

# FEC FORM 3

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

12FE4M5

SNUFFER U.S. CONGRESS

ADDRESS (number and street) 1514 SOUTH KANAWHA STREET

SUITE A

Check if different than previously reported. (ACC)

BECKLEY

WV

25801

2. FEC IDENTIFICATION NUMBER ▼

C C00514059

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

WV

03

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- Termination Report (TER)

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

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

Election on MM / DD / YYYY in the State of

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

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

Election on MM / DD / YYYY in the State of

5. Covering Period

MM / DD / YYYY through MM / DD / YYYY  
01 / 01 / 2013 through 03 / 31 / 2013

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

Type or Print Name of Treasurer NATHAN EDDINS SNUFFER

Signature of Treasurer NATHAN EDDINS SNUFFER [Electronically Filed] Date

MM / DD / YYYY  
04 / 15 / 2013

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

|                 |  |  |  |  |  |  |  |  |  |
|-----------------|--|--|--|--|--|--|--|--|--|
| Office Use Only |  |  |  |  |  |  |  |  |  |
|-----------------|--|--|--|--|--|--|--|--|--|

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name  
**SNUFFER U.S. CONGRESS**

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

|   | COLUMN A<br>This Period | COLUMN B<br>Election Cycle-to-Date |
|---|-------------------------|------------------------------------|
| 6. Net Contributions (other than loans)   |                         |                                    |
| (a) Total Contributions<br>(other than loans) (from Line 11(e))....   | 1091.87                 | 5591.87                            |
| (b) Total Contribution Refunds<br>(from Line 20(d)) .....   | 0.00                    | 3000.00                            |
| (c) Net Contributions (other than loans)<br>(subtract Line 6(b) from Line 6(a)).....                            | 1091.87                 | 2591.87                            |
| 7. Net Operating Expenditures   |                         |                                    |
| (a) Total Operating Expenditures<br>(from Line 17) .....  | 221.00                  | 10978.25                           |
| (b) Total Offsets to Operating<br>Expenditures (from Line 14).....  | 0.00                    | 0.00                               |
| (c) Net Operating Expenditures<br>(subtract Line 7(b) from Line 7(a)).....                                      | 221.00                  | 10978.25                           |
| 8. Cash on Hand at Close of<br>Reporting Period (from Line 27).....   | 169.06                  |                                    |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D).....  | 0.00                    |                                    |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D)..... | 1045.76                 |                                    |

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

**SNUFFER U.S. CONGRESS**

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

| I. RECEIPTS   | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|---|-------------------------------|------------------------------------|
| 11. CONTRIBUTIONS (other than loans) FROM:  |                               |                                    |
| (a) Individuals/Persons Other Than Political Committees   |                               |                                    |
| (i) Itemized (use Schedule A).....  | 0.00                          | 2500.00                            |
| (ii) Unitemized.....  | 0.00                          | 0.00                               |
| (iii) TOTAL of contributions from individuals ▶   | 0.00                          | 2500.00                            |
| (b) Political Party Committees.....   | 0.00                          | 0.00                               |
| (c) Other Political Committees (such as PACs).....  | 0.00                          | 2000.00                            |
| (d) The Candidate.....  | 1091.87                       | 1091.87                            |
| (e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..              | 1091.87                       | 5591.87                            |
| 12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....   |                               |                                    |
|   | 0.00                          | 0.00                               |
| 13. LOANS:  |                               |                                    |
| (a) Made or Guaranteed by the Candidate.....  | 0.00                          | 0.00                               |
| (b) All Other Loans.....  | 0.00                          | 0.00                               |
| (c) TOTAL LOANS (add Lines 13(a) and (b)).....  | 0.00                          | 0.00                               |
| 14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....                                 |                               |                                    |
|   | 0.00                          | 0.00                               |
| 15. OTHER RECEIPTS (Dividends, Interest, etc.).....   |                               |                                    |
|   | 0.00                          | 0.00                               |
| 16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶ | 1091.87                       | 5591.87                            |

**DETAILED SUMMARY PAGE**  
of Disbursements

| II. DISBURSEMENTS  | COLUMN A<br>Total This Period | COLUMN B<br>Election Cycle-to-Date |
|--|-------------------------------|------------------------------------|
| 17. OPERATING EXPENDITURES.....  | 221.00                        | 10978.25                           |
| 18. TRANSFERS TO OTHER<br>AUTHORIZED COMMITTEES .....                        | 0.00                          | 0.00                               |
| 19. LOAN REPAYMENTS:   |                               |                                    |
| (a) Of Loans Made or Guaranteed<br>by the Candidate.....                     | 0.00                          | 0.00                               |
| (b) Of All Other Loans .....   | 0.00                          | 0.00                               |
| (c) TOTAL LOAN REPAYMENTS<br>(add Lines 19(a) and (b)).....                  | 0.00                          | 0.00                               |
| 20. REFUNDS OF CONTRIBUTIONS TO:   |                               |                                    |
| (a) Individuals/Persons Other<br>Than Political Committees .....             | 0.00                          | 3000.00                            |
| (b) Political Party Committees.....  | 0.00                          | 0.00                               |
| (c) Other Political Committees<br>(such as PACs).....                        | 0.00                          | 0.00                               |
| (d) TOTAL CONTRIBUTION REFUNDS<br>(add Lines 20(a), (b), and (c)).....       | 0.00                          | 3000.00                            |
| 21. OTHER DISBURSEMENTS .....  | 0.00                          | 0.00                               |
| 22. <b>TOTAL DISBURSEMENTS</b><br>(add Lines 17, 18, 19(c), 20(d), and 21) ► | 221.00                        | 13978.25                           |

**III. CASH SUMMARY**

|   |         |
|---|---------|
| 23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....                                | -701.81 |
| 24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....                            | 1091.87 |
| 25. SUBTOTAL (add Line 23 and Line 24).....   | 390.06  |
| 26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....                               | 221.00  |
| 27. CASH ON HAND AT CLOSE OF REPORTING PERIOD<br>(subtract Line 26 from Line 25)..... | 169.06  |

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

|   |  |             |
|---|--|-------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)   | PAGE 5 OF 9 |
|   | <input type="checkbox"/> 11a<br>12 <input type="checkbox"/> 11b<br>13a <input type="checkbox"/> 11c<br>13b <input checked="" type="checkbox"/> 11d<br>14 <input type="checkbox"/> 15 |             |

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

NAME OF COMMITTEE (In Full)  
**SNUFFER U.S. CONGRESS**

**A.** Full Name (Last, First, Middle Initial)  
**RICHARD SNUFFER**

Mailing Address 1514 SOUTH KANAWHA STREET

City State Zip Code  
BECKLEY WV 25801

FEC ID number of contributing federal political committee. **C** H4WV03047

Name of Employer Occupation  
RICK SNUFFER CONSTRUCTION OWNER

Receipt For: 2012  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1091.87

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 28 2013

**Transaction ID : SA11D.1232**

Amount of Each Receipt this Period  
1091.87

**B.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

1091.87

1091.87

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

|   |   |             |
|---|---|-------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER:<br>(check only one)  | PAGE 6 OF 9 |
|   | <input checked="" type="checkbox"/> 17<br>20a <input type="checkbox"/> 18<br>20b <input type="checkbox"/> 19a<br>20c <input type="checkbox"/> 19b<br>21 |             |

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NAME OF COMMITTEE (In Full)  
**SNUFFER U.S. CONGRESS**

|  |  |  |
|--|--|--|
| Full Name (Last, First, Middle Initial)<br><b>A. BB&amp;T</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>01 / 10 / 2013                          |
| Mailing Address 123 MAIN STREET  |  | Amount of Each Disbursement this Period<br>130.00<br><b>Transaction ID : SB17.1233</b> |
| City CHARLESTON State WV Zip Code 12345  | Purpose of Disbursement BANK FEES<br>Candidate Name<br>Category/Type 001 |  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District:   |  |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B. BB&amp;T</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>02 / 21 / 2013                         |
| Mailing Address 123 MAIN STREET  |  | Amount of Each Disbursement this Period<br>25.00<br><b>Transaction ID : SB17.1234</b> |
| City CHARLESTON State WV Zip Code 12345  | Purpose of Disbursement BANK FEES<br>Candidate Name<br>Category/Type 001 |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District:   |   |

|  |  |   |
|--|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C. BB&amp;T</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>03 / 21 / 2013                         |
| Mailing Address 123 MAIN STREET  |  | Amount of Each Disbursement this Period<br>25.00<br><b>Transaction ID : SB17.1235</b> |
| City CHARLESTON State WV Zip Code 12345  | Purpose of Disbursement BANK FEES<br>Candidate Name<br>Category/Type 001 |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | State: District:   |   |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 180.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |        |

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

|   |   |                                    |                                     |                                    |
|---|---|------------------------------------|-------------------------------------|------------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)             |                                    | PAGE 7 OF 9                         |                                    |
|   | <input checked="" type="checkbox"/> 17<br>20a | <input type="checkbox"/> 18<br>20b | <input type="checkbox"/> 19a<br>20c | <input type="checkbox"/> 19b<br>21 |

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NAME OF COMMITTEE (In Full)  
**SNUFFER U.S. CONGRESS**

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>A. RED PLEDGE</b>   |  | Date of Disbursement<br>M M / D D / Y Y Y Y<br>01 / 28 / 2013 |
| Mailing Address 530 LAKE MORTON DRIVE   |  | Amount of Each Disbursement this Period<br>14.00              |
| City LAKELAND   | State FL Zip Code 33801  |   |
| Purpose of Disbursement<br>TRANSACTION FEES   | Category/Type<br>001   | <b>Transaction ID : SB17.1230</b>                             |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>B.</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y |
| Mailing Address   |  | Amount of Each Disbursement this Period     |
| City  | State Zip Code   |   |
| Purpose of Disbursement   | Category/Type  |   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |  |   |
|---|--|---|
| Full Name (Last, First, Middle Initial)<br><b>C.</b>  |  | Date of Disbursement<br>M M / D D / Y Y Y Y |
| Mailing Address   |  | Amount of Each Disbursement this Period     |
| City  | State Zip Code   |   |
| Purpose of Disbursement   | Category/Type  |   |
| Candidate Name  |  |   |
| Office Sought:<br><input type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) |   |
| State: District:  |  |   |

|   |        |
|---|--------|
| <b>SUBTOTAL</b> of Disbursements This Page (optional).....      | 14.00  |
| <b>TOTAL</b> This Period (last page this line number only)..... | 194.00 |

**SCHEDULE C (FEC Form 3)**  
**LOANS**

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4**  
**SNUFFER U.S. CONGRESS**

**LOAN SOURCE** Full Name (Last, First, Middle Initial) **[PERSONAL FUNDS]** Election: 2012  
**RICHARD SNUFFER**  Primary  
 Mailing Address General  
 1514 SOUTH KANAWHA STREET  Other (specify) ▼

City State ZIP Code  
 BECKLEY WV 25801

|                         |                            |   |
|-------------------------|----------------------------|---|
| Original Amount of Loan | Cumulative Payment To Date | Balance Outstanding at Close of This Period |
| 815.00                  | 0.00                       | 815.00                                      |

**TERMS**

|                |            |               |   |
|----------------|------------|---------------|---|
| Date Incurred  | Date Due   | Interest Rate | Secured:  |
| 03 / 09 / 2012 | 12/31/2012 | 0.00 % (apr)  | <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |

List All Endorsers or Guarantors (if any) to Loan Source

|  |                                    |
|--|------------------------------------|
| 1. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 2. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 3. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |
| 4. Full Name (Last, First, Middle Initial) | Name of Employer                   |
| Mailing Address                            | Occupation                         |
| City State ZIP Code                        | Amount Guaranteed Outstanding: [ ] |

|  |        |
|--|--------|
| <b>SUBTOTALS</b> This Period This Page (optional).....       | 815.00 |
| <b>TOTALS</b> This Period (last page in this line only)..... | 815.00 |

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



**SCHEDULE D (FEC Form 3)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

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

NAME OF COMMITTEE (In Full)

**SNUFFER U.S. CONGRESS**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor  
**RICHARD SNUFFER**

Mailing Address 1514 SOUTH KANAWHA STREET

City State Zip Code  
 BECKLEY WV 25801

Nature of Debt (Purpose):  
 OFFICE SUPPLIES

|   |                                |   |
|---|--------------------------------|---|
| Outstanding Balance Beginning This Period | <b>Transaction ID : SD10.2</b> |   |
| 230.76                                    | Amount Incurred This Period    | Payment This Period                         |
|   | 0.00                           | 0.00  |
|   |                                | Outstanding Balance at Close of This Period |
|   |                                | 230.76                                      |

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

|   |                             |                     |   |
|---|-----------------------------|---------------------|---|
| Outstanding Balance Beginning This Period | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
|   |                             |                     |   |

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Mailing Address

City State Zip Code

Nature of Debt (Purpose):

|   |                             |                     |   |
|---|-----------------------------|---------------------|---|
| Outstanding Balance Beginning This Period | Amount Incurred This Period | Payment This Period | Outstanding Balance at Close of This Period |
|   |                             |                     |   |

|  |         |
|--|---------|
| 1) <b>SUBTOTALS</b> This Period This Page (optional) .....                                       | 230.76  |
| 2) <b>TOTALS</b> This Period (last page this line number only) .....                             | 230.76  |
| 3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only).....                          | 815.00  |
| 4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶ | 1045.76 |