkbox"/> President		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID B MCKINLEY		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Calendar Year-To-Date Per Election for Office Sought		40.73

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	14.61
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 1.70
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4587	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MANCHIN III		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 310.54		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 1.68
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4588	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: NEWT GINGRICH		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 184.45		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	3.38
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Mary Anne Buchanan [Electronically Filed] Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 1.69
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4589	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ron Paul		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 186.14		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 1.69
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4590	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CHARLES E. ROEMER III		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 187.83		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	3.38
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

[Electronically Filed]

Date

MM	/	DD	/	YYYY
07		13		2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 1.67
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4593	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: SHEIRL LEE FLETCHER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 312.21		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 1.67
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4594	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN Reeves RAESE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 313.88		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	3.34
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Mary Anne Buchanan [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
07 / 13 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 0.97
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4595	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Snuffer		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 42.63		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 0.42
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4596	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID B MCKINLEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 41.15		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1.39
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
Signature

[Electronically Filed] Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 0.88
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4597	
Purpose of Expenditure Postage and Printing	Category/ Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MANCHIN III		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 314.76		Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 0.88
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4598	
Purpose of Expenditure Postage and Printing	Category/ Type	Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: NEWT GINGRICH		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 192.06		Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	1.76
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
[Electronically Filed]
Date

Signature **07** / **13** / **2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 0.57
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4599	
Purpose of Expenditure Postage and Printing	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ron Paul		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 192.63		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc. [MEMO ITEM]		Date MM / DD / YYYY 04 / 30 / 2012
Mailing Address 25 Canyon Rd		Amount 0.09
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4779	
Purpose of Expenditure Postage and Printing	Category/ Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN Reeves RAESE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1482.07		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	0.57
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
Signature

[Electronically Filed] Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 04 / 30 / 2012
[MEMO ITEM] Mailing Address 25 Canyon Rd		Amount 0.36
City Morgantown	State WV	
Purpose of Expenditure Postage and Printing	Category/ Type	Transaction ID : SE.4780
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID B MCKINLEY		Office Sought: <input checked="" type="checkbox"/> House State: <u>WV</u> <input type="checkbox"/> Senate District: <u>01</u> <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
181.79		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.31
City Morgantown	State WV	
Purpose of Expenditure Postage and Printing	Category/ Type	Transaction ID : SE.4600
Name of Federal Candidate Supported or Opposed by Expenditure: Ron Paul		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
725.90		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.31
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
Signature

[Electronically Filed] Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.	Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd	Amount 0.88
City: Morgantown State: WV Zip Code: 26508	
Purpose of Expenditure: Postage and Printing	Transaction ID : SE.4601
Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CHARLES E. ROEMER III	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 726.78	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.	Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd	Amount 0.88
City: Morgantown State: WV Zip Code: 26508	
Purpose of Expenditure: Postage and Printing	Transaction ID : SE.4602
Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 727.66	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	1.76
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.88
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4603	
Purpose of Expenditure Postage and Printing	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: RICHARD J SANTORUM		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 728.54		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.88
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4604	
Purpose of Expenditure Postage and Printing	Category/ Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: SHEIRL LEE FLETCHER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2076.95		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	1.76
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Mary Anne Buchanan [Electronically Filed] Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.89
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4605	
Purpose of Expenditure Postage and Printing	Category/Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN Reeves RAESE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2077.84		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.42
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4606	
Purpose of Expenditure Postage and Printing	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Snuffer		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 290.48		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	1.31
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
Signature

[Electronically Filed] Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.47
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4607	
Purpose of Expenditure Postage and Printing	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID B MCKINLEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 237.03		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 1.50
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4608	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Snuffer		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 291.98		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1.97
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
Signature

[Electronically Filed] Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.34
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Postage	Category/ Type	Transaction ID : SE.4609
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID B MCKINLEY		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 237.37		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 2.69
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Postage and Printing	Category/ Type	Transaction ID : SE.4610
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MANCHIN III		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 2080.53		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	3.03
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
07 / 13 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 2.69
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Postage and Printing	Category/Type	Transaction ID : SE.4611
Name of Federal Candidate Supported or Opposed by Expenditure: NEWT GINGRICH		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 731.23		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 2.69
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Postage and Printing	Category/Type	Transaction ID : SE.4612
Name of Federal Candidate Supported or Opposed by Expenditure: Ron Paul		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 733.92		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	5.38
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Mary Anne Buchanan [Electronically Filed] Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 2.69
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4613	
Purpose of Expenditure Postage and Printing	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CHARLES E. ROEMER III		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 736.61		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 2.70
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4614	
Purpose of Expenditure Postage and Printing	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 739.31		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	5.39
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 2.70
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4615	
Purpose of Expenditure Postage and Printing	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: RICHARD J SANTORUM		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 742.01		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 2.70
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4616	
Purpose of Expenditure Postage and Printing	Category/ Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: SHEIRL LEE FLETCHER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2083.23		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	5.40
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Mary Anne Buchanan [Electronically Filed] Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 2.70
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Postage and Printing	Category/Type	Transaction ID : SE.4617
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN Reeves RAESE		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 2085.93		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 6.74
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Postage and Printing	Category/Type	Transaction ID : SE.4618
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MANCHIN III		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 2092.67		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	9.44
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
Signature

[Electronically Filed] Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 4.51
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Postage and Printing	Category/Type	Transaction ID : SE.4619
Name of Federal Candidate Supported or Opposed by Expenditure: NEWT GINGRICH		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 746.52		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 4.51
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Postage and Printing	Category/Type	Transaction ID : SE.4620
Name of Federal Candidate Supported or Opposed by Expenditure: Ron Paul		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 751.03		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	9.02
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount M M M M M . M M 4.51
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Postage and Printing	Category/Type M M M M M	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: CHARLES E. ROEMER III		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought M M M M M . M M 755.54		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Transaction ID : SE.4621

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount M M M M M . M M 6.73
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Postage and Printing	Category/Type M M M M M	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought M M M M M . M M 762.27		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Transaction ID : SE.4622

(a) SUBTOTAL of Itemized Independent Expenditures.....	M M M M M . M M 11.24
(b) SUBTOTAL of Unitemized Independent Expenditures	M M M M M . M M
(c) TOTAL Independent Expenditures.....	M M M M M . M M

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
07 / 13 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 6.75
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4626	
Purpose of Expenditure Postage and Printing	Category/Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN Reeves RAESE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2106.16		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 1.92
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4627	
Purpose of Expenditure Postage and Printing	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Snuffer		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 293.90		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	8.67
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.66
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4628	
Purpose of Expenditure Postage and Printing	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID B MCKINLEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 294.56		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.32
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4629	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MANCHIN III		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2106.48		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.98
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
Signature

[Electronically Filed] Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.33
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4630	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: NEWT GINGRICH		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 767.12		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.33
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4631	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ron Paul		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 767.45		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	0.66
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
[Electronically Filed]
Date

Signature **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.33
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4632	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CHARLES E. ROEMER III		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 767.78		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.33
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4633	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 768.11		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	0.66
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.33
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Postage	Category/Type	Transaction ID : SE.4634
Name of Federal Candidate Supported or Opposed by Expenditure: RICHARD J SANTORUM		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 768.44		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.34
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Postage	Category/Type	Transaction ID : SE.4635
Name of Federal Candidate Supported or Opposed by Expenditure: SHEIRL LEE FLETCHER		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 2106.82		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	0.67
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
Signature [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
07 / 13 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.34
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4636	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN Reeves RAESE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2107.16		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.30
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4637	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Snuffer		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 294.86		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.64
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
Signature

[Electronically Filed] Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 1.80
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Postage and Printing	Category/Type []	Transaction ID : SE.4638
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MANCHIN III		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought [] 2108.96		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 1.80
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Postage and Printing	Category/Type []	Transaction ID : SE.4639
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Snuffer		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought [] 296.66		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	3.60
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	[]
(c) TOTAL Independent Expenditures.....▶	[]

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan **[Electronically Filed]** Date M M M / D D D / Y Y Y Y Y Y
07 / 13 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 1.80
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4640	
Purpose of Expenditure Postage and Printing	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ron Paul		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 770.24		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 1.80
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4641	
Purpose of Expenditure Postage and Printing	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CHARLES E. ROEMER III		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 772.04		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	3.60
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
07 / 13 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 1.80
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4642	
Purpose of Expenditure Postage and Printing	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 773.84		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 1.80
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4643	
Purpose of Expenditure Postage and Printing	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: RICHARD J SANTORUM		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 775.64		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	3.60
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Mary Anne Buchanan [Electronically Filed] Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 1.80
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4644	
Purpose of Expenditure Postage and Printing	Category/ Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN Reeves RAESE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2110.76		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 1.80
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4645	
Purpose of Expenditure Postage and Printing	Category/ Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: SHEIRL LEE FLETCHER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2112.56		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	3.60
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Mary Anne Buchanan [Electronically Filed] Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 1.80
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4646	
Purpose of Expenditure Postage and Printing	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: NEWT GINGRICH		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 777.44		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 1.38
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4647	
Purpose of Expenditure Postage and Printing	Category/ Type	Office Sought: <input type="checkbox"/> House State: <u>WV</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MANCHIN III		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2113.94		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	3.18
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.62 Transaction ID : SE.4648
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Postage and Printing	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: NEWT GINGRICH		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 778.06		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.62 Transaction ID : SE.4649
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Postage and Printing	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ron Paul		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 778.68		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1.24
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Mary Anne Buchanan [Electronically Filed] Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.63
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4652	
Purpose of Expenditure Postage and Printing	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: RICHARD J SANTORUM		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 781.33		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 1.39
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4653	
Purpose of Expenditure Postage and Printing	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: SHEIRL LEE FLETCHER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1.39		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	2.02
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
[Electronically Filed]
Date

Signature **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 1.39
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4654	
Purpose of Expenditure Postage and Printing	Category/Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN Reeves RAESE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2115.33		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 1.17
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4655	
Purpose of Expenditure Postage and Printing	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Snuffer		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 297.83		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	2.56
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.24
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Postage and Printing	Category/Type	Transaction ID : SE.4656
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID B MCKINLEY		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 237.61		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 3.62
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Travel/Deliver Mailings	Category/Type	Transaction ID : SE.4725
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MANCHIN III		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 2118.95		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	3.86
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
Signature

[Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
07 / 13 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 3.62
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4726	
Purpose of Expenditure Travel/Deliver Mailings	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 784.95		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 3.62
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4727	
Purpose of Expenditure Travel/Deliver Mailings	Category/Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: SHEIRL LEE FLETCHER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2122.57		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	7.24
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.12
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4730	
Purpose of Expenditure Travel/Delvier Mailings	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID B MCKINLEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 237.73		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 3.21
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4731	
Purpose of Expenditure Fuel/Deliver Mailings	Category/Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MANCHIN III		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2129.41		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	3.33
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.10
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Fuel/Deliver Mailings	Category/ Type	Transaction ID : SE.4736
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID B MCKINLEY		Office Sought: <input checked="" type="checkbox"/> House State: <u>WV</u> <input type="checkbox"/> Senate District: <u>01</u> <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 237.83		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.98
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Postage and Printing	Category/ Type	Transaction ID : SE.4737
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MANCHIN III		Office Sought: <input type="checkbox"/> House State: <u>WV</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 2136.82		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1.08
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
Signature

[Electronically Filed] Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.98
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4738	
Purpose of Expenditure Postage and Printing	Category/ Type []	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: NEWT GINGRICH		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought [] 789.14		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.98
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4739	
Purpose of Expenditure Postage and Printing	Category/ Type []	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ron Paul		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought [] 790.12		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1.96
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	[]
(c) TOTAL Independent Expenditures.....▶	[]

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
Signature [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
07 / 13 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.98
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4740	
Purpose of Expenditure Postage and Printing	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CHARLES E. ROEMER III		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 791.10		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.98
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4741	
Purpose of Expenditure Postage and Printing	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 792.08		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	1.96
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
[Electronically Filed]
Date

Signature **07** / **13** / **2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.98
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4742	
Purpose of Expenditure Postage and Printing	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: RICHARD J SANTORUM		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 793.06		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.98
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4743	
Purpose of Expenditure Postage and Printing	Category/ Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: SHEIRL LEE FLETCHER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2137.80		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	1.96
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.98
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4744	
Purpose of Expenditure Postage and Printing	Category/Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN Reeves RAESE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2138.78		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 6.77
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4745	
Purpose of Expenditure Travel/Deliver Mailings	Category/Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MANCHIN III		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2145.55		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	7.75
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 6.77
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4746	
Purpose of Expenditure Travel/Deliver Mailings	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 799.83		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 6.77
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4747	
Purpose of Expenditure Travel/Deliver Mailings	Category/ Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: SHEIRL LEE FLETCHER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2152.32		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	13.54
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 6.77
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Travel/Deliver Mailings	Category/Type	Transaction ID : SE.4748
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN Reeves RAESE		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 2159.09		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 2.23
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Travel/Deliver Mailings	Category/Type	Transaction ID : SE.4749
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Snuffer		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 304.49		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	9.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 3.08
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Fuel/Deliver Mailings	Category/ Type	Transaction ID : SE.4753
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
802.91		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 3.09
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Fuel/Deliver Mailings	Category/ Type	Transaction ID : SE.4754
Name of Federal Candidate Supported or Opposed by Expenditure: SHEIRL LEE FLETCHER		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
2165.26		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	6.17
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 3.08
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4755	
Purpose of Expenditure Fuel/Deliver Mailings	Category/Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN Reeves RAESE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2168.34		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 1.02
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4756	
Purpose of Expenditure Fuel/Deliver Mailings	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Snuffer		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 305.51		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	4.10
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 1.72
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4757	
Purpose of Expenditure Fuel/Deliver Mailings	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID B MCKINLEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 243.34		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.09
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4758	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MANCHIN III		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2168.43		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	1.81
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
Signature

[Electronically Filed] Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.09
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4759	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 803.00		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.09
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4760	
Purpose of Expenditure Postage	Category/ Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: SHEIRL LEE FLETCHER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2168.52		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	0.18
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
Signature _____ [Electronically Filed] Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.09
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Postage	Category/Type	Transaction ID : SE.4761
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN Reeves RAESE		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 2168.61		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.09
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Postage	Category/Type	Transaction ID : SE.4762
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Snuffer		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 305.60		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	0.18
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
Signature

[Electronically Filed] Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 2.37
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4763	
Purpose of Expenditure Fuel/Deliver Mailings	Category/Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MANCHIN III		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2170.98		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 2.37
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4764	
Purpose of Expenditure Fuel/Deliver Mailings	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 805.37		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	4.74
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
07 / 13 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 2.37
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Fuel/Deliver Mailings	Category/Type []	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: SHEIRL LEE FLETCHER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought [] 2173.35		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : SE.4765

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 2.37
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Fuel/Deliver Mailings	Category/Type []	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN Reeves RAESE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought [] 2175.72		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Transaction ID : SE.4766

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	4.74
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	[]
(c) TOTAL Independent Expenditures.....▶	[]

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
07 / 13 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.79
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4767	
Purpose of Expenditure Fuel/Deliver Mailings	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Snuffer		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 306.39		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 1.33
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4768	
Purpose of Expenditure Fuel/Deliver Mailings	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID B MCKINLEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 244.67		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	2.12
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
07 / 13 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.37
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4769	
Purpose of Expenditure Postage and Printing	Category/ Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MANCHIN III		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2176.09		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M M / D D D / Y Y Y Y Y Y 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.37
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4770	
Purpose of Expenditure Postage and Printing	Category/ Type	Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: NEWT GINGRICH		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 805.74		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	0.74
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
Signature

[Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
07 / 13 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.37
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4771	
Purpose of Expenditure Postage and Printing	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Ron Paul		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 806.11		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.37
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4772	
Purpose of Expenditure Postage and Printing	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CHARLES E. ROEMER III		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 806.48		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	0.74
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.37
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4773	
Purpose of Expenditure Postage and Printing	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 806.85		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.37
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4774	
Purpose of Expenditure Postage and Printing	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: RICHARD J SANTORUM		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 807.22		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	0.74
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Mary Anne Buchanan [Electronically Filed] Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.37
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4775	
Purpose of Expenditure Postage and Printing	Category/Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: SHEIRL LEE FLETCHER		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2176.46		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date MM / DD / YYYY 05 / 31 / 2012
Mailing Address 25 Canyon Rd		Amount 0.28
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4776	
Purpose of Expenditure Postage and Printing	Category/Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN Reeves RAESE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2176.74		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	0.65
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature Mary Anne Buchanan [Electronically Filed] Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc. [MEMO ITEM]		Date M M M / D D D / Y Y Y Y Y Y 06 / 17 / 2012
Mailing Address 25 Canyon Rd		Amount 1.98 Transaction ID : SE.4783
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Postage and Printing	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc. [MEMO ITEM]		Date M M M / D D D / Y Y Y Y Y Y 06 / 17 / 2012
Mailing Address 25 Canyon Rd		Amount 1.97 Transaction ID : SE.4784
City Morgantown	State Zip Code WV 26508	
Purpose of Expenditure Postage and Printing	Category/Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MANCHIN III		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan
Signature **[Electronically Filed]** Date **07 / 13 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc. [MEMO ITEM]		Date MM / DD / YYYY 06 / 17 / 2012
Mailing Address 25 Canyon Rd		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1.98</div>
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4785	
Purpose of Expenditure Postage and Printing	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>		2012

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc. [MEMO ITEM]		Date MM / DD / YYYY 06 / 17 / 2012
Mailing Address 25 Canyon Rd		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1.98</div>
City Morgantown	State WV	
Zip Code 26508	Transaction ID : SE.4786	
Purpose of Expenditure Postage and Printing	Category/ Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN Reeves RAESE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>		2012

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY
07 / 13 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc.		Date M M / D D / Y Y Y Y 06 / 17 / 2012
[MEMO ITEM]		Amount 1.98
Mailing Address 25 Canyon Rd		
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Postage and Printing	Category/ Type 	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID B MCKINLEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 0.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : SE.4787

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc State PAC Fund		Date M M / D D / Y Y Y Y 04 / 24 / 2012
Mailing Address 25 Canyon Rd		Amount 83.23
City Morgantown	State WV	
Purpose of Expenditure Payment	Category/ Type 	Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: NICK JOE II RAHALL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 83.23		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : SE.4429

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	83.23
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Mary Anne Buchanan

Signature [Electronically Filed] Date M M / D D / Y Y Y Y
07 / 13 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) WEST VIRGINIANS FOR LIFE INC POLITICAL ACTION COMMITTEE	FEC IDENTIFICATION NUMBER ▼ C C00157537
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc State PAC Fund		Date MM / DD / YYYY 04 / 26 / 2012
Mailing Address 25 Canyon Rd		Amount 166.53
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Postage	Category/ Type	Transaction ID : SE.4675
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN Reeves RAESE		Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 1482.07		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee West Virginians for Life, Inc State PAC Fund		Date MM / DD / YYYY 04 / 26 / 2012
Mailing Address 25 Canyon Rd		Amount 108.35
City Morgantown	State WV	Zip Code 26508
Purpose of Expenditure Postage	Category/ Type	Transaction ID : SE.4676
Name of Federal Candidate Supported or Opposed by Expenditure: Rick Snuffer		Office Sought: <input checked="" type="checkbox"/> House State: WV <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 224.51		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	274.88
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	4652.23

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Mary Anne Buchanan

Signature _____ [Electronically Filed] Date MM / DD / YYYY **07 / 13 / 2012**