Image# 202204059495940204				PAGE 1 / 5
FEC FORM 1	STATEMEI ORGANIZ		0#	
1. NAME OF	(Check if name	Example: If typing, type		e Use Only
COMMITTEE (in full)	is changed)	over the lines.	12FE4M5	
Voters for West	/irginia Values			
ADDRESS (number and street)	2001 Main Street			
(Check if address	#301			
is changed)	Wheeling	· · · · · · · · · · · · · · · · · · ·	WV 26003	······································
			L L STATE ▲	ZIP CODE
COMMITTEE'S E-MAIL ADDRE	ESS			
(Check if address is changed)	info@votersforwvvalue	es.com		
<i>,</i>	Optional Second E-Mail Ad			
	les@leswilliamson.c	om		
COMMITTEE'S WEB PAGE AD (Check if address is changed)	votersforwvvalues.com			
2. DATE 04 0	5 [/] ^Y ^Y ^Y ^Y ^Y ^Y ^Y			
3. FEC IDENTIFICATION N	UMBER ► C C	00811620		
4. IS THIS STATEMENT	NEW (N) OR	AMENDED (A)		
I certify that I have examined t	his Statement and to the best	of my knowledge and belief it	is true, correct and c	omplete.
Type or Print Name of Treasure	er Williamson, Les, , ,			
Signature of Treasurer	amson, Les, , ,	[Electronically Filed]	Date 04 /	05 / Y Y Y Y 2022
NOTE: Submission of false, erron		may subject the person signing to ON SHOULD BE REPORTED W		enalties of 2 U.S.C. §437g.
Office Use Only		For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100	on F	EC FORM 1 (Revised 06/2012)

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FEC	C Form 1 (Revised 02/2009)	Page 2
TYPE C	DF COMMITTEE	
Candio	date Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Comp information below.)	lete the candidate
Name o Candida		
Candida Party Af		State District
(C)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candida		
Party (Committee:	
(d)		Democratic, epublican, etc.) Part
Politic	al Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its conn	ected organization is
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate seg committee. (i.e., nonconnected committee)	regated fund or part
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint F	undraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	or more political
C	Committees Participating in Joint Fundraiser	
1	1 FEC ID number C	
2	2.	
3	3 FEC ID number	
2	4	

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FEC Form 1 (Revised 02/2009)

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Write or Type Committee Name

Voters for West Virginia Values

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

Mailing Address			
	CITY	STATE	ZIP CODE
Relationship: Connected	d Organization Affiliated Committee Joint Fundrais	sing Representative	Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Williamsor	, Les, , ,
Full Name	
Mailing Address	2001 Main Street
	#301
	Wheeling WV 26003
Title or Position	CITY STATE ZIP CODE
Treasurer	Telephone number 214 676 7442

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer	Williamson, Les, , ,
Mailing Address	2001 Main Street
	#301
	Wheeling
	CITY STATE ZIP CODE
Title or Position Treasurer	Telephone number 214 676 7442

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Full Name of Designated Agent														I									1			
Mailing Address																										
																			L				_			
						C	:IT)	(STA	ΤE				ZII	ΡC	OD	ιE		
Title or Position																										
											Tele	eph	one	e ni	umt	ber										

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

Chain	Bridge Bank, NA	
Mailing Address	1445-A Laughlin Avenue	
	McLean	VA 22101 – L
	CITY	STATE ZIP CODE
Name of Bank, Depository,	etc.	
Mailing Address		
	CITY	STATE ZIP CODE

:97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

Form/Schedule: F1N Transaction ID :

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Form/Schedule: Transaction ID: