

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

M M /

D D /

Y Y Y Y

in the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

M M / 11

D D / 06

Y Y Y Y / 2012

in the State of

WV

5. Covering Period

M M / 10

D D / 18

Y Y Y Y / 2012

through

M M / 11

D D / 26

Y Y Y Y / 2012

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

M M / 12

D D / 06

Y Y Y Y / 2012

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

FEC FORM 3 (Revised 02/2003)

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

SNUFFER U.S. CONGRESS

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 18 / 2012 To: M M / D D / Y Y Y Y 11 / 26 / 2012

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))	62522.33	579926.68
(b) Total Contribution Refunds (from Line 20(d))	3000.00	2500.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	59522.33	577426.68
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	138022.95	579591.95
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	70.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	138022.95	579521.95
8. Cash on Hand at Close of Reporting Period (from Line 27)	2520.29	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on 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

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

- If the candidate participated in the general election, use this form for the 30-day Post-General report.
- If the candidate did NOT participate in the general election, use this form for the Year-end report covering through December 31 of the election year (due on January 31).

This form is used in lieu of filling out Line Numbers 6 through 7 on Page 2 (Summary Page) and Pages 3 and 4 (the Detailed Summary Page) for the last report filed by a candidate during the current election cycle.

Write or Type Committee Name

SNUFFER U.S. CONGRESS

Report Covering the Period: From: 10 / 18 / 2012 To: 11 / 26 / 2012

I. RECEIPTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of 11 / 06 / 2012 (date of general election)	COLUMN C Total for 11 / 07 / 2012 (date after general election) through 11 / 26 / 2012 (last day of reporting period)
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other than Political Committees		
(i) Itemized (use Schedule A)		
34599.00	348206.58	2500
(ii) Unitemized		
1610.00	30106.77	0
(iii) Total of contributions from individuals		
36209.00	378313.35	2500
(b) Political Party Committees		
5000.00	5050.00	0
(c) Other Political Committees		
21313.33	196563.33	2000

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 4 / 39

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
(d) The Candidate		
0.00	0.00	0
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c) and (d))		
62522.33	579926.68	4500
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		
0.00	9835.71	0
13. LOANS:		
(a) Made or Guaranteed by the Candidate		
0.00	815.00	0
(b) All Other Loans		
0.00	0.00	0
(c) TOTAL LOANS (add Lines 13(a) and (b))		
0.00	815.00	0
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, rebates, etc.)		
0.00	70.00	0
15. OTHER RECEIPTS (Dividends, Interest, etc.)		
0.00	0.00	0
16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)		
62522.33	590647.39	4500

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

Write or Type Committee Name

SNUFFER U.S. CONGRESS

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

II. DISBURSEMENTS

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
17. OPERATING EXPENDITURES		
<input type="text" value="138022.95"/>	<input type="text" value="579591.95"/>	<input type="text" value="7535.15"/>
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0"/>
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0"/>
(b) Of All Other Loans		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0"/>
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and 19(b))		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0"/>
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees		
<input type="text" value="3000.00"/>	<input type="text" value="2500.00"/>	<input type="text" value="3000"/>
(b) Political Party Committees		
<input type="text" value="0.00"/>	<input type="text" value="0.00"/>	<input type="text" value="0"/>

POST-ELECTION DETAILED SUMMARY PAGE

Report of Receipts and Disbursements

FEC Form 3 (Revised 1/01)

PAGE 6 / 39

COLUMN A Total this Period	COLUMN B Election Cycle Total as of * (date of general election) (* See page 5 for date)	COLUMN C Total for * (date after general election) through * (last day of reporting period) (* See page 5 for dates)
-------------------------------	---	---

(c) Other Political Committees (such as PACs)

0.00	0.00	0
------	------	---

(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b) and (c))

3000.00	2500.00	3000
---------	---------	------

21. OTHER DISBURSEMENTS

0.00	0.00	0
------	------	---

22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d) and 21)

141022.95	582091.95	10535.15
-----------	-----------	----------

III. NET CONTRIBUTIONS (OTHER THAN LOANS)

(Note: Substitute in lieu of Line #6 of Summary Page for this report only; subtract Line 20(d) from Line 11(e))

59522.33	577426.68	1500.00
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IV. NET OPERATING EXPENDITURES

(Note: Substitute in lieu of Line #7 of Summary Page for this report only; subtract Line 14 from Line 17)

138022.95	579521.95	7535.15
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V. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	81020.91
24. TOTAL RECIEPTS THIS PERIOD (from Line 16).....	62522.33
25. SUBTOTAL (add Line 23 and Line 24).....	143543.24
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	141022.95
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)	2520.29

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 39
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 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)
LEALA ADKINS

Mailing Address **PO BOX 1174**

City **GILBERT** State **WV** Zip Code **25621**

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

Name of Employer **LBC BOOKKEEPING** Occupation **SECRETARY**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 22 / 2012

Transaction ID : SA11AI.702

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
R. ROBERT BAUGHAN JR

Mailing Address **126 WEST PACES RD**

City **MOORESVILLE** State **NC** Zip Code **28117**

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

Name of Employer **THE BAUGHAN GROUP** Occupation **EXECUTIVE**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **4000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 17 / 2012

Transaction ID : SA11AI.743

Amount of Each Receipt this Period
4000.00

**[MEMO ITEM]
AS PREVIOUSLY REPORTED**

C. Full Name (Last, First, Middle Initial)
R. ROBERT BAUGHAN JR

Mailing Address **126 WEST PACES RD**

City **MOORESVILLE** State **NC** Zip Code **28117**

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

Name of Employer **THE BAUGHAN GROUP** Occupation **EXECUTIVE**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 25 / 2012

Transaction ID : SA11AI.1210

Amount of Each Receipt this Period
-1500.00

**[MEMO ITEM]
REATTRIBUTED TO BAUGHAN, SHEILA**

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 39
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

A. Full Name (Last, First, Middle Initial)
SHEILA L BAUGHAN

Mailing Address 126 WEST PACES RD

City MOORESVILLE State NC Zip Code 28117

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 25 / 2012

Transaction ID : SA11AI.1211

Amount of Each Receipt this Period
1500.00

[MEMO ITEM]
REATTRIBUTED FROM BAUGHAN, R. ROBERT JR

B. Full Name (Last, First, Middle Initial)
EDWARD BELL

Mailing Address 1713 SASSAFRASS RD

City WEST COLUMBIA State WV Zip Code 25287

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

Name of Employer SELF EMPLOYED Occupation CONTRACTOR

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 14 / 2012

Transaction ID : SA11AI.1197

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
CAROLYN BLANKENSHIP

Mailing Address RR 52, BOX 1782

City GILBERT State WV Zip Code 25621

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2012

Transaction ID : SA11AI.701

Amount of Each Receipt this Period
2000.00

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

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

4500.00

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

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

FOR LINE NUMBER: PAGE 9 OF 39
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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

A. Full Name (Last, First, Middle Initial)
DARREN M CAMPF

Mailing Address 4428 IRISH HEIGHTS DR

City State Zip Code
SUMMERSVILLE WV 26651

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

Name of Employer Occupation
BRIGHT ENTERPRISES, INC. INVESTMENTS

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 19 / 2012

Transaction ID : SA11AI.692

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
COMMUNITY FIRST RADIO, INC.

Mailing Address PO BOX 10

City State Zip Code
MULLENS WV 25882

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 28 / 2012

Transaction ID : SA11AI.1140

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
ERKAN ESMER

Mailing Address 189 WEST RIVERSIDE DR

City State Zip Code
CHARLTON HEIGHTS WV 25040

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

Name of Employer Occupation
ESMER & ASSOCIATES, INC. ENGINEER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2012

Transaction ID : SA11AI.1161

Amount of Each Receipt this Period
250.00

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

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

1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 39
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

A. Full Name (Last, First, Middle Initial)
JAMES FLETCHER

Mailing Address 7 TORCHWOOD LN

City State Zip Code
KEY LARGO FL 33037

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

Name of Employer Occupation
J.H. FLETCHER & CO. CHAIRMAN

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 02 / 2012

Transaction ID : SA11AI.1193

Amount of Each Receipt this Period
1250.00

B. Full Name (Last, First, Middle Initial)
NANCY R FOSTER

Mailing Address PO BOX 467

City State Zip Code
SCOTT DEPOT WV 25560

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 28 / 2012

Transaction ID : SA11AI.1138

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
DRYKE J HUTCHISON

Mailing Address 700 W MORSE BLVD STE 201

City State Zip Code
WINTER PARK FL 32789

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 28 / 2012

Transaction ID : SA11AI.1135

Amount of Each Receipt this Period
2000.00

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

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

3750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 39
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

A. Full Name (Last, First, Middle Initial)
JOE D. ISON

Mailing Address **28 BLUEBIRD LANE**

City **BECKLEY** State **WV** Zip Code **25801**

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

Name of Employer
INFORMATION REQUESTED

Occupation
INFORMATION REQUESTED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
10 / 28 / 2012

Transaction ID : SA11AI.1136

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
ARTHUR L KING

Mailing Address **748 MYRTLE RD**

City **CHARLESTON** State **WV** Zip Code **25314**

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

Name of Employer
KSC MANAGEMENT

Occupation
OWNER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
10 / 31 / 2012

Transaction ID : SA11AI.1156

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
VIRGINIA L KING

Mailing Address **748 MYRTLE RD**

City **CHARLESTON** State **WV** Zip Code **25314**

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

Name of Employer
KSC MANAGEMENT

Occupation
OWNER

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
10 / 31 / 2012

Transaction ID : SA11AI.1157

Amount of Each Receipt this Period
1000.00

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

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

3000.00

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

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

FOR LINE NUMBER: PAGE 12 OF 39
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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

A. Full Name (Last, First, Middle Initial)
LOWELL B MCCLUNG

Mailing Address **PO BOX 355**

City **CANVAS** State **WV** Zip Code **26662**

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

Name of Employer
INFORMATION REQUESTED

Occupation
INFORMATION REQUESTED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
10 / 19 / 2012

Transaction ID : SA11A1.691

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
ANGELA C MORRISON

Mailing Address **RR 52, BOX 650**

City **GILBERT** State **WV** Zip Code **25621**

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

Name of Employer
INFORMATION REQUESTED

Occupation
INFORMATION REQUESTED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
10 / 22 / 2012

Transaction ID : SA11A1.703

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
SARAH PEROT

Mailing Address **PO BOX 269014**

City **PLANO** State **TX** Zip Code **75026**

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

Name of Employer
INFORMATION REQUESTED

Occupation
INFORMATION REQUESTED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
10 / 22 / 2012

Transaction ID : SA11A1.704

Amount of Each Receipt this Period
2500.00

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

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

4500.00

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

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

FOR LINE NUMBER: PAGE 13 OF 39
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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

A. Full Name (Last, First, Middle Initial)
HENRY R PEROT III

Mailing Address 3916 GILLON AVE

City State Zip Code
DALLAS TX 75025

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2012

Transaction ID : SA11AI.705

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
SARAH C PEROT

Mailing Address 3916 GILLON AVE

City State Zip Code
DALLAS TX 75205

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2012

Transaction ID : SA11AI.706

Amount of Each Receipt this Period
2500.00

C. Full Name (Last, First, Middle Initial)
BONNIE S REED

Mailing Address 52925 SR 145

City State Zip Code
BEALLSVILLE OH 43716

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2012

Transaction ID : SA11AI.1168

Amount of Each Receipt this Period
400.00

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

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

5400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 39
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

A. Full Name (Last, First, Middle Initial)
LORI ROGERS

Mailing Address **HC 77 BOX 1D**

City **HINTON** State **WV** Zip Code **25951**

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

Name of Employer
INFORMATION REQUESTED

Occupation
INFORMATION REQUESTED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
398.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 29 / 2012

Transaction ID : SA11AI.1149

Amount of Each Receipt this Period
199.00

B. Full Name (Last, First, Middle Initial)
WILLIAM G SKEWES JR.

Mailing Address **RR 2, BOX 172D**

City **BLUEFIELD** State **VA** Zip Code **24605**

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

Name of Employer
INFORMATION REQUESTED

Occupation
INFORMATION REQUESTED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 29 / 2012

Transaction ID : SA11AI.1147

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
BENJAMIN STATLER

Mailing Address **5150 N. TAMIAMI TRAIL**

City **NAPLES** State **FL** Zip Code **34103**

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

Name of Employer
GULF COAST CAPITAL PARTNERS

Occupation
CEO

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 19 / 2012

Transaction ID : SA11AI.1218

Amount of Each Receipt this Period
2000.00

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

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

2699.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 39
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

A. Full Name (Last, First, Middle Initial)
HOLLY L TOLLIVER

Mailing Address 254 DINGESS BRANCH RD

City State Zip Code
BECKLEY WV 25801

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 02 / 2012

Transaction ID : SA11A1.1175

Amount of Each Receipt this Period
2500.00

B. Full Name (Last, First, Middle Initial)
CURT J TOLLIVER

Mailing Address 254 DINGESS BRANCH RD

City State Zip Code
BECKLEY WV 25801

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 02 / 2012

Transaction ID : SA11A1.1176

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
TERRI A TRENT

Mailing Address PO BOX 522

City State Zip Code
GILBERT WV 25621

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 22 / 2012

Transaction ID : SA11A1.700

Amount of Each Receipt this Period
2000.00

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

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

6000.00

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

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

FOR LINE NUMBER: PAGE 16 OF 39
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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

A. Full Name (Last, First, Middle Initial)
E.L. TRENT

Mailing Address **PO BOX 380**

City **MASON** State **WV** Zip Code **25260**

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

Name of Employer **SELF EMPLOYED** Occupation **DENTIST**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 28 / 2012

Transaction ID : SA11AI.1137

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
TWO VIRGINIAS MEDIA, INC.

Mailing Address **PO BOX 10**

City **MULLENS** State **WV** Zip Code **25882**

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

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 28 / 2012

Transaction ID : SA11AI.1139

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
SARAH C WADE

Mailing Address **340 SNOWCREST LANE**

City **POINT PLEASANT** State **WV** Zip Code **25550**

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

Name of Employer **INFORMATION REQUESTED** Occupation **INFORMATION REQUESTED**

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 06 / 2012

Transaction ID : SA11AI.1192

Amount of Each Receipt this Period
500.00

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

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

1750.00

34599.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 39
	<input type="checkbox"/> 11a 12 <input checked="" type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

A. Full Name (Last, First, Middle Initial)
REPUBLICAN NATIONAL COMMITTEE

Mailing Address 310 FIRST STREET SE

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing federal political committee. **C** C00003418

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 24 / 2012

Transaction ID : SA11B.1067

Amount of Each Receipt this Period
5000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify)

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).....

5000.00

5000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 39
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

A. Full Name (Last, First, Middle Initial)
ANDY HARRIS FOR CONGRESS

Mailing Address 13401 REDCOAT LN.

City PHOENIX State MD Zip Code 21131

FEC ID number of contributing federal political committee. **C** C00435974

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2012

Transaction ID : SA11C.1145

Amount of Each Receipt this Period
 _____ 1000.00

B. Full Name (Last, First, Middle Initial)
COTTON FOR CONGRESS

Mailing Address PO BOX 379

City DARDANELLE State AR Zip Code 72834

FEC ID number of contributing federal political committee. **C** C00499988

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 23 / 2012

Transaction ID : SA11C.710

Amount of Each Receipt this Period
 _____ 1000.00

C. Full Name (Last, First, Middle Initial)
FREEDOM ADVANCEMENT FUND

Mailing Address 2470 DANIELL'S BRIDGE RD STE 121

City ATHENS State GA Zip Code 30606

FEC ID number of contributing federal political committee. **C** C00490235

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2012

Transaction ID : SA11C.1148

Amount of Each Receipt this Period
 _____ 500.00

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

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

_____ 2500.00

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

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

FOR LINE NUMBER: PAGE 19 OF 39
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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

A. Full Name (Last, First, Middle Initial)
GRAVES FOR CONGRESS

Mailing Address **PO BOX 335**

City **CALHOUN** State **GA** Zip Code **30703**

FEC ID number of contributing federal political committee. **C C00462556**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
11 / 05 / 2012

Transaction ID : SA11C.1189

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
HOUSE CONSERVATIVES FUND

Mailing Address **228 S. WASHINGTON ST., STE. 115**

City **ALEXANDRIA** State **VA** Zip Code **22314**

FEC ID number of contributing federal political committee. **C C00326439**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 19 / 2012

Transaction ID : SA11C.689

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
MANY INDIVIDUAL CONSERVATIVES HELPING ELECT LEADERS EVERYWHERE (MICHELEPAC)

Mailing Address **PO BOX 251190**

City **WOODBURY** State **MN** Zip Code **55125**

FEC ID number of contributing federal political committee. **C C00486738**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
10 / 29 / 2012

Transaction ID : SA11C.1143

Amount of Each Receipt this Period
2500.00

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

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

4000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 39
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

A. Full Name (Last, First, Middle Initial)
MCCAUL FOR CONGRESS, INC

Mailing Address 815-A BRAZOS STREET
PMB 230

City State Zip Code
AUSTIN TX 78701

FEC ID number of contributing federal political committee. **C** C00392688

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 22 / 2012

Transaction ID : SA11C.707

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MCCAUL FOR CONGRESS, INC

Mailing Address 815-A BRAZOS STREET
PMB 230

City State Zip Code
AUSTIN TX 78701

FEC ID number of contributing federal political committee. **C** C00392688

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 06 / 2012

Transaction ID : SA11C.1191

Amount of Each Receipt this Period
1500.00

C. Full Name (Last, First, Middle Initial)
NATIONAL PRO-LIFE ALLIANCE PAC

Mailing Address 4521 WINDSOR ARMS CT

City State Zip Code
ANNANDALE VA 22003

FEC ID number of contributing federal political committee. **C** C00358051

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2012

Transaction ID : SA11C.1144

Amount of Each Receipt this Period
500.00

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

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

2500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 39
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

A. Full Name (Last, First, Middle Initial)
NEW PAC

Mailing Address P.O. BOX 7480

City State Zip Code
VISALIA CA 93290

FEC ID number of contributing federal political committee. **C** C00398750

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 02 / 2012

Transaction ID : SA11C.1186

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
REPUBLICAN OPERATION TO SECURE AND KEEP A MAJORITY (ROSKAM PAC)

Mailing Address P. O. BOX 1011

City State Zip Code
WHEATON IL 60187

FEC ID number of contributing federal political committee. **C** C00451294

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1332.65

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 18 / 2012

Transaction ID : SA11C.1220

Amount of Each Receipt this Period
1332.65

IN-KIND: TRAVEL EXPENSES

C. Full Name (Last, First, Middle Initial)
RIBBLE FOR CONGRESS

Mailing Address PO BOX 7200

City State Zip Code
APPLETON WI 54912

FEC ID number of contributing federal political committee. **C** C00463620

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 24 / 2012

Transaction ID : SA11C.713

Amount of Each Receipt this Period
2000.00

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

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

4332.65

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 39
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

A. Full Name (Last, First, Middle Initial)
TACO POLITICAL ACTION COMMITTEE

Mailing Address 6405 METCALF AVENUE, SUITE 503

City State Zip Code
SHAWNEE MISSION KS 66202

FEC ID number of contributing federal political committee. **C** C00330118

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 05 / 2012

Transaction ID : SA11C.1188

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
THE TEAPARTY.NET LEADERSHIP FUND

Mailing Address 4856 E BASELINE RD SUITE 103

City State Zip Code
MESA AZ 85206

FEC ID number of contributing federal political committee. **C** C00520825

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 05 / 2012

Transaction ID : SA11C.1190

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
VOICE FOR FREEDOM

Mailing Address 2700 CUMBERLAND PARKWAY, SUITE 150

City State Zip Code
ATLANTA GA 30339

FEC ID number of contributing federal political committee. **C** C00409805

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 05 / 2012

Transaction ID : SA11C.1187

Amount of Each Receipt this Period
1000.00

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

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

3000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 39
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

A. Full Name (Last, First, Middle Initial)
WILD AND WONDERFUL PAC

Mailing Address **PO BOX 651374**

City **POTOMAC FALLS** State **VA** Zip Code **20165**

FEC ID number of contributing federal political committee. **C C00489336**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
11 / 26 / 2012

Transaction ID : SA11C.1200

Amount of Each Receipt this Period
2000.00

B. Full Name (Last, First, Middle Initial)
YODER FOR CONGRESS, INC

Mailing Address **PO BOX 26742**

City **OVERLAND PARK** State **KS** Zip Code **66225**

FEC ID number of contributing federal political committee. **C C00472365**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1980.68

Date of Receipt
11 / 06 / 2012

Transaction ID : SA11C.1222

Amount of Each Receipt this Period
1980.68

IN-KIND: HOTEL, GAS, MEALS

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

Mailing Address **1101 WALNUT UNIT #1101**

City **KANSAS CITY** State **MO** Zip Code **64106**

FEC ID number of contributing federal political committee. **C C00497305**

Name of Employer Occupation

Receipt For: 2012
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
11 / 05 / 2012

Transaction ID : SA11C.1182

Amount of Each Receipt this Period
1000.00

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

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

4980.68

21313.33

**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 24 OF 39			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial)		Date of Disbursement											
A. BANKCARD		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>18</td> <td></td> <td>2012</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	10		18		2012
M M	/	D D	/	Y Y Y Y									
10		18		2012									
Mailing Address PO BOX 17813		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>RICHMOND</td> <td>VA</td> <td>23226</td> </tr> </table>		City	State	Zip Code	RICHMOND	VA	23226	<table border="1"> <tr> <td>272.80</td> </tr> </table>		272.80			
City	State	Zip Code											
RICHMOND	VA	23226											
272.80													
Purpose of Disbursement TRANSACTION FEES		Transaction ID : SB17.1173											
Candidate Name		Category/Type											
001													
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
B. BANKCARD		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>19</td> <td></td> <td>2012</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	10		19		2012
M M	/	D D	/	Y Y Y Y									
10		19		2012									
Mailing Address PO BOX 17813		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>RICHMOND</td> <td>VA</td> <td>23226</td> </tr> </table>		City	State	Zip Code	RICHMOND	VA	23226	<table border="1"> <tr> <td>978.60</td> </tr> </table>		978.60			
City	State	Zip Code											
RICHMOND	VA	23226											
978.60													
Purpose of Disbursement AIRFARE		Transaction ID : SB17.693											
Candidate Name		Category/Type											
001													
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:													

Full Name (Last, First, Middle Initial)		Date of Disbursement											
C. BANKCARD		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>05</td> <td></td> <td>2012</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	11		05		2012
M M	/	D D	/	Y Y Y Y									
11		05		2012									
Mailing Address PO BOX 17813		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>RICHMOND</td> <td>VA</td> <td>23226</td> </tr> </table>		City	State	Zip Code	RICHMOND	VA	23226	<table border="1"> <tr> <td>74.25</td> </tr> </table>		74.25			
City	State	Zip Code											
RICHMOND	VA	23226											
74.25													
Purpose of Disbursement TRANSACTION FEES		Transaction ID : SB17.1196											
Candidate Name		Category/Type											
001													
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:													

SUBTOTAL of Disbursements This Page (optional).....	1325.65
TOTAL 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 25 OF 39			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) A. BB&T		Date of Disbursement M M / D D / Y Y Y Y 11 / 21 / 2012
Mailing Address 123 MAIN STREET		Amount of Each Disbursement this Period 122.00
City CHARLESTON	State WV	
Zip Code 12345	Purpose of Disbursement BANK FEES	Transaction ID : SB17.1205
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. CARDINAL CONSULTING		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2012
Mailing Address 204 TREYSON LANE		Amount of Each Disbursement this Period 12619.42
City MORGANTOWN	State WV	
Zip Code 26508	Purpose of Disbursement SEE BELOW	Transaction ID : SB17.1177
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. CARDINAL CONSULTING		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2012
Mailing Address 204 TREYSON LANE		Amount of Each Disbursement this Period 7463.22
City MORGANTOWN	State WV	
Zip Code 26508	Purpose of Disbursement	Transaction ID : SB17.1178
Candidate Name	001 Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM] FUNDRAISING CONSULTING
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	12741.42
TOTAL 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 26 OF 39			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) A. DUNBAR PRINTING		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2012
Mailing Address 1310 OHIO AVENUE		Amount of Each Disbursement this Period 2627.10
City DUNBAR State WV Zip Code 25064	Purpose of Disbursement 001 Category/Type	
Candidate Name		Transaction ID : SB17.1179 [MEMO ITEM] PRINTING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. EMBASSY SUITES		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2012
Mailing Address 816 E LEE ST		Amount of Each Disbursement this Period 1210.14
City CHARLESTON State WV Zip Code 25301	Purpose of Disbursement 001 Category/Type	
Candidate Name		Transaction ID : SB17.1180 [MEMO ITEM] EVENT CATERING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) C. PULLMAN PLAZA		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2012
Mailing Address 101 3RD AVENUE		Amount of Each Disbursement this Period 669.98
City HUNTINGTON State WV Zip Code 25701	Purpose of Disbursement 001 Category/Type	
Candidate Name		Transaction ID : SB17.1181 [MEMO ITEM] EVENT CATERING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL 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 27 OF 39		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. JAKE DEVANTIER		Date of Disbursement M M / D D / Y Y Y Y 10 / 18 / 2012
Mailing Address 106 BALL STREET, APT. B		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.681
City BECKLEY State WV Zip Code 25801	Purpose of Disbursement STRATEGY CONSULTING Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) B. JAKE DEVANTIER		Date of Disbursement M M / D D / Y Y Y Y 10 / 31 / 2012
Mailing Address 106 BALL STREET, APT. B		Amount of Each Disbursement this Period 250.00 Transaction ID : SB17.1154
City BECKLEY State WV Zip Code 25801	Purpose of Disbursement STRATEGY CONSULTING Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

Full Name (Last, First, Middle Initial) C. DISCOVER		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2012
Mailing Address 123 MAIN		Amount of Each Disbursement this Period 424.89 Transaction ID : SB17.1212
City CHARLESTON State WV Zip Code 12345	Purpose of Disbursement TRAVEL, MEETING EXPENSE, OFFICE SUPPLIES Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	924.89
TOTAL 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 28 OF 39			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A. DISCOVER		M M / D D / Y Y Y Y 10 / 26 / 2012	
Mailing Address 123 MAIN		Amount of Each Disbursement this Period	
City CHARLESTON State WV Zip Code 12345		317.44	
Purpose of Disbursement TRAVEL, MEETING EXPENSE, OFFICE SUPPLIES		Transaction ID : SB17.1151	
Candidate Name		Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B. DISCOVER		M M / D D / Y Y Y Y 11 / 01 / 2012	
Mailing Address 123 MAIN		Amount of Each Disbursement this Period	
City CHARLESTON State WV Zip Code 12345		352.49	
Purpose of Disbursement TRAVEL, MEETING EXPENSE, OFFICE SUPPLIES		Transaction ID : SB17.1174	
Candidate Name		Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C. DISCOVER		M M / D D / Y Y Y Y 11 / 06 / 2012	
Mailing Address 123 MAIN		Amount of Each Disbursement this Period	
City CHARLESTON State WV Zip Code 12345		507.90	
Purpose of Disbursement TRAVEL, MEETING EXPENSE, OFFICE SUPPLIES		Transaction ID : SB17.1195	
Candidate Name		Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	1177.83
TOTAL 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 29 OF 39			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) A. DISCOVER		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2012
Mailing Address 123 MAIN		Amount of Each Disbursement this Period 496.57
City CHARLESTON	State WV	
Zip Code 12345	Purpose of Disbursement TRAVEL, MEETING EXPENSE, OFFICE SUPPLIES	Transaction ID : SB17.1206
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. DMM MEDIA		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address 3299 K STREET, NW		Amount of Each Disbursement this Period 10000.00
City WASHINGTON	State DC	
Zip Code 20001	Purpose of Disbursement STRATEGY CONSULTING	Transaction ID : SB17.1184
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PROFESSIONAL DATA SERVICES		Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2012
Mailing Address 2470 DANIELL'S BRIDGE ROAD, STE. 1		Amount of Each Disbursement this Period 2012.15
City ATHENS	State GA	
Zip Code 30606	Purpose of Disbursement COMPLIANCE CONSULTING & SOFTWARE	Transaction ID : SB17.699
Candidate Name	Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	12508.72
TOTAL 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 30 OF 39	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial)
A. PROFESSIONAL DATA SERVICES

Mailing Address 2470 DANIELL'S BRIDGE ROAD, STE. 1

City ATHENS State GA Zip Code 30606

Purpose of Disbursement COMPLIANCE CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 31 / 2012

Amount of Each Disbursement this Period: 2018.51

Transaction ID : SB17.1213

Category/Type: 001

Full Name (Last, First, Middle Initial)
B. REPUBLICAN OPERATION TO SECURE AND KEEP A MAJORITY (ROSKAM PAC)

Mailing Address P. O. BOX 1011

City WHEATON State IL Zip Code 60187

Purpose of Disbursement IN-KIND: TRAVEL EXPENSES

Candidate Name REPUBLICAN OPERATION TO SECURE AND KEEP A MAJORITY (ROSKAM PAC)

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 18 / 2012

Amount of Each Disbursement this Period: 1332.65

Transaction ID : SB17.1221

Category/Type:

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

Mailing Address 100 CROSSROADS MALL

City MOUNT HOPE State WV Zip Code 25880

Purpose of Disbursement OFFICE EQUIPMENT

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 10 / 18 / 2012

Amount of Each Disbursement this Period: 800.00

Transaction ID : SB17.1172

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional)..... 4151.16

TOTAL 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 31 OF 39		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. RICHARD SNUFFER		Date of Disbursement M M / D D / Y Y Y Y 10 / 26 / 2012
Mailing Address 1514 SOUTH KANAWHA STREET		Amount of Each Disbursement this Period 2700.00 Transaction ID : SB17.1153
City BECKLEY	State WV	
Zip Code 25801	Purpose of Disbursement SALARY	Category/ Type 001
Candidate Name RICHARD RAY MR. SNUFFER	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: WV District: 03	

Full Name (Last, First, Middle Initial) B. RICHARD SNUFFER		Date of Disbursement M M / D D / Y Y Y Y 11 / 07 / 2012
Mailing Address 1514 SOUTH KANAWHA STREET		Amount of Each Disbursement this Period 2760.00 Transaction ID : SB17.1194
City BECKLEY	State WV	
Zip Code 25801	Purpose of Disbursement SALARY	Category/ Type 001
Candidate Name RICHARD RAY MR. SNUFFER	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: WV District: 03	

Full Name (Last, First, Middle Initial) C. RICHARD SNUFFER		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2012
Mailing Address 1514 SOUTH KANAWHA STREET		Amount of Each Disbursement this Period 775.00 Transaction ID : SB17.1207
City BECKLEY	State WV	
Zip Code 25801	Purpose of Disbursement SEE BELOW	Category/ Type 001
Candidate Name RICHARD RAY MR. SNUFFER	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: WV District: 03	

SUBTOTAL of Disbursements This Page (optional).....	6235.00
TOTAL 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 32 OF 39			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) A. DAVID SNUFFER		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2012
Mailing Address 1514 S KANAWHA ST		Amount of Each Disbursement this Period 775.00
City BECKLEY	State WV	
Zip Code 25801	Purpose of Disbursement 001	Transaction ID : SB17.1208
Candidate Name	Category/Type	[MEMO ITEM] STRATEGY CONSULTING
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. W. EDWARD SNUFFER		Date of Disbursement M M / D D / Y Y Y Y 11 / 26 / 2012
Mailing Address 740 EDWARDS DRIVE		Amount of Each Disbursement this Period 845.00
City DANIELS	State WV	
Zip Code 25832	Purpose of Disbursement OFFICE MAINTENANCE & UTILITIES 001	Transaction ID : SB17.1209
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. DAVID SNUFFER		Date of Disbursement M M / D D / Y Y Y Y 10 / 19 / 2012
Mailing Address 1514 S KANAWHA ST		Amount of Each Disbursement this Period 3000.00
City BECKLEY	State WV	
Zip Code 25801	Purpose of Disbursement STRATEGY CONSULTING 001	Transaction ID : SB17.694
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3845.00
TOTAL 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 33 OF 39			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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

Full Name (Last, First, Middle Initial) A. DAVID SNUFFER			Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2012	
Mailing Address 1514 S KANAWHA ST			Amount of Each Disbursement this Period 278.57	
City BECKLEY	State WV	Zip Code 25801	Transaction ID : SB17.1185	
Purpose of Disbursement TRAVEL EXPENSES		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. DAVID SNUFFER			Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012	
Mailing Address 1514 S KANAWHA ST			Amount of Each Disbursement this Period 1500.00	
City BECKLEY	State WV	Zip Code 25801	Transaction ID : SB17.1204	
Purpose of Disbursement STRATEGY CONSULTING		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. STRATEGIC MEDIA SERVICES			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2012	
Mailing Address 3299 K STREET, NW			Amount of Each Disbursement this Period 37250.00	
City WASHINGTON	State DC	Zip Code 20001	Transaction ID : SB17.695	
Purpose of Disbursement MEDIA BUY		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	39028.57
TOTAL 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 34 OF 39			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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

Full Name (Last, First, Middle Initial) A. STRATEGIC MEDIA SERVICES			Date of Disbursement M M / D D / Y Y Y Y 10 / 23 / 2012	
Mailing Address 3299 K STREET, NW			Amount of Each Disbursement this Period 6175.00	
City WASHINGTON	State DC	Zip Code 20001	Transaction ID : SB17.712	
Purpose of Disbursement MEDIA PRODUCTION		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. STRATEGIC MEDIA SERVICES			Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2012	
Mailing Address 3299 K STREET, NW			Amount of Each Disbursement this Period 35785.00	
City WASHINGTON	State DC	Zip Code 20001	Transaction ID : SB17.1152	
Purpose of Disbursement MEDIA BUY		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. SUDDENLINK			Date of Disbursement M M / D D / Y Y Y Y 11 / 14 / 2012	
Mailing Address 6151 PALUXY DRIVE			Amount of Each Disbursement this Period 8.01	
City TYLER	State TX	Zip Code 75703	Transaction ID : SB17.1203	
Purpose of Disbursement TELEPHONE		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	41968.01
TOTAL 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 35 OF 39	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. THE TARRANCE GROUP			Date of Disbursement M M / D D / Y Y Y Y 10 / 25 / 2012	
Mailing Address 201 N. UNION STREET, STE. 410			Amount of Each Disbursement this Period 4998.00	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SB17.1070	
Purpose of Disbursement POLLING		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) B. THE THEODORE COMPANY			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2012	
Mailing Address PO BOX 320412			Amount of Each Disbursement this Period 5680.79	
City ALEXANDRIA	State VA	Zip Code 22320	Transaction ID : SB17.696	
Purpose of Disbursement SEE BELOW		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: _____	District: _____			

Full Name (Last, First, Middle Initial) C. THE THEODORE COMPANY			Date of Disbursement M M / D D / Y Y Y Y 10 / 22 / 2012	
Mailing Address PO BOX 320412			Amount of Each Disbursement this Period 5450.00	
City ALEXANDRIA	State VA	Zip Code 22320	Transaction ID : SB17.697	
Purpose of Disbursement		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		[MEMO ITEM] FUNDRAISING CONSULTING	
State: _____	District: _____			

SUBTOTAL of Disbursements This Page (optional).....	10678.79
TOTAL 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 36 OF 39	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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

Full Name (Last, First, Middle Initial) A. THE UPS STORE		Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2012
Mailing Address 1038 N. EISENHOWER DRIVE		Amount of Each Disbursement this Period 707.23
City BECKLEY State WV Zip Code 25801	Purpose of Disbursement SHIPPING Category/Type 001	
Candidate Name		Transaction ID : SB17.1217
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) B. TRAVIS R. SMITH GROUP		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2012
Mailing Address 1120 S EDISON ST		Amount of Each Disbursement this Period 750.00
City ARLINGTON State VA Zip Code 22204	Purpose of Disbursement STRATEGY CONSULTING Category/Type 001	
Candidate Name		Transaction ID : SB17.1183
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:		

Full Name (Last, First, Middle Initial) C. YODER FOR CONGRESS, INC		Date of Disbursement M M / D D / Y Y Y Y 11 / 06 / 2012
Mailing Address PO BOX 26742		Amount of Each Disbursement this Period 1980.68
City OVERLAND PARK State KS Zip Code 66225	Purpose of Disbursement IN-KIND: HOTEL, GAS, MEALS Category/Type	
Candidate Name KEVIN YODER		Transaction ID : SB17.1223
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: KS District: 03		

SUBTOTAL of Disbursements This Page (optional).....	3437.91
TOTAL This Period (last page this line number only).....	138022.95

**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 37 OF 39			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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

Full Name (Last, First, Middle Initial) A. COMMUNITY FIRST RADIO, INC.		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2012
Mailing Address PO BOX 10		Amount of Each Disbursement this Period 250.00 Transaction ID : SB20A.1215
City MULLENS	State WV	
Zip Code 25882	Purpose of Disbursement CONTRIBUTION REFUND	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) B. ICR CONTRACTING, LLC		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2012
Mailing Address 53132 SR 1490		Amount of Each Disbursement this Period 2500.00 Transaction ID : SB20A.1216
City NEFFS	State OH	
Zip Code 43940	Purpose of Disbursement CONTRIBUTION REFUND	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

Full Name (Last, First, Middle Initial) C. TWO VIRGINIAS MEDIA, INC.		Date of Disbursement M M / D D / Y Y Y Y 11 / 08 / 2012
Mailing Address PO BOX 10		Amount of Each Disbursement this Period 250.00 Transaction ID : SB20A.1214
City MULLENS	State WV	
Zip Code 25882	Purpose of Disbursement CONTRIBUTION REFUND	Category/ Type 010
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
State: District:	Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	3000.00
TOTAL This Period (last page this line number only).....	3000.00

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

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

General

Other (specify) ▼

Mailing Address

1514 SOUTH KANAWHA STREET

City

State

ZIP Code

BECKLEY

WV

25801

Original Amount of Loan

815.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

815.00

TERMS

Date Incurred

M 03 / D 09 / Y 2012

Date Due

M / D / Y 12/31/2012

Interest Rate

0.00 % (apr)

Secured:

Yes 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:

SUBTOTALS This Period This Page (optional)..... ▶

815.00

TOTALS 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 39 OF 39
	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	Transaction ID : SD10.2	
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) SUBTOTALS This Period This Page (optional)	230.76
2) TOTALS This Period (last page this line number only)	230.76
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	815.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	1045.76