

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**

For An Authorized Committee

RECEIVED.
SECRETARY OF THE SENATE12 APR 13 PM 4:44
Office Use Only1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

Raese for Senate

ADDRESS (number and street)

P.O. Box 262

Check if different
than previously
reported. (ACC)

Morgantown

WV

26507

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C C00182089

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

WV

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 Y Y
11 08 2016in the
State of

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



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y Y Y
11 08 2016in the
State of

5. Covering Period

M M / D D / Y Y Y Y Y Y
01 01 2012

through

M M / D D / Y Y Y Y Y Y
03 31 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 James Troy

Signature of Treasurer

James Troy

James Troy

Date

M M / D D / Y Y Y Y Y Y
04 15 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

Raese for Senate

Report Covering the Period:

From:

M M / D D / Y Y Y Y
01 / 01 / 2012

To:

M M / D D / Y Y Y Y
03 / 31 / 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))	104747.83	157673.48
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	104747.83	157673.48
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	30947.86	413472.52
(b) Total Offsets to Operating Expenditures (from Line 14)	0.00	37861.33
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	30947.86	375611.19
8. Cash on Hand at Close of Reporting Period (from Line 27)	118831.51	
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)	1440179.58	

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)

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Write or Type Committee Name

Raese for Senate

Report Covering the Period: From: MM / DD / YYYY 01 / 01 / 2012 To: MM / DD / YYYY 03 / 31 / 2012

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees	89357.83	112339.48
(i) Itemized (use Schedule A)	5390.00	5834.00
(ii) Unitemized	94747.83	118173.48
(iii) TOTAL of contributions from individuals ▶	0.00	0.00
(b) Political Party Committees	10000.00	10500.00
(c) Other Political Committees (such as PACs)	0.00	29000.00
(d) The Candidate	104747.83	157673.48
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..		
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate	42000.00	42000.00
(b) All Other Loans	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))	42000.00	42000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	37861.33
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	1443.23
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	146747.83	238978.04

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	30947.86	413472.52
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	40000.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	40000.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	300.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	30947.86	453772.52

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	3031.54
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	146747.83
25. SUBTOTAL (add Line 23 and Line 24).....	149779.37
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	30947.86
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	118831.51

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 OF 93
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 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)
Raese for Senate

Full Name (Last, First, Middle Initial)
DR. MARYBETH ANDREINI

A. Mailing Address **1250 WASHINGTON FARMS**

City State Zip Code
WHEELING WV 26003-6769

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation
DOCTOR

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

03 26 2012

Transaction ID : **SA11.11482**

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
MR. DAVID A. ATKINS

B. Mailing Address **414 COLD SPRING ROAD**

City State Zip Code
MORGANTOWN WV 26501-5805

FEC ID number of contributing
federal political committee.

C

Name of Employer
CITY CRANE, INC.

Occupation
OWNER

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

03 29 2012

Transaction ID : **SA11.11557**

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
MR. DANNY BALIKER

C. Mailing Address **1126 BLUE HORIZON DRIVE**

City State Zip Code
MORGANTOWN WV 26501-2063

FEC ID number of contributing
federal political committee.

C

Name of Employer
DANNY'S DOOR SERVICE

Occupation
OWNER

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

03 26 2012

Transaction ID : **SA11.11475**

Amount of Each Receipt this Period

500.00

CONTRIBUTION

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

2500.00

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

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 6 OF 93	
☒ 11a	☐ 11b	☐ 11c	☐ 11d
☐ 12	☐ 13a	☐ 13b	☐ 14
		☐ 15	

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NAME OF COMMITTEE (In Full)
Raese for Senate

A. Full Name (Last, First, Middle Initial) MR. BRIAN P. BLANKENSHIP		Date of Receipt MM / DD / YY 03 / 26 / 2012	
Mailing Address 1621 PRINCE ROAD		Transaction ID : SA11.11485	
City MORGANTOWN	State WV	Zip Code 26508-4217	Amount of Each Receipt this Period 2500.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer GREER INDUSTRIES, INC.	Occupation EXECUTIVE		
Receipt For: 2012 ☒ Primary ☐ General ☐ Other (specify)	Election Cycle-to-Date 2500.00		
B. Full Name (Last, First, Middle Initial) MRS. MICHEL MARRARA BLANKENSHIP		Date of Receipt MM / DD / YY 03 / 26 / 2012	
Mailing Address 1621 PRINCE ROAD		Transaction ID : SA11.11496	
City MORGANTOWN	State WV	Zip Code 26508-4217	Amount of Each Receipt this Period 2500.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer SPA ROMA	Occupation OWNER		
Receipt For: 2012 ☒ Primary ☐ General ☐ Other (specify)	Election Cycle-to-Date 2500.00		
C. Full Name (Last, First, Middle Initial) MS. KELLEY L. CHICO		Date of Receipt MM / DD / YY 03 / 26 / 2012	
Mailing Address 75 SHERATON DRIVE		Transaction ID : SA11.11521	
City WASHINGTON	State PA	Zip Code 15301-6619	Amount of Each Receipt this Period 500.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer SELF	Occupation NATURAL GAS/OIL INDUSTRY		
Receipt For: 2012 ☒ Primary ☐ General ☐ Other (specify)	Election Cycle-to-Date 500.00		
SUBTOTAL of Receipts This Page (optional).....		5500.00	
TOTAL This Period (last page this line number only).....			

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SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

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(check only one)			
☒ 11a	☐ 11b	☐ 11c	☐ 11d
☐ 12	☐ 13a	☐ 13b	☐ 14
		☐ 15	

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NAME OF COMMITTEE (In Full)
Raese for Senate

Full Name (Last, First, Middle Initial) MS. TAMMY COLE		Date of Receipt M M / D D / Y Y Y Y 03 30 2012	
Mailing Address 207 JADE DRIVE		Transaction ID : SA11.11560	
City MORGANTOWN	State WV	Zip Code 26508-4026	Amount of Each Receipt this Period 5000.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer REALITY FITNESS, LLC	Occupation PROPRIETOR		
Receipt For: 2012 ☒ Primary ☐ General ☐ Other (specify)	Election Cycle-to-Date 5000.00		
Full Name (Last, First, Middle Initial) MS. TAMMY COLE		Date of Receipt M M / D D / Y Y Y Y 03 30 2012	
Mailing Address 207 JADE DRIVE		Transaction ID : SA11.11560B	
City MORGANTOWN	State WV	Zip Code 26508-4026	Amount of Each Receipt this Period -2500.00 CONTRIBUTION [MEMO ITEM] REDESIGNATION TO GENERAL
FEC ID number of contributing federal political committee. C			
Name of Employer REALITY FITNESS, LLC	Occupation PROPRIETOR		
Receipt For: 2012 ☒ Primary ☐ General ☐ Other (specify)	Election Cycle-to-Date 5000.00		
Full Name (Last, First, Middle Initial) MS. TAMMY COLE		Date of Receipt M M / D D / Y Y Y Y 03 30 2012	
Mailing Address 207 JADE DRIVE		Transaction ID : SA11.11585	
City MORGANTOWN	State WV	Zip Code 26508-4026	Amount of Each Receipt this Period 2500.00 CONTRIBUTION [MEMO ITEM] REDESIGNATION FROM PRIMARY
FEC ID number of contributing federal political committee. C			
Name of Employer REALITY FITNESS, LLC	Occupation PROPRIETOR		
Receipt For: 2012 ☐ Primary ☒ General ☐ Other (specify)	Election Cycle-to-Date 5000.00		
SUBTOTAL of Receipts This Page (optional).....		5000.00	
TOTAL This Period (last page this line number only).....			

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SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 8 OF 93
(check only one)	
☒ 11a	☐ 11b
☐ 12	☐ 13a
☐ 11c	☐ 11d
☐ 13b	☐ 14
	☐ 15

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NAME OF COMMITTEE (In Full)
Raese for Senate

Full Name (Last, First, Middle Initial) MRS. DEBRA R. CYPHERT		Date of Receipt MM/DD/YYYY 03/26/2012
Mailing Address 1877 FAIRCHANCE ROAD		Transaction ID : SA11.11493
City MORGANTOWN	State WV	Zip Code 26508-2660
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00 CONTRIBUTION
Name of Employer FAIR PLAY LLC	Occupation OWNER	
Receipt For: 2012 ☒ Primary ☐ General ☐ Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) MR. TODD P. DAENZER		Date of Receipt MM/DD/YYYY 03/13/2012
Mailing Address 1739 BRIGHTWOOD ROAD SE		Transaction ID : SA11.11451
City NEW PHILADELPHIA	State OH	Zip Code 44663-6765
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00 CONTRIBUTION
Name of Employer GREER STEEL COMPANY	Occupation EXECUTIVE	
Receipt For: 2012 ☒ Primary ☐ General ☐ Other (specify)	Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) MRS. LINDA DAY		Date of Receipt MM/DD/YYYY 03/23/2012
Mailing Address 3000 HAMPTON CENTER SUITE B.		Transaction ID : SA11.11469
City MORGANTOWN	State WV	Zip Code 26505-1708
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00 CONTRIBUTION
Name of Employer PEDIATRIC DENTISTRY OF MORGANTOWN	Occupation MANAGER	
Receipt For: 2012 ☒ Primary ☐ General ☐ Other (specify)	Election Cycle-to-Date 1000.00	

SUBTOTAL of Receipts This Page (optional).....	4000.00
TOTAL This Period (last page this line number only).....	

12020243343

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 9 OF 93	
☒ 11a	☐ 11b	☐ 11c	☐ 11d
☐ 12	☐ 13a	☐ 13b	☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Raese for Senate

Full Name (Last, First, Middle Initial) MR. DOW FINSTERWALD		Date of Receipt MM / DD / YY 03 / 26 / 2012	
Mailing Address 6330 MASTERS BLVD.		Transaction ID : SA11.11477	
City ORLANDO	State FL	Zip Code 32819-4869	Amount of Each Receipt this Period 500.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2012 ☒ Primary ☐ General ☐ Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) MRS. ALICE S. FRANKOVITCH		Date of Receipt MM / DD / YY 03 / 22 / 2012	
Mailing Address 1366 LICK RUN ROAD		Transaction ID : SA11.11457	
City WEIRTON	State WV	Zip Code 26062-5512	Amount of Each Receipt this Period 2500.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer HOMEMAKER	Occupation HOMEMAKER		
Receipt For: 2012 ☒ Primary ☐ General ☐ Other (specify)	Election Cycle-to-Date 2500.00		

Full Name (Last, First, Middle Initial) MR. M. ERIC FRANKOVITCH ESQ.		Date of Receipt MM / DD / YY 03 / 22 / 2012	
Mailing Address 1366 LICK RUN ROAD		Transaction ID : SA11.11458	
City WEIRTON	State WV	Zip Code 26062-5512	Amount of Each Receipt this Period 2500.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer FRANKOVICH, ANETAKIS, COLANTONIO & S	Occupation ATTORNEY		
Receipt For: 2012 ☒ Primary ☐ General ☐ Other (specify)	Election Cycle-to-Date 2500.00		

SUBTOTAL of Receipts This Page (optional)	5500.00
TOTAL This Period (last page this line number only)	

12020243344

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)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial)

MR. ROBERT G. GOALBY

A.

Mailing Address 904 BRIAR HILL ROAD

City

BELLEVILLE

State

IL

Zip Code

62223-1133

FEC ID number of contributing
federal political committee.

C

Name of Employer

RETIRED

Occupation

RETIRED

Receipt For: 2012

☒ Primary
☐ Other (specify)

☐ General

Election Cycle-to-Date

300.00

Date of Receipt

MM / DD / YYYY
03 / 30 / 2012

Transaction ID : SA11.11565

Amount of Each Receipt this Period

300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. JAMES M. GOFF

B.

Mailing Address 3503 MAPLE COURT

City

MORGANTOWN

State

WV

Zip Code

26508-5964

FEC ID number of contributing
federal political committee.

C

Name of Employer

GREER INDUSTRIES, INC.

Occupation

VICE PRESIDENT

Receipt For: 2012

☒ Primary
☐ Other (specify)

☐ General

Election Cycle-to-Date

2500.00

Date of Receipt

MM / DD / YYYY
01 / 27 / 2012

Transaction ID : SA11.11445

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. RICHARD R. GREENE

C.

Mailing Address P.O. BOX 1573

City

CLARKSBURG

State

WV

Zip Code

26302-1573

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF-EMPLOYED

Occupation

EXECUTIVE

Receipt For: 2012

☒ Primary
☐ Other (specify)

☐ General

Election Cycle-to-Date

250.00

Date of Receipt

MM / DD / YYYY
03 / 26 / 2012

Transaction ID : SA11.11472

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

3050.00

TOTAL This Period (last page this line number only)

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 93

☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial)

MR. GREG S. GUTTA

A.

Mailing Address 7 CATALPA STREET

City

MORGANTOWN

State

WV

Zip Code

26505-3677

FEC ID number of contributing
federal political committee.

C

Name of Employer

SELF EMPLOYED

Occupation

REAL ESTATE AGENT

Receipt For: 2012



Primary



General



Other (specify)

Election Cycle-to-Date

400.00

Date of Receipt

MM / DD / YYYY
03 / 28 / 2012

Transaction ID : SA11.11542

Amount of Each Receipt this Period

400.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. J. ROBERT GWYNNE

B.

Mailing Address P.O. BOX 1900

City

MORGANTOWN

State

WV

Zip Code

26507-1900

FEC ID number of contributing
federal political committee.

C

Name of Employer

GREER INDUSTRIES, INC.

Occupation

EXECUTIVE

Receipt For: 2012



Primary



General



Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

MM / DD / YYYY
01 / 17 / 2012

Transaction ID : SA11.11436

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MRS. MARY KAY GWYNNE

C.

Mailing Address 11021 SW 113 PL

City

MIAMI

State

FL

Zip Code

33176-3168

FEC ID number of contributing
federal political committee.

C

Name of Employer

SCHOOL MANAGEMENT SYSTEM, INC.

Occupation

ADMINISTRATOR

Receipt For: 2012



Primary



General



Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

MM / DD / YYYY
02 / 03 / 2012

Transaction ID : SA11.11448

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

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:		PAGE 12 OF 93	
(check only one)			
☒ 11a	☐ 11b	☐ 11c	☐ 11d
☐ 12	☐ 13a	☐ 13b	☐ 14
		☐ 15	

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NAME OF COMMITTEE (In Full)
Raese for Senate

A. Full Name (Last, First, Middle Initial)
MS. MARY ANNE HARDESTY

Mailing Address **990 BOULEVARD OF THE ARTS# 1402D**

City SARASOTA	State FL	Zip Code 34236-4878
-------------------------	--------------------	-------------------------------

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

Name of Employer HOMEMAKER	Occupation HOMEMAKER
--------------------------------------	--------------------------------

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
MM / DD / YY
03 / 26 / 2012

Transaction ID : **SA11.11499**

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT A. HENN

Mailing Address **137 HUMMINGBIRD LANE**

City MORGANTOWN	State WV	Zip Code 26508-8661
---------------------------	--------------------	-------------------------------

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

Name of Employer GREER INDUSTRIES, INC.	Occupation EXECUTIVE
---	--------------------------------

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
MM / DD / YY
03 / 31 / 2012

Transaction ID : **SA11.11572**

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. GARY L. HINKLE

Mailing Address **P.O. BOX 55**

City CIRCLEVILLE	State WV	Zip Code 26804-0055
----------------------------	--------------------	-------------------------------

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

Name of Employer HINKLE TRUCKING CO.	Occupation PRESIDENT
--	--------------------------------

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
MM / DD / YY
03 / 26 / 2012

Transaction ID : **SA11.11516**

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

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

4500.00

12020243347

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

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☒ 11a	☐ 11b	☐ 11c	☐ 11d
☐ 12	☐ 13a	☐ 13b	☐ 14
		☐ 15	

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NAME OF COMMITTEE (In Full)
Raese for Senate

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

Mailing Address **141 NORTH DRIVE**

City PITTSBURGH	State PA	Zip Code 15238-2309
---------------------------	--------------------	-------------------------------

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

Name of Employer GRAPHIC SYSTEMS INC.	Occupation SMALL BUSINESS OWNER
---	---

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2012

Transaction ID : **SA11.11520**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. L. FRED HORTON JR.

Mailing Address **63 HORTON LANE**

City MORGANTOWN	State WV	Zip Code 26508-2939
---------------------------	--------------------	-------------------------------

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

Name of Employer HEFLIN INSURANCE	Occupation INSURANCE AGENT
---	--------------------------------------

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2012

Transaction ID : **SA11.11494**

Amount of Each Receipt this Period
500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. PETE HUDSON

Mailing Address **1050 WINDSOR AVENUE**

City MORGANTOWN	State WV	Zip Code 26505-3326
---------------------------	--------------------	-------------------------------

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

Name of Employer SELF-EMPLOYED	Occupation AUTO DEALER
--	----------------------------------

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
MM / DD / YYYY
03 / 22 / 2012

Transaction ID : **SA11.11456**

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

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

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

3500.00

12020243348

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

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☒ 11a	☐ 11b	☐ 11c	☐ 11d
☐ 12	☐ 13a	☐ 13b	☐ 14
		☐ 15	

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NAME OF COMMITTEE (In Full)
Raese for Senate

Full Name (Last, First, Middle Initial) A. MR. DARWIN F. JOHNSON		Date of Receipt MM / DD / YYYY 03 / 31 / 2012
Mailing Address P.O. BOX 1403		Transaction ID : SA11.11577
City MORGANTOWN	State WV	Zip Code 26507-1403
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer SELF-EMPLOYED	Occupation ATTORNEY	CONTRIBUTION
Receipt For: 2012 ☒ Primary ☐ General ☐ Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) B. MR. GLENN LAREW		Date of Receipt MM / DD / YYYY 03 / 22 / 2012
Mailing Address 149 MEADOW VIEW LANE		Transaction ID : SA11.11455
City MORGANTOWN	State WV	Zip Code 26508-2909
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer SELF-EMPLOYED	Occupation CONTRACTOR	CONTRIBUTION
Receipt For: 2012 ☒ Primary ☐ General ☐ Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) C. MR. CHARLES D. LILLY		Date of Receipt MM / DD / YYYY 03 / 22 / 2012
Mailing Address 27 PINNACLE LANE		Transaction ID : SA11.11461
City MORGANTOWN	State WV	Zip Code 26508-2919
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer RED BONE MINING COMPANY	Occupation OWNER	CONTRIBUTION
Receipt For: 2012 ☒ Primary ☐ General ☐ Other (specify)	Election Cycle-to-Date 250.00	

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

3250.00

12020243349

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
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☒ 11a	☐ 11b	☐ 11c	☐ 11d
☐ 12	☐ 13a	☐ 13b	☐ 14
		☐ 15	

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NAME OF COMMITTEE (In Full)
Raese for Senate

A. Full Name (Last, First, Middle Initial)
MR. MICHAEL L. MANLEY

Mailing Address **91 TERRACE VIEW DRIVE**

City MORGANTOWN	State WV	Zip Code 26508-7001
---------------------------	--------------------	-------------------------------

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

Name of Employer PREMIER COMPUTER SERVICES	Occupation EXECUTIVE
--	--------------------------------

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
MM/DD/YYYY
01/18/2012

Transaction ID : **SA11.11437**

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. HARRY C. MARSON IV

Mailing Address **P.O. BOX 629**

City ELKINS	State WV	Zip Code 26241-0629
-----------------------	--------------------	-------------------------------

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

Name of Employer MARSON COAL COMPANY	Occupation EXECUTIVE
--	--------------------------------

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
MM/DD/YYYY
03/26/2012

Transaction ID : **SA11.11471**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. GERTRAUD E. MARTIN

Mailing Address **196 GREENBRIER DRIVE**

City MORGANTOWN	State WV	Zip Code 26501-6927
---------------------------	--------------------	-------------------------------

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

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
MM/DD/YYYY
03/22/2012

Transaction ID : **SA11.11460**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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
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☒ 11a	☐ 11b	☐ 11c	☐ 11d
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☐ 15			

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NAME OF COMMITTEE (In Full)
Raese for Senate

Full Name (Last, First, Middle Initial)
A. DR. RALPH E. MASSULLO JR.

Mailing Address 525 N. DACIE PT.

City	State	Zip Code
LECANTO	FL	34461-8399

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
M.D.

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

03 / 26 / 2012

Transaction ID : SA11.11479

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MR. CHARLES C.D. MCGILL

Mailing Address 15115 OLD HANOVER ROAD

City	State	Zip Code
UPPERCO	MD	21155-9720

FEC ID number of contributing
federal political committee.

C

Name of Employer
RETIRED

Occupation
RETIRED

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

03 / 26 / 2012

Transaction ID : SA11.11486

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MR. DALE B. MILLER

Mailing Address 207 JADE DRIVE

City	State	Zip Code
MORGANTOWN	WV	26508-4026

FEC ID number of contributing
federal political committee.

C

Name of Employer
WV RADIO CORPORATION

Occupation
EXECUTIVE

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

01 / 26 / 2012

Transaction ID : SA11.11442

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

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

8000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
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☐ 15			

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NAME OF COMMITTEE (In Full)
Raese for Senate

Full Name (Last, First, Middle Initial)

A. MR. DALE B. MILLER

Mailing Address 207 JADE DRIVE

City State Zip Code
MORGANTOWN WV 26508-4026

FEC ID number of contributing
federal political committee.

C

Name of Employer
WV RADIO CORPORATION

Occupation
EXECUTIVE

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

01 / 26 / 2012

Transaction ID : SA11.11442B

Amount of Each Receipt this Period

-2500.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

Full Name (Last, First, Middle Initial)

B. MR. DALE B. MILLER

Mailing Address 207 JADE DRIVE

City State Zip Code
MORGANTOWN WV 26508-4026

FEC ID number of contributing
federal political committee.

C

Name of Employer
WV RADIO CORPORATION

Occupation
EXECUTIVE

Receipt For: 2012

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

01 / 26 / 2012

Transaction ID : SA11.11587

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

Full Name (Last, First, Middle Initial)

C. MR. RICK MULLENS

Mailing Address 93 SHERIDAN LANE

City State Zip Code
MORGANTOWN WV 26508-4232

FEC ID number of contributing
federal political committee.

C

Name of Employer
LEMAC MINE SERVICE

Occupation
EXECUTIVE

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1500.00

Date of Receipt

03 / 29 / 2012

Transaction ID : SA11.11551

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

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

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

1500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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☐ 12	☐ 13a	☐ 13b	☐ 14
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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial)

MR. PARRY PETROPLUS

A.

Mailing Address 3955 EASTLAKE DRIVE

City

MORGANTOWN

State

WV

Zip Code

26508-8673

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
REAL ESTATE

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

MM / DD / YY
03 / 22 / 2012

Transaction ID : SA11.11453

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. JOHN F. POTT

B.

Mailing Address P.O. BOX 1085

City

MIDDLETOWN

State

CA

Zip Code

95461-1085

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF

Occupation
GOLF PROFESSIONAL

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

MM / DD / YY
03 / 26 / 2012

Transaction ID : SA11.11506

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

MR. CHARLES D. RAESE

C.

Mailing Address P.O. BOX 604

City

MORGANTOWN

State

WV

Zip Code

26507-0604

FEC ID number of contributing
federal political committee.

C

Name of Employer
WV RADIO CORPORATION

Occupation
ACCOUNT EXECUTIVE

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

MM / DD / YY
03 / 29 / 2012

Transaction ID : SA11.11550

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

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

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

5500.00

12020243353

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
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☒ 11a	☐ 11b	☐ 11c	☐ 11d
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☐ 15			

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NAME OF COMMITTEE (In Full)
Raese for Senate

A. Full Name (Last, First, Middle Initial) MR. DAVID A. RAESE Mailing Address P.O. BOX 107		Date of Receipt M M / D D / Y Y Y Y 01 / 18 / 2012 Transaction ID : SA11.11438
City MORGANTOWN State WV Zip Code 26507-0107	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2300.00 CONTRIBUTION
Name of Employer GREER INDUSTRIES, INC. Receipt For: 2012 ☒ Primary ☐ General ☐ Other (specify)	Occupation EXECUTIVE Election Cycle-to-Date 2300.00	
B. Full Name (Last, First, Middle Initial) MRS. ELIZABETH S. RAESE Mailing Address P.O. BOX 872		Date of Receipt M M / D D / Y Y Y Y 03 / 29 / 2012 Transaction ID : SA11.11546
City MORGANTOWN State WV Zip Code 26507-0872	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 660.33 CONTRIBUTION
Name of Employer GREER INDUSTRIES, INC. Receipt For: 2012 ☒ Primary ☐ General ☐ Other (specify)	Occupation MANAGER Election Cycle-to-Date 660.33	
C. Full Name (Last, First, Middle Initial) MR. PERRY W. RHODES Mailing Address 10139 S. PRESTON HWY		Date of Receipt M M / D D / Y Y Y Y 03 / 22 / 2012 Transaction ID : SA11.11465
City TUNNELTON State WV Zip Code 26444-7137	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00 CONTRIBUTION
Name of Employer PERRY RHODES TRUCKING Receipt For: 2012 ☒ Primary ☐ General ☐ Other (specify)	Occupation OWNER Election Cycle-to-Date 1000.00	
SUBTOTAL of Receipts This Page (optional).....		3960.33
TOTAL This Period (last page this line number only).....		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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☒ 11a	☐ 11b	☐ 11c	☐ 11d
☐ 12	☐ 13a	☐ 13b	☐ 14
		☐ 15	

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NAME OF COMMITTEE (In Full)
Raese for Senate

A. Full Name (Last, First, Middle Initial)
MR. DAVID A. ROSOW

Mailing Address **1460 NORTH LAKE WAY**

City PALM BEACH	State FL	Zip Code 33480-3031
---------------------------	--------------------	-------------------------------

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

Name of Employer RETIRED	Occupation RETIRED
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Receipt For: 2012 ☒ Primary ☐ General ☐ Other (specify)	Election Cycle-to-Date
---	--------------------------------

Date of Receipt
MM / DD / YY
01 / 24 / 2012

Transaction ID : **SA11.11441**

Amount of Each Receipt this Period
2500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. MARVIN NOEL SANDERS

Mailing Address **1397 CANTON AVENUE**

City STAR CITY	State WV	Zip Code 26505-3104
--------------------------	--------------------	-------------------------------

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

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2012 ☒ Primary ☐ General ☐ Other (specify)	Election Cycle-to-Date
---	--------------------------------

Date of Receipt
MM / DD / YY
03 / 26 / 2012

Transaction ID : **SA11.11495**

Amount of Each Receipt this Period
300.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. CHARLES M. SEEGER III

Mailing Address **3107 WOODLAND DR. N.W.**

City WASHINGTON	State DC	Zip Code 20008-3546
---------------------------	--------------------	-------------------------------

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

Name of Employer NATIONAL LIME ASSOCIATION	Occupation LAWYER
--	-----------------------------

Receipt For: 2012 ☒ Primary ☐ General ☐ Other (specify)	Election Cycle-to-Date
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Date of Receipt
MM / DD / YY
03 / 26 / 2012

Transaction ID : **SA11.11501**

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

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

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

3800.00

12020243355

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER: PAGE 21 OF 93
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☒ 11a ☐ 11b ☐ 11c ☐ 11d
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Raese for Senate

A. Full Name (Last, First, Middle Initial)
MR. CHARLES D. SIMPSON

Mailing Address **56 CLARK ROAD**

City **MORGANTOWN** State **WV** Zip Code **26508-2622**

FEC ID number of contributing federal political committee.

C

Name of Employer
GREER INDUSTRIES, INC.

Occupation
MANAGER

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

03 / 30 / 2012

Transaction ID : **SA11.11561**

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MRS. DEBORAH W. SIMPSON

Mailing Address **56 CLARK ROAD**

City **MORGANTOWN** State **WV** Zip Code **26508-2622**

FEC ID number of contributing federal political committee.

C

Name of Employer
GREER INDUSTRIES, INC.

Occupation
EXECUTIVE ASSISTANT

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

547.50

Date of Receipt

01 / 30 / 2012

Transaction ID : **SA11.11447**

Amount of Each Receipt this Period

10.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. DEBORAH W. SIMPSON

Mailing Address **56 CLARK ROAD**

City **MORGANTOWN** State **WV** Zip Code **26508-2622**

FEC ID number of contributing federal political committee.

C

Name of Employer
GREER INDUSTRIES, INC.

Occupation
EXECUTIVE ASSISTANT

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

547.50

Date of Receipt

03 / 29 / 2012

Transaction ID : **SA11.11544**

Amount of Each Receipt this Period

45.00

CONTRIBUTION

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

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

555.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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☒ 11a	☐ 11b	☐ 11c	☐ 11d
☐ 12	☐ 13a	☐ 13b	☐ 14
		☐ 15	

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NAME OF COMMITTEE (In Full)
Raese for Senate

A. Full Name (Last, First, Middle Initial)
MRS. DEBORAH W. SIMPSON
Mailing Address **56 CLARK ROAD**

City **MORGANTOWN** State **WV** Zip Code **26508-2622**

FEC ID number of contributing
federal political committee.

C

Name of Employer
GREER INDUSTRIES, INC.

Occupation
EXECUTIVE ASSISTANT

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

547.50

Date of Receipt

03 / 29 / 2012

Transaction ID : **SA11.11545**

Amount of Each Receipt this Period

492.50
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JEFFERY S. SISLER
Mailing Address **1904 MILFORD STREET**

City **KINGWOOD** State **WV** Zip Code **26537-1043**

FEC ID number of contributing
federal political committee.

C

Name of Employer
ALI CO

Occupation
OWNER

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

03 / 26 / 2012

Transaction ID : **SA11.11522**

Amount of Each Receipt this Period

2500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES M. TROY
Mailing Address **804 CASSVILLE-MT. MORRIS ROAD**

City **MORGANTOWN** State **WV** Zip Code **26501-2126**

FEC ID number of contributing
federal political committee.

C

Name of Employer
GREER INDUSTRIES, INC.

Occupation
ACCOUNTANT

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

01 / 27 / 2012

Transaction ID : **SA11.11446**

Amount of Each Receipt this Period

2500.00
CONTRIBUTION

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

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

5492.50

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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FOR LINE NUMBER:		PAGE 23 OF 93	
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☒ 11a	☐ 11b	☐ 11c	☐ 11d
☐ 12	☐ 13a	☐ 13b	☐ 14
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NAME OF COMMITTEE (In Full)
Raese for Senate

A. Full Name (Last, First, Middle Initial)
MR. VINCENT P. TUTINO

Mailing Address **3031 WILMINGTON ROAD**

City NEW CASTLE	State PA	Zip Code 16105-1242
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FEC ID number of contributing federal political committee. **C**

Name of Employer LINDY PAVING, INC.	Occupation PRESIDENT
---	--------------------------------

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 28 / 2012
 Transaction ID : **SA11.11536**

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. CHARLES VANVOORHIS

Mailing Address **1144 HOOPER CREEK ROAD**

City TRYON	State NC	Zip Code 28782-9300
----------------------	--------------------	-------------------------------

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

Name of Employer RETIRED	Occupation RETIRED
------------------------------------	------------------------------

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 22 / 2012
 Transaction ID : **SA11.11463**

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. LEO A. VECELLIO JR.

Mailing Address **589 NORTH COUNTY ROAD**

City PALM BEACH	State FL	Zip Code 33480-3504
---------------------------	--------------------	-------------------------------

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

Name of Employer VECELLIO MANAGEMENT SERVICES	Occupation CEO/OWNER
---	--------------------------------

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 26 / 2012
 Transaction ID : **SA11.11504**

Amount of Each Receipt this Period
2500.00
 CONTRIBUTION

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

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

4500.00

12020243358

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

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(check only one)			
☒ 11a	☐ 11b	☐ 11c	☐ 11d
☐ 12	☐ 13a	☐ 13b	☐ 14
		☐ 15	

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NAME OF COMMITTEE (In Full)
Raese for Senate

Full Name (Last, First, Middle Initial) MR. JOHN WASSICK III		Date of Receipt MM / DD / YYYY 03 / 22 / 2012
Mailing Address P.O. BOX 1588		Transaction ID : SA11.11464
City MORGANTOWN	State WV	
Zip Code 26507-1588		
FEC ID number of contributing federal political committee. C		
Name of Employer WASSICK NOVELTY COMPANY	Occupation OWNER	
Receipt For: 2012 ☒ Primary ☐ General ☐ Other (specify)		Amount of Each Receipt this Period 500.00 CONTRIBUTION
Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) MR. CHARLES WELLINGS		Date of Receipt MM / DD / YYYY 03 / 22 / 2012
Mailing Address HC 68 BOX 3		Transaction ID : SA11.11454
City WEST UNION	State WV	
Zip Code 26456-9009		
FEC ID number of contributing federal political committee. C		
Name of Employer SELF-EMPLOYED	Occupation FARMER	
Receipt For: 2012 ☒ Primary ☐ General ☐ Other (specify)		Amount of Each Receipt this Period 1000.00 CONTRIBUTION
Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) MR. HENRY K. WILLARD II		Date of Receipt MM / DD / YYYY 03 / 22 / 2012
Mailing Address P.O. BOX 3269		Transaction ID : SA11.11459
City SHEPHERDSTOWN	State WV	
Zip Code 25443-3269		
FEC ID number of contributing federal political committee. C		
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: 2012 ☒ Primary ☐ General ☐ Other (specify)		Amount of Each Receipt this Period 1000.00 CONTRIBUTION
Election Cycle-to-Date 1000.00		

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	

12020243359

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

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(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Raese for Senate

Full Name (Last, First, Middle Initial)
RANDALL L. WILLIAMS

A. Mailing Address 1795 HALLECK ROAD

City State Zip Code
MORGANTOWN WV 26508-2391

FEC ID number of contributing
federal political committee.

C

Name of Employer
CENTRA BANK

Occupation
VICE PRESIDENT

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1100.00

Date of Receipt

03 / 29 / 2012

Transaction ID : SA11.11548

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
RANDALL L. WILLIAMS

B. Mailing Address 1795 HALLECK ROAD

City State Zip Code
MORGANTOWN WV 26508-2391

FEC ID number of contributing
federal political committee.

C

Name of Employer
CENTRA BANK

Occupation
VICE PRESIDENT

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

1100.00

Date of Receipt

03 / 29 / 2012

Transaction ID : SA11.11549

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
MR. MARK A. WILSON

C. Mailing Address 312 OAKLAND STREET

City State Zip Code
MORGANTOWN WV 26505-4626

FEC ID number of contributing
federal political committee.

C

Name of Employer
GREER INDUSTRIES, INC.

Occupation
VP-SAFETY AND HUMAN RESOURCE

Receipt For: 2012

☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

2500.00

Date of Receipt

01 / 24 / 2012

Transaction ID : SA11.11439

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

3600.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

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☐ 15			

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NAME OF COMMITTEE (In Full)
Raese for Senate

Full Name (Last, First, Middle Initial) MR. JOHN M. ZANNONI			Date of Receipt MM / DD / YYYY 01 / 24 / 2012	
Mailing Address 704 BRIDGEPORT DRIVE			Transaction ID : SA11.11440	
City KNOXVILLE	State TN	Zip Code 37934-4783	Amount of Each Receipt this Period 1250.00	
FEC ID number of contributing federal political committee. C			CONTRIBUTION	
Name of Employer R. P R INDUSTRIES		Occupation PRESIDENT	Amount of Each Receipt this Period 1250.00	
Receipt For: 2012 ☒ Primary ☐ General ☐ Other (specify)		Election Cycle-to-Date 1250.00	CONTRIBUTION	

Full Name (Last, First, Middle Initial) DR. NICK L. ZERVOS			Date of Receipt MM / DD / YYYY 03 / 26 / 2012	
Mailing Address 611 WINGS KNOB PLACE			Transaction ID : SA11.11518	
City MORGANTOWN	State WV	Zip Code 26508-9031	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			CONTRIBUTION	
Name of Employer MOUNTAIN STATE ORTHOPEDIC ASSOCIATI		Occupation PHYSICIAN	Amount of Each Receipt this Period 1000.00	
Receipt For: 2012 ☒ Primary ☐ General ☐ Other (specify)		Election Cycle-to-Date 1000.00	CONTRIBUTION	

Full Name (Last, First, Middle Initial) RASCHELL ZIPP			Date of Receipt MM / DD / YYYY 03 / 23 / 2012	
Mailing Address P.O. BOX 1541			Transaction ID : SA11.11466	
City CLARKSBURG	State WV	Zip Code 26302-1541	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			CONTRIBUTION	
Name of Employer HOMEMAKER		Occupation HOMEMAKER	Amount of Each Receipt this Period 1000.00	
Receipt For: 2012 ☒ Primary ☐ General ☐ Other (specify)		Election Cycle-to-Date 1000.00	CONTRIBUTION	

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

3250.00

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

89357.83

12020243361

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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☐ 12	☐ 13a	☐ 13b	☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)
Raese for Senate

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

Mailing Address **220 1/2 E STREET NE**

City **WASHINGTON** State **DC** Zip Code **20002-4923**

FEC ID number of contributing federal political committee. **C C00235655**

Name of Employer Occupation

Receipt For: 2012
☒ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
03 / 31 / 2012

Transaction ID : **SA11.11582**

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BLUEGRASS COMMITTEE PAC

Mailing Address **220 1/2 E STREET NE**

City **WASHINGTON** State **DC** Zip Code **20002-4923**

FEC ID number of contributing federal political committee. **C C00235655**

Name of Employer Occupation

Receipt For: 2012
☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date
10000.00

Date of Receipt
03 / 31 / 2012

Transaction ID : **SA11.11583**

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

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

Amount of Each Receipt this Period

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

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

10000.00

10000.00

12020243362

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
Raese for Senate

Full Name (Last, First, Middle Initial)
JOHN RAESE

A. Mailing Address **P O BOX 872**

City State Zip Code
MORGANTOWN WV 26507

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

40500.00

Date of Receipt

03 / 13 / 2012

Transaction ID : **SA13A.2**

Amount of Each Receipt this Period

20000.00

CANDIDATE LOAN-PERSONAL FUNDS

Full Name (Last, First, Middle Initial)
JOHN RAESE

B. Mailing Address **P O BOX 872**

City State Zip Code
MORGANTOWN WV 26507

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

40500.00

Date of Receipt

03 / 19 / 2012

Transaction ID : **SA13A.3**

Amount of Each Receipt this Period

20000.00

CANDIDATE LOAN - PERSONAL FUNDS

Full Name (Last, First, Middle Initial)
JOHN RAESE

C. Mailing Address **P O BOX 872**

City State Zip Code
MORGANTOWN WV 26507

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Election Cycle-to-Date

40500.00

Date of Receipt

03 / 21 / 2012

Transaction ID : **SA13A.4**

Amount of Each Receipt this Period

500.00

CANDIDATE LOAN - PERSONAL FUNDS

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

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

40500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (In Full)
Raese for Senate

Full Name (Last, First, Middle Initial) JOHN R. RAESE		Date of Receipt MM / DD / YYYY 02 / 22 / 2012
Mailing Address P.O. BOX 262		Transaction ID : SA13A.1
City MORGANTOWN	State WV	
Zip Code 26507	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1500.00
Name of Employer	Occupation	CANDIDATE LOAN - PERSONAL FUNDS
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Election Cycle-to-Date 1500.00	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		MM / DD / YYYY
City	State	Zip Code
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period	
Name of Employer	Occupation	
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Election Cycle-to-Date	
Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		MM / DD / YYYY
City	State	Zip Code
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period	
Name of Employer	Occupation	
Receipt For: ☐ Primary ☐ General ☐ Other (specify)	Election Cycle-to-Date	
SUBTOTAL of Receipts This Page (optional)		1500.00
TOTAL This Period (last page this line number only)		42000.00

12020243364

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

Use separate schedule(s)
for each category of the
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(check only one)

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20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial)

A. MRS. SUSAN C. JACKSON

Mailing Address 577 SUMMER SCHOOL ROAD

City State Zip Code
MORGANTOWN WV 26508-1574

Purpose of Disbursement
IN-KIND CONTRIBUTION

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify)

State: District: 00

Date of Disbursement

MM / DD / YYYY
03 / 30 / 2012

Amount of Each Disbursement this Period

45.00

Transaction ID : SB17.11569

Full Name (Last, First, Middle Initial)

B. MRS. ELIZABETH S. RAESE

Mailing Address P.O. BOX 872

City State Zip Code
MORGANTOWN WV 26507-0872

Purpose of Disbursement
IN-KIND CONTRIBUTION

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify)

State: District: 00

Date of Disbursement

MM / DD / YYYY
03 / 29 / 2012

Amount of Each Disbursement this Period

660.33

Transaction ID : SB17.11546

Full Name (Last, First, Middle Initial)

C. MRS. DEBORAH W. SIMPSON

Mailing Address 56 CLARK ROAD

City State Zip Code
MORGANTOWN WV 26508-2622

Purpose of Disbursement
IN-KIND CONTRIBUTION

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify)

State: District: 00

Date of Disbursement

MM / DD / YYYY
03 / 29 / 2012

Amount of Each Disbursement this Period

45.00

Transaction ID : SB17.11544

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

750.33

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
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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial)

A. MRS. DEBORAH W. SIMPSON

Mailing Address 56 CLARK ROAD

City MORGANTOWN State WV Zip Code 26508-2622

Purpose of Disbursement
IN-KIND CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: 2012 ☒ Primary ☐ General
☐ Other (specify)

State: District: 00

Date of Disbursement

MM / DD / YYY Y
03 / 29 / 2012

Amount of Each Disbursement this Period

492.50

Transaction ID : SB17.11545

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Mailing Address P.O. BOX 53852

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement
CREDIT CARD MERCHANT FEES

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYY Y
02 / 06 / 2012

Amount of Each Disbursement this Period

146.15

Transaction ID : SB.10

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS

Mailing Address P.O. BOX 53852

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement
CREDIT CARD MERCHANT FEES

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYY Y
02 / 01 / 2012

Amount of Each Disbursement this Period

7.95

Transaction ID : SB.7

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

646.60

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

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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial)

A. AT & T

Mailing Address P.O. BOX 5019

Date of Disbursement

02 / 17 / 2012

City CAROL STREAM State IL Zip Code 60197

Amount of Each Disbursement this Period

7.66

Purpose of Disbursement
CELL PHONE

Transaction ID : SB.16

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

B. AT & T

Mailing Address P.O. BOX 5019

Date of Disbursement

03 / 16 / 2012

City CAROL STREAM State IL Zip Code 60197-501

Amount of Each Disbursement this Period

395.73

Purpose of Disbursement
CELL PHONE

Transaction ID : SB.32

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. BBL FLEET

Mailing Address 100 OLD POND ROAD

Date of Disbursement

03 / 16 / 2012

City BRIDGEVILLE State PA Zip Code 15017

Amount of Each Disbursement this Period

139.00

Purpose of Disbursement
VEHICLE LEASE

Transaction ID : SB.30

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

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

542.39

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

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial)

A. BBL FLEET

Mailing Address 100 OLD POND ROAD

City BRIDGEVILLE State PA Zip Code 15017

Purpose of Disbursement
VEHICLE LEASE

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 16 / 2012

Amount of Each Disbursement this Period

1539.99

Transaction ID : SB.31

Full Name (Last, First, Middle Initial)

B. BLAINE TURNER ADVERTISING, INC.

Mailing Address 1401 SARATOGA AVENUE

City MORGANTOWN State WV Zip Code 26505

Purpose of Disbursement
PROMOTIONAL

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 24 / 2012

Amount of Each Disbursement this Period

3726.50

Transaction ID : SB.22

Full Name (Last, First, Middle Initial)

C. BLAINE TURNER ADVERTISING, INC.

Mailing Address 1401 SARATOGA AVENUE

City MORGANTOWN State WV Zip Code 26505

Purpose of Disbursement
ADVERTISING

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 16 / 2012

Amount of Each Disbursement this Period

506.68

Transaction ID : SB.34

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

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

5773.17

12020243368

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 7704 LEESBURG PIKE

City State Zip Code
FALLS CHURCH VA 22043

Purpose of Disbursement
COMPLIANCE AND DATA SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM/DD/YYYY
01 19 2012

Amount of Each Disbursement this Period

800.00

Transaction ID : SB.1

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 7704 LEESBURG PIKE

City State Zip Code
FALLS CHURCH VA 22043

Purpose of Disbursement
COMPLIANCE AND DATA SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM/DD/YYYY
02 17 2012

Amount of Each Disbursement this Period

800.00

Transaction ID : SB.12

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 7704 LEESBURG PIKE

City State Zip Code
FALLS CHURCH VA 22043

Purpose of Disbursement
WEB SITE EXPENSES

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM/DD/YYYY
02 17 2012

Amount of Each Disbursement this Period

99.00

Transaction ID : SB.13

SUBTOTAL of Disbursements This Page (optional)

1699.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 7704 LEESBURG PIKE

City State Zip Code
FALLS CHURCH VA 22043

Purpose of Disbursement
CREDIT CARD MERCHANT FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 17 / 2012

Amount of Each Disbursement this Period

125.30

Transaction ID : SB.17

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 7704 LEESBURG PIKE

City State Zip Code
FALLS CHURCH VA 22043

Purpose of Disbursement
COMPLIANCE AND DATA SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 16 / 2012

Amount of Each Disbursement this Period

800.00

Transaction ID : SB.28

Full Name (Last, First, Middle Initial)

C. DIGITAL CONNECTIONS

Mailing Address P.O. BOX 387

City State Zip Code
BRUCETON MILLS WV 26525

Purpose of Disbursement
TELEPHONE EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 24 / 2012

Amount of Each Disbursement this Period

149.48

Transaction ID : SB.24

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

1074.78

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial)

A. DIGITAL CONNECTIONS

Mailing Address P.O. BOX 387

City State Zip Code
BRUCETON MILLS WV 26525

Purpose of Disbursement
TELEPHONE EXPENSE

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 16 / 2012

Amount of Each Disbursement this Period

149.48

Transaction ID : SB.27

Full Name (Last, First, Middle Initial)

B. FIA BUSINESS CARD SERVICES N. A.

Mailing Address P.O. BOX 15710

City State Zip Code
WILMINGTON DE 19886

Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 27 / 2012

Amount of Each Disbursement this Period

37.05

Transaction ID : SB.2

Full Name (Last, First, Middle Initial)

C. INTUIT

Mailing Address 2632 MARINE WAY

City State Zip Code
MOUNTAIN VIEW CA 94043

Purpose of Disbursement
COMPLIANCE AND DATA SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 09 / 2012

Amount of Each Disbursement this Period

37.05

Transaction ID : SB.3

[MEMO ITEM]

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

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

186.53

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

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

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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial)

A. FIA BUSINESS CARD SERVICES N. A.

Mailing Address P.O. BOX 15710

City State Zip Code
WILMINGTON DE 19886

Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 16 / 2012

Amount of Each Disbursement this Period

1533.00

Transaction ID : SB.37

Full Name (Last, First, Middle Initial)

B. BLAINE TURNER ADVERTISING, INC.

Mailing Address 1401 SARATOGA AVENUE

City State Zip Code
MORGANTOWN WV 26505

Purpose of Disbursement
NEWSPAPER

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 24 / 2012

Amount of Each Disbursement this Period

1350.00

Transaction ID : SB.39

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. INTUIT

Mailing Address 2632 MARINE WAY

City State Zip Code
MOUNTAIN VIEW CA 94043

Purpose of Disbursement
COMPLIANCE AND DATA SERVICES

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 10 / 2012

Amount of Each Disbursement this Period

37.05

Transaction ID : SB.38

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

1533.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial)

A. INTUIT

Mailing Address 2632 MARINE WAY

City MOUNTAIN VIEW State CA Zip Code 94043

Purpose of Disbursement
COMPLIANCE AND DATA SERVICES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 09 / 2012

Amount of Each Disbursement this Period

42.35

Transaction ID : SB.41

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. MARS

Mailing Address 512 HARTMAN RUN ROAD

City MORGANTOWN State WV Zip Code 26505

Purpose of Disbursement
VEHICLE MAINTENANCE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 09 / 2012

Amount of Each Disbursement this Period

12.72

Transaction ID : SB.42

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. SIRIUSXM

Mailing Address P.O. BOX 9001399

City LOUISVILLE State KY Zip Code 40290-1399

Purpose of Disbursement
SUBSCRIPTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 24 / 2012

Amount of Each Disbursement this Period

90.88

Transaction ID : SB.40

[MEMO ITEM]

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

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

0.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial)

A. FIA BUSINESS CARD SERVICES N. A.

Mailing Address P.O. BOX 15710

City State Zip Code
WILMINGTON DE 19886

Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 16 / 2012

Amount of Each Disbursement this Period

536.54

Transaction ID : SB.43

Full Name (Last, First, Middle Initial)

B. CIRCLE K

Mailing Address 935 E TALLMADGE AVE

City State Zip Code
AKRON OH 44310

Purpose of Disbursement
FUEL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 21 / 2012

Amount of Each Disbursement this Period

42.00

Transaction ID : SB.45

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. CIRCLE K

Mailing Address 935 E TALLMADGE AVE

City State Zip Code
AKRON OH 44310

Purpose of Disbursement
FUEL

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 23 / 2012

Amount of Each Disbursement this Period

73.00

Transaction ID : SB.46

[MEMO ITEM]

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

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

536.54

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial)

A. CIRCLE K

Mailing Address 935 E TALLMADGE AVE

City State Zip Code
AKRON OH 44310

Purpose of Disbursement
FUEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 16 / 2018

Amount of Each Disbursement this Period

97.50

Transaction ID : SB.48

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. CIRCLE K

Mailing Address 935 E TALLMADGE AVE

City State Zip Code
AKRON OH 44310

Purpose of Disbursement
FUEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 16 / 2020

Amount of Each Disbursement this Period

78.07

Transaction ID : SB.50

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. EASY SAVINGS FUELMAN REBATE

Mailing Address P.O. BOX 15796

City State Zip Code
WILMINGTON DE 19886-5796

Purpose of Disbursement
FUEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 22 / 2012

Amount of Each Disbursement this Period

-0.72

Transaction ID : SB.52

[MEMO ITEM]

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

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

0.00

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial)

A. EASY SAVINGS FUELMAN REBATE

Mailing Address P.O. BOX 15796

City WILMINGTON State DE Zip Code 19886

Purpose of Disbursement
FUEL

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 25 / 2012

Amount of Each Disbursement this Period

-0.53

Transaction ID : SB.53

[MEMO ITEM]

B. EXXONMOBIL

Mailing Address 1899 EARL COVE ROAD

City MORGANTOWN State WV Zip Code 26508

Purpose of Disbursement
FUEL

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 20 / 2012

Amount of Each Disbursement this Period

71.98

Transaction ID : SB.44

[MEMO ITEM]

C. PAR MAR

Mailing Address 105 ALTA STREET

City MARIETTA State OH Zip Code 45750-260

Purpose of Disbursement
FUEL

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 16 / 2017

Amount of Each Disbursement this Period

52.70

Transaction ID : SB.47

[MEMO ITEM]

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

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NAME OF COMMITTEE (In Full)
Raese for Senate

Full Name (Last, First, Middle Initial)

A. PINE RUN SERVICE CENTER

Mailing Address 174 CASTEEL RD

City **BRUCETON MILLS** State **WV** Zip Code **26525**

Purpose of Disbursement
FUEL

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 16 / 2019

Amount of Each Disbursement this Period

30.00

Transaction ID : SB.49

[MEMO ITEM]

B. SUNOCO

Mailing Address 1624 MILEGROUND ROAD

City **MORGANTOWN** State **WV** Zip Code **26508**

Purpose of Disbursement
FUEL

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 16 / 2021

Amount of Each Disbursement this Period

92.54

Transaction ID : SB.51

[MEMO ITEM]

C. FIA BUSINESS CARD SERVICES N. A.

Mailing Address P.O. BOX 15710

City **WILMINGTON** State **DE** Zip Code **19886**

Purpose of Disbursement
CREDIT CARD PAYMENT

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 16 / 2012

Amount of Each Disbursement this Period

423.45

Transaction ID : SB.54

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

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

423.45

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

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial)

A. BEST BUY

Mailing Address 4000 UNIVERSITY TOWN CENTER DR

City MORGANTOWN State WV Zip Code 26505

Purpose of Disbursement
EQUIPMENT

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President

State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement

MM / DD / YYYY
02 / 08 / 2012

Amount of Each Disbursement this Period

360.34

Transaction ID : SB.55

[MEMO ITEM]

B. HONEYBAKED HAM

Mailing Address 841 VENTURE DRIVE

City MORGANTOWN State WV Zip Code 26508

Purpose of Disbursement
FOOD

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President

State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement

MM / DD / YYYY
02 / 13 / 2012

Amount of Each Disbursement this Period

41.29

Transaction ID : SB.56

[MEMO ITEM]

C. OFFICE DEPOT

Mailing Address 733 CHESTNUT RIDGE ROAD

City MORGANTOWN State WV Zip Code 26508

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President

State: District:

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

Date of Disbursement

MM / DD / YYYY
02 / 21 / 2012

Amount of Each Disbursement this Period

20.92

Transaction ID : SB.57

[MEMO ITEM]

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)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial)

A. US POSTAL SERVICE

Mailing Address DOWNTOWN STATION

City MORGANTOWN State WV Zip Code 26505

Purpose of Disbursement
POSTAGE & OVERNIGHT FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 05 / 2012

Amount of Each Disbursement this Period

0.90

Transaction ID : SB.58

[MEMO ITEM]

B. GOP SHOPPE

Mailing Address 883-C AIRPORT PARK ROAD

City GLEN BURNIE State MD Zip Code 21061

Purpose of Disbursement
SIGNS & STICKERS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 24 / 2012

Amount of Each Disbursement this Period

875.37

Transaction ID : SB.20

C. GREER INDUSTRIES, INC.

Mailing Address P.O. BOX 1900

City MORGANTOWN State WV Zip Code 26507-190

Purpose of Disbursement
OFFICE EXPENSES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 30 / 2012

Amount of Each Disbursement this Period

2205.14

Transaction ID : SB.60

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

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

3080.51

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

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

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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial)

A. HOWE TO MEDIA, LLC

Mailing Address 323 DAIRY LANE

City MORGANTOWN State WV Zip Code 26508

Purpose of Disbursement
MEDIA CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 16 / 2012

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB.33

Full Name (Last, First, Middle Initial)

B. HOWE TO MEDIA, LLC

Mailing Address 323 DAIRY LANE

City MORGANTOWN State WV Zip Code 26508

Purpose of Disbursement
MEDIA CONSULTING

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 30 / 2012

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB.61

Full Name (Last, First, Middle Initial)

C. MERCHANT SERVICES

Mailing Address 7300 CHAPMAN HWY

City KNOXVILLE State TN Zip Code 37920

Purpose of Disbursement
CREDIT CARD MERCHANT FEES

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 02 / 2012

Amount of Each Disbursement this Period

55.00

Transaction ID : SB.25

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

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

2055.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial)

A. MERCHANT SERVICES

Mailing Address 7300 CHAPMAN HWY

City KNOXVILLE State TN Zip Code 37920

Purpose of Disbursement
CREDIT CARD MERCHANT FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 02 / 2012

Amount of Each Disbursement this Period

71.11

Transaction ID : SB.8

Full Name (Last, First, Middle Initial)

B. METRONEWS

Mailing Address 1111 VIRGINIA STREET

City CHARLESTON State WV Zip Code 25301

Purpose of Disbursement
RADIO

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 08 / 2012

Amount of Each Disbursement this Period

973.09

Transaction ID : SB.11

Full Name (Last, First, Middle Initial)

C. METRONEWS

Mailing Address 1111 VIRGINIA STREET

City CHARLESTON State WV Zip Code 25301

Purpose of Disbursement
RADIO

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2012

Amount of Each Disbursement this Period

973.09

Transaction ID : SB.4

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

2017.29

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
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial)

A. METRONEWS

Mailing Address 1111 VIRGINIA STREET

City State Zip Code
 CHARLESTON WV 25301

Purpose of Disbursement
 RADIO

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
 02 / 03 / 2012

Amount of Each Disbursement this Period

973.09

Transaction ID : SB.9

B. MORGANTOWN PRINTING & BINDING

Mailing Address 915 GREENBAG ROAD

City State Zip Code
 MORGANTOWN WV 26508

Purpose of Disbursement
 STATIONERY & PRINTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
 02 / 24 / 2012

Amount of Each Disbursement this Period

391.14

Transaction ID : SB.21

C. MORGANTOWN PRINTING & BINDING

Mailing Address 915 GREENBAG ROAD

City State Zip Code
 MORGANTOWN WV 26508

Purpose of Disbursement
 STATIONERY & PRINTING

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
 03 / 16 / 2012

Amount of Each Disbursement this Period

100.70

Transaction ID : SB.29

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

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

1464.93

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

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

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial)

A. PIKEWOOD CREATIVE

Mailing Address 1085 VAN VOORHIS ROAD, SUITE 325

City State Zip Code
MORGANTOWN WV 26505

Purpose of Disbursement
WEB SITE EXPENSES

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 30 / 2012

Amount of Each Disbursement this Period

2703.80

Transaction ID : SB.63

Full Name (Last, First, Middle Initial)

B. PREMIER COMPUTER SERVICES

Mailing Address 23 SOUTH UNIVERSITY AVENUE

City State Zip Code
MORGANTOWN WV 26508

Purpose of Disbursement
EQUIPMENT

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 30 / 2012

Amount of Each Disbursement this Period

1005.93

Transaction ID : SB.62

Full Name (Last, First, Middle Initial)

C. SIGNS PLUS

Mailing Address 1342 GREENBAG ROAD

City State Zip Code
MORGANTOWN WV 26508

Purpose of Disbursement
SIGNS & STICKERS

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 17 / 2012

Amount of Each Disbursement this Period

1846.00

Transaction ID : SB.18

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

5555.73

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)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial)

A. SIGNS PLUS

Mailing Address 1342 GREENBAG ROAD

City MORGANTOWN State WV Zip Code 26508

Purpose of Disbursement
SIGNS & STICKERS

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

State: District:

Date of Disbursement

MM/DD/YYYY
02/24/2012

Amount of Each Disbursement this Period

110.76

Transaction ID : SB.19

B. SIGNS UNLIMITED

Mailing Address P O BOX 411

City ARTHURDALE State WV Zip Code 26520

Purpose of Disbursement
SIGNS & STICKERS

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

State: District:

Date of Disbursement

MM/DD/YYYY
03/16/2012

Amount of Each Disbursement this Period

84.80

Transaction ID : SB.35

C. SIGNS UNLIMITED

Mailing Address P O BOX 411

City ARTHURDALE State WV Zip Code 26520

Purpose of Disbursement
SIGNS & STICKERS

Candidate Name

Office Sought: ☐ House ☐ Senate ☐ President

Disbursement For: ☐ Primary ☐ General ☐ Other (specify)

State: District:

Date of Disbursement

MM/DD/YYYY
03/16/2012

Amount of Each Disbursement this Period

53.00

Transaction ID : SB.36

SUBTOTAL of Disbursements This Page (optional)

248.56

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

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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial)

A. SOFTWARE SYSTEMS, INC.

Mailing Address 23 SOUTH UNIVERSITY AVENUE

City MORGANTOWN State WV Zip Code 26508

Purpose of Disbursement
INTERNET EXPENSE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 17 / 2012

Amount of Each Disbursement this Period

325.92

Transaction ID : SB.14

Category/
Type

Full Name (Last, First, Middle Initial)

B. SOFTWARE SYSTEMS, INC.

Mailing Address 23 SOUTH UNIVERSITY AVENUE

City MORGANTOWN State WV Zip Code 26508

Purpose of Disbursement
INTERNET EXPENSE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 17 / 2012

Amount of Each Disbursement this Period

12.99

Transaction ID : SB.15

Category/
Type

Full Name (Last, First, Middle Initial)

C. SOFTWARE SYSTEMS, INC.

Mailing Address 23 SOUTH UNIVERSITY AVENUE

City MORGANTOWN State WV Zip Code 26508

Purpose of Disbursement
INTERNET EXPENSE

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2012

Amount of Each Disbursement this Period

187.20

Transaction ID : SB.5

Category/
Type

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

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

526.11

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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☒ 17 ☐ 18 ☐ 19a ☐ 19b
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial)

A. THE MAIL HAUS

Mailing Address 1745 SUBURBAN DRIVE

City State Zip Code
DE PERE WI 54115

Purpose of Disbursement
POSTAGE & OVERNIGHT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 13 / 2012

Amount of Each Disbursement this Period

2217.72

Transaction ID : SB.26

B. UPS

Mailing Address P.O. BOX 7247-0244

City State Zip Code
PHILADELPHIA PA 19170-0000

Purpose of Disbursement
POSTAGE & OVERNIGHT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
02 / 24 / 2012

Amount of Each Disbursement this Period

75.97

Transaction ID : SB.23

C. UPS

Mailing Address P.O. BOX 7247-0244

City State Zip Code
PHILADELPHIA PA 19170-0000

Purpose of Disbursement
POSTAGE & OVERNIGHT FEES

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
01 / 30 / 2012

Amount of Each Disbursement this Period

40.25

Transaction ID : SB.6

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

2333.94

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
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FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial)

A. WE ROAST PIGS

Date of Disbursement

03 / 21 / 2012

Mailing Address 3006 STEWARTSTOWN ROAD

City State Zip Code
MORGANTOWN WV 26508

Purpose of Disbursement
EVENT

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Amount of Each Disbursement this Period

500.00

Transaction ID : SB.59

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

/ /

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

/ /

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
Disbursement For: ☐ Primary ☐ General
☐ Other (specify)

State: District:

Amount of Each Disbursement this Period

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

500.00

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

30947.86

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE 53 OF 93

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID : SC9.001

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election:

MR. JOHN R. RAESE

☐ Primary
☐ General

Mailing Address
P.O. BOX 262

☒ Other (specify) ▼
PRIMARY - 1984

City State ZIP Code
MORGANTOWN WV 26507

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
90000.00	216.44	89783.56

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
04 / 24 / 1984		0.00 % (apr)	☐ 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) 89783.56

TOTALS This Period (last page in this line only)

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

SCHEDULE C (FEC Form 3)

LOANS

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

PAGE 54 OF 93

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID : SC9.002

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election:

MR. JOHN R RAESE

☐ Primary
☐ General

Mailing Address
P.O. BOX 262

☒ Other (specify) ▼
PRIMARY - 1984

City State ZIP Code
MORGANTOWN WV 26507

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
2500.00	0.00	2500.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 05 / D 04 / Y 1984 Y Y M M / D D / Y Y Y Y Y Y 0.00 % (apr)

☐ 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)..... ▶

2500.00

TOTALS This Period (last page in this line only)..... ▶

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

SCHEDULE C (FEC Form 3)

LOANS

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

PAGE 55 OF 93

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Raese for Senate

Transaction ID : SC9.003

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election:

MR. JOHN R RAESE

☐ Primary
☐ General

Mailing Address
P.O. BOX 262

☒ Other (specify) ▼
PRIMARY - 1984

City State ZIP Code
MORGANTOWN WV 26507

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
28200.00	0.00	28200.00

TERMS

Date Incurred Date Due Interest Rate
M 05 / D 07 / Y 1984 M M / D D / Y Y Y Y 0.00

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)..... ▶

28200.00

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

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

SCHEDULE C (FEC Form 3)

LOANS

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

PAGE 56 OF 93

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID : SC9.004

LOAN SOURCE Full Name (Last, First, Middle Initial)

MR. JOHN R. RAESE

Election:

☐ Primary

☐ General

☒ Other (specify) ▼

PRIMARY - 1984

Mailing Address
P.O. BOX 262

City State ZIP Code
MORGANTOWN WV 26507

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
9000.00	0.00	9000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
05 / 12 / 1984		0.00 % (apr)	☐ 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).....

9000.00

TOTALS This Period (last page in this line only)

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

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE 57 OF 93

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID : SC9.005

LOAN SOURCE Full Name (Last, First, Middle Initial)

MR. JOHN R. RAESE

Election:

☐ Primary

☐ General

☒ Other (specify) ▼

PRIMARY - 1984

Mailing Address
P.O. BOX 262

City	State	ZIP Code
MORGANTOWN	WV	26507

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
4700.00	0.00	4700.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
06 / 04 / 1984		0.00 % (apr)	☐ 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)..... 4700.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE 58 OF 93

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID : SC9.006

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election:

MR. JOHN R. RAESE

☐ Primary
☐ General

Mailing Address
P.O. BOX 262

☒ Other (specify) ▼
PRIMARY - 1984

City State ZIP Code
MORGANTOWN WV 26507

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5000.00	0.00	5000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
06 / 29 / 1984		0.00 % (apr)	☐ 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)..... 5000.00

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

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

12020243393

SCHEDULE C (FEC Form 3)

LOANS

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

PAGE 59 OF 93

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID : SC9.007

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election:

MR. JOHN R. RAESE

☐ Primary

☐ General

☒ Other (specify) ▼

PRIMARY - 1984

Mailing Address
P.O. BOX 262

City State ZIP Code
MORGANTOWN WV 26507

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
120000.00	0.00	120000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
07 / 18 / 1984		0.00 % (apr)	☐ 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)..... 120000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE 60 OF 93

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID : SC9.008

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election:

MR. JOHN R RAESE

☐ Primary

☐ General

☒ Other (specify) ▼

PRIMARY - 1984

Mailing Address
P.O. BOX 262

City State ZIP Code
MORGANTOWN WV 26507

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
30000.00	0.00	30000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

07 / 18 / 1984

0.00

% (apr)

☐ 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)..... ▶

30000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE 61 OF 93

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID : SC9.009

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election:

☐ Primary

☐ General

☒ Other (specify) ▼

PRIMARY - 1984

Mailing Address
P.O. BOX 262

City

State

ZIP Code

MORGANTOWN

WV

26507

Original Amount of Loan

4000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

4000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 09 / D 04 / Y 1984

M M / D D / Y Y Y Y

0.00

% (apr)

☐ 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)..... ▶

4000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE 62 OF 93

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID : SC9.010

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election:

MR. JOHN R. RAESE

☐ Primary

☐ General

☒ Other (specify) ▼

PRIMARY - 1984

Mailing Address
P.O. BOX 262

City

State

ZIP Code

MORGANTOWN

WV

26507

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

4000.00

0.00

4000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

09 / 24 / 1984

0.00

% (apr)

☐ 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)..... ►

4000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE 63 OF 93

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID : SC9.011

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election:

MR. JOHN R. RAESE

☐ Primary

☐ General

☒ Other (specify) ▼

PRIMARY - 1984

Mailing Address
P.O. BOX 262

City

State

ZIP Code

MORGANTOWN

WV

26507

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

100000.00

0.00

100000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 10 / D 05 / Y 1984

M M / D D / Y Y Y Y

0.00

% (apr)

☐ 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)..... ►

100000.00

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

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

SCHEDULE C (FEC Form 3)

LOANS

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

PAGE 64 OF 93

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID : SC9.012

LOAN SOURCE Full Name (Last, First, Middle Initial)

MR. JOHN R. RAESE

[PERSONAL FUNDS]

Election:

☐ Primary

☐ General

☒ Other (specify) ▼

PRIMARY - 1984

Mailing Address
P.O. BOX 262

City

State

ZIP Code

MORGANTOWN

WV

26507

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

4500.00

0.00

4500.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

10 / 24 / 1984

0.00

% (apr)

☐ 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).....

4500.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE 65 OF 93

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Raese for Senate

Transaction ID : SC9.013

LOAN SOURCE Full Name (Last, First, Middle Initial)

MR. JOHN R RAESE

[PERSONAL FUNDS]

Election:

☐ Primary

☐ General

☒ Other (specify) ▼

PRIMARY - 1984

Mailing Address
P.O. BOX 262

City

State

ZIP Code

MORGANTOWN

WV

26507

Original Amount of Loan

10000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

10000.00

TERMS

Date Incurred

11 / 08 / 1984

Date Due

11 / 08 / 1984

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)..... ►

10000.00

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

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

SCHEDULE C (FEC Form 3)

LOANS

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

PAGE 66 OF 93

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID : SC9.014

LOAN SOURCE Full Name (Last, First, Middle Initial)

MR. JOHN R. RAESE

[PERSONAL FUNDS]

Election:

☐ Primary
☐ General

☒ Other (specify) ▼
PRIMARY - 1984

Mailing Address
P.O. BOX 262

City State ZIP Code
MORGANTOWN WV 26507

Original Amount of Loan

5000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

5000.00

TERMS

Date Incurred

MM / DD / YY
12 / 27 / 1985

Date Due

MM / DD / YY
MM / DD / YY

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).....

5000.00

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

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

SCHEDULE C (FEC Form 3)

LOANS

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

PAGE 67 OF 93

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID : SC9.205

LOAN SOURCE Full Name (Last, First, Middle Initial)

MR. JOHN R. RAESE

[PERSONAL FUNDS]

Election: 2010

☒ Primary

☐ General

☐ Other (specify) ▼

Mailing Address
P.O. BOX 262

City

State

ZIP Code

MORGANTOWN

WV

26507

BANK LOAN SECURED BY REAL ESTATE

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

200000.00

0.00

200000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

08 / 10 / 2010

08 / 10 / 2010

3.75

% (apr)

☐ 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).....

200000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE 68 OF 93

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID : SC9.206

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2010

MR. JOHN R. RAESE

☒ Primary

☐ General

☐ Other (specify) ▼

Mailing Address
P.O. BOX 262

City State ZIP Code
MORGANTOWN WV 26507

BANK LOAN SECURED BY REAL ESTATE;
PORTION OF LOAN CONVERTED TO
CONTRIBUTION BY CANDIDATE

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
200000.00	0.00	50000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

08 / 17 / 2010

MM / DD / YY

YY - YY

3.75 % (apr)

☐ 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)..... 50000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE 69 OF 93

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID : SC9.207

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2010

MR. JOHN R. RAESE

☐ Primary
☒ General
☐ Other (specify) ▼

Mailing Address
P.O. BOX 262

City State ZIP Code
MORGANTOWN WV 26507

BANK LOAN SECURED BY REAL ESTATE; LOAN
CONVERTED TO CONTRIBUTION BY
CANDIDATE

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

100000.00

0.00

0.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

09 / 01 / 2010

MM / DD / YYYY

3.75

% (apr)

☐ 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).....

0.00

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

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

SCHEDULE C (FEC Form 3)

LOANS

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

PAGE 70 OF 93

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Raese for Senate

Transaction ID : SC9.202

LOAN SOURCE Full Name (Last, First, Middle Initial)

MR. JOHN R. RAESE

[PERSONAL FUNDS]

Election: 2010

☐ Primary

☒ General

☐ Other (specify) ▼

Mailing Address

P.O. BOX 262

City

State

ZIP Code

MORGANTOWN

WV

26507

BANK LOAN SECURED BY INVESTMENTS; LOAN
CONVERTED TO CONTRIBUTION BY
CANDIDATE

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

250000.00

0.00

0.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 09 / D 10 / Y 2010 Y M M / D D / Y Y Y Y

3.25

% (apr)

☐ 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).....

0.00

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

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

SCHEDULE C (FEC Form 3)

LOANS

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

PAGE 71 OF 93

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Raese for Senate

Transaction ID : SC9.201

LOAN SOURCE Full Name (Last, First, Middle Initial)

MR. JOHN R. RAESE

[PERSONAL FUNDS]

Election: 2010

☐ Primary

☒ General

☐ Other (specify) ▼

Mailing Address
P.O. BOX 262

City

State

ZIP Code

MORGANTOWN

WV

26507

BANK LOAN SECURED BY INVESTMENTS; LOAN
CONVERTED TO CONTRIBUTION BY
CANDIDATE

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

200000.00

0.00

0.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

09 / 20 / 2010

09 / 20 / 2010

3.25

% (apr)

☐ 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)..... ▶

0.00

TOTALS This Period (last page in this line only)..... ▶

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

SCHEDULE C (FEC Form 3)

LOANS

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

PAGE 72 OF 93

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Raese for Senate

Transaction ID : SC9.203

LOAN SOURCE Full Name (Last, First, Middle Initial)

MR. JOHN R. RAESE

[PERSONAL FUNDS]

Election: 2010

☐ Primary

☒ General

☐ Other (specify) ▼

Mailing Address
P.O. BOX 262

City

State

ZIP Code

MORGANTOWN

WV

26507

BANK LOAN SECURED BY INVESTMENTS; LOAN
CONVERTED TO CONTRIBUTION BY
CANDIDATE

Original Amount of Loan

250000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

MM / DD / YY
09 / 24 / 2010

Date Due

MM / DD / YY
09 / 24 / 2010

Interest Rate

3.25

% (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).....

0.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE 73 OF 93

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID : SC9.204

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2010

MR. JOHN R RAESE

☐ Primary

Mailing Address
P.O. BOX 262

☒ General

☐ Other (specify) ▼

City State ZIP Code
MORGANTOWN WV 26507

BANK LOAN SECURED BY INVESTMENTS; LOAN
CONVERTED TO CONTRIBUTION BY
CANDIDATE

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
100000.00	0.00	0.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 09 / D 30 / Y 2010	M M / D D / Y Y Y Y	3.25 % (apr)	☐ 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).....

0.00

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

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

SCHEDULE C (FEC Form 3)

LOANS

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

PAGE 74 OF 93

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID : SC9.301

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2010

MR. JOHN R. RAESE

☐ Primary

☒ General

☐ Other (specify) ▼

Mailing Address
P.O. BOX 262

City

State

ZIP Code

BANK LOAN SECURED BY INVESTMENTS

MORGANTOWN

WV

26507

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

250000.00

0.00

250000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

10 M

04 D

2010 Y

MM D

YY Y

3.25

% (apr)

☐ 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).....

250000.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE 75 OF 93

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID : SC0.302

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2010

MR. JOHN R. RAESE

☐ Primary

☒ General

☐ Other (specify) ▼

Mailing Address
P.O. BOX 262

City State ZIP Code
MORGANTOWN WV 26507

BANK LOAN SECURED BY INVESTMENTS; LOAN
CONVERTED TO CONTRIBUTION BY
CANDIDATE

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

150000.00

0.00

0.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 10

D 07

Y 2010

M M

D D

Y Y Y Y

3.25

% (apr)

☐ 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).....

0.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

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FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID : SC9.303

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2010

MR. JOHN R. RAESE

☐ Primary

☒ General

☐ Other (specify) ▼

Mailing Address
P.O. BOX 262

City State ZIP Code

MORGANTOWN WV 26507

BANK LOAN SECURED BY INVESTMENTS; LOAN
CONVERTED TO CONTRIBUTION BY
CANDIDATE

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

200000.00

0.00

0.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

10 / 07 / 2010

MM / DD / YYYY

3.25

% (apr)

☐ 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)..... ►

0.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE 77 OF 93

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID : SC9.304

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

MR. JOHN R. RAESE

Election: 2010

☐ Primary

☒ General

☐ Other (specify) ▼

Mailing Address
P.O. BOX 262

City State ZIP Code
MORGANTOWN WV 26507

BANK LOAN SECURED BY INVESTMENTS; LOAN
CONVERTED TO CONTRIBUTION BY
CANDIDATE

Original Amount of Loan

350000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

MM/DD/YYYY
10/12/2010

Date Due

MM/DD/YYYY

Interest Rate

3.25

% (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).....

0.00

TOTALS This Period (last page in this line only)

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

SCHEDULE C (FEC Form 3)

LOANS

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

PAGE 78 OF 93

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID : SC9.503

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2010

MR. JOHN R. RAESE

☐ Primary

☒ General

☐ Other (specify) ▼

Mailing Address
P.O. BOX 262

City

State

ZIP Code

MORGANTOWN

WV

26507

BANK LOAN SECURED BY INVESTMENTS; LOAN
CONVERTED TO CONTRIBUTION BY
CANDIDATE

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

450000.00

0.00

0.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

10 / 19 / 2010

MM / DD / YYYY

3.25

% (apr)

☐ 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).....▶

0.00

TOTALS This Period (last page in this line only).....▶

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

SCHEDULE C (FEC Form 3)
LOANS

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

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FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID : SC9.502

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2010

MR. JOHN R. RAESE

☐ Primary

☒ General

☐ Other (specify) ▼

Mailing Address
P.O. BOX 262

City

State

ZIP Code

MORGANTOWN

WV

26507

LOAN CONVERTED TO CONTRIBUTION BY
CANDIDATE

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

100000.00

20000.00

0.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 10 / D 27 / Y 2010

M / D / Y

0.00

% (apr)

☐ 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)..... ►

0.00

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

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

12020243414

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE 80 OF 93

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID : SC9.501

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

Election: 2010

MR. JOHN R. RAESE

☐ Primary

☒ General

☐ Other (specify) ▼

Mailing Address
P.O. BOX 262

City

State

ZIP Code

MORGANTOWN

WV

26507

LOAN CONVERTED TO CONTRIBUTION BY
CANDIDATE

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

100000.00

0.00

0.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 10 / D 28 / Y 2010

M / D / Y

0.00

% (apr)

☐ 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)..... ►

0.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE 81 OF 93

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID : SC10.1

LOAN SOURCE Full Name (Last, First, Middle Initial)

MR. JOHN R. RAESE

Election: 2012

☒ Primary

☐ General

☐ Other (specify) ▼

Mailing Address
P.O. BOX 262

City

State

ZIP Code

PERSONAL FUNDS

MORGANTOWN

WV

26507

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

1500.00

0.00

1500.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

02 / 22 / 2012

0.00

% (apr)

☐ 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)..... ►

1500.00

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

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

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE 82 OF 93

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID : SC10.2

LOAN SOURCE Full Name (Last, First, Middle Initial)

MR. JOHN R. RAESE

Election: 2012

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address
P.O. BOX 262

City

State

ZIP Code

PERSONAL FUNDS

MORGANTOWN

WV

26507

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

20000.00

0.00

20000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

03 / 12 / 2012

0.00 % (apr)

☐ 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)..... ►

20000.00

TOTALS This Period (last page in this line only)..... ►

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

SCHEDULE C (FEC Form 3)

LOANS

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

PAGE 83 OF 93

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID : SD10.3

LOAN SOURCE Full Name (Last, First, Middle Initial)

MR. JOHN R. RAESE

Election: 2012

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address
P.O. BOX 262

City State ZIP Code
MORGANTOWN WV 26507

PERSONAL FUNDS

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
20000.00	0.00	20000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
03 / 19 / 2012		0.00 % (apr)	☐ 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).....▶

20000.00

TOTALS This Period (last page in this line only).....▶

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

SCHEDULE C (FEC Form 3)

LOANS

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

PAGE 84 OF 93

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID : SD10.4

LOAN SOURCE Full Name (Last, First, Middle Initial)

MR. JOHN R. RAESE

Election: 2012

☒ Primary

☐ General

☐ Other (specify) ▼

Mailing Address
P.O. BOX 262

City

State

ZIP Code

PERSONAL FUNDS

MORGANTOWN

WV

26507

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

500.00

0.00

500.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

03 / 21 / 2012

0.00

% (apr)

☐ 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)..... ▶

500.00

TOTALS This Period (last page in this line only)..... ▶

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

SCHEDULE C (FEC Form 3)

LOANS

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

PAGE 85 OF 93

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID : SC9.015

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

MR. JOHN R. RAESE (Personal Funds)

Mailing Address
P.O. BOX 262

Election:

☐ Primary
☐ General

☒ Other (specify) ▼
PRIMARY - 2006

City State ZIP Code
MORGANTOWN WV 26507

Original Amount of Loan

70000.00

Cumulative Payment To Date

13827.16

Balance Outstanding at Close of This Period

56172.84

TERMS

Date Incurred

04 / 19 / 2006

Date Due

MM / DD / YYYY

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)..... ►

56172.84

TOTALS This Period (last page in this line only)..... ►

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

SCHEDULE C (FEC Form 3)

LOANS

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

PAGE 86 OF 93

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID : SC9.016

LOAN SOURCE Full Name (Last, First, Middle Initial)

[PERSONAL FUNDS]

MR. JOHN R. RAESE (Personal Funds)

Election:

☐ Primary
☐ General

☒ Other (specify) ▼
PRIMARY - 2006

Mailing Address
P.O. BOX 262

City

State

ZIP Code

MORGANTOWN

WV

26507

Original Amount of Loan

100000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100000.00

TERMS

Date Incurred

M 04 / D 27 / Y 2006

Date Due

M M / D D / Y Y Y Y

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)..... ►

100000.00

TOTALS This Period (last page in this line only)..... ►

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

SCHEDULE C (FEC Form 3)

LOANS

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

PAGE 87 OF 93

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID : SC9.017

LOAN SOURCE Full Name (Last, First, Middle Initial)
MR. JOHN R. RAESE (Personal Funds)

[PERSONAL FUNDS]

Election:

☐ Primary
☐ General

☒ Other (specify) ▼
PRIMARY - 2006

Mailing Address
P.O. BOX 262

City State ZIP Code
MORGANTOWN WV 26507

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
80000.00	0.00	80000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
05 / 03 / 2006		0.00 % (apr)	☐ 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)	80000.00
TOTALS This Period (last page in this line only)	

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

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE 88 OF 93

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID : SC9.019

LOAN SOURCE Full Name (Last, First, Middle Initial)
MR. JOHN R. RAESE (Personal Funds)

[PERSONAL FUNDS]

Election:

☐ Primary
☐ General

☒ Other (specify) ▼
GENERAL - 2006

Mailing Address
P.O. BOX 262

City State ZIP Code
MORGANTOWN WV 26507

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
50000.00	0.00	50000.00

TERMS

Date Incurred Date Due Interest Rate Secured:
M 10 / D 02 / Y 2006 M M / D D / Y Y * Y Y * 0.00 % (apr) ☐ 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)..... ►

50000.00

TOTALS This Period (last page in this line only)..... ►

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

SCHEDULE C (FEC Form 3)
LOANS

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

PAGE 89 OF 93

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID : SC9.020

LOAN SOURCE Full Name (Last, First, Middle Initial)
MR. JOHN R. RAESE (Personal Funds)

[PERSONAL FUNDS]

Election:

☐ Primary
☐ General

☒ Other (specify) ▼
GENERAL - 2006

Mailing Address
P.O. BOX 262

City State ZIP Code
MORGANTOWN WV 26507

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
200000.00	11760.00	188240.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
10 / 20 / 2006		0.00 % (apr)	☐ 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)..... 188240.00

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

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

SCHEDULE C (FEC Form 3)

LOANS

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

PAGE 90 OF 93

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Raese for Senate

Transaction ID : SC9.021

LOAN SOURCE Full Name (Last, First, Middle Initial)

MR. JOHN R. RAESE (PERSONAL FUNDS)

[PERSONAL FUNDS]

Election: 2010

☒ Primary

☐ General

☐ Other (specify) ▼

Mailing Address

P.O. BOX 262

City

State

ZIP Code

MORGANTOWN

WV

26507

LOAN CONVERTED TO CONTRIBUTION BY
CANDIDATE

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

10000.00

0.00

0.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 07

D 27

Y 2010

M M

D D

Y Y Y Y

0.00

% (apr)

☐ 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).....

0.00

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

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

SCHEDULE C (FEC Form 3)

LOANS

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

PAGE 91 OF 93

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Raese for Senate

Transaction ID : SC9.001b

LOAN SOURCE Full Name (Last, First, Middle Initial)

MR. JOHN R RAESE (PERSONAL FUNDS)

[PERSONAL FUNDS]

Election: 2010

☒ Primary

☐ General

☐ Other (specify) ▼

Mailing Address

P.O. BOX 262

City

State

ZIP Code

MORGANTOWN

WV

26507

LOAN CONVERTED TO CONTRIBUTION BY
CANDIDATE

Original Amount of Loan

110000.00

Cumulative Payment To Date

20000.00

Balance Outstanding at Close of This Period

0.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M 08 / D 05 / Y 2010

M M / D D / Y Y Y Y

0.00 % (apr)

☐ 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).....

0.00

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

1433096.40

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 92 OF 93

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Raese for Senate

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

The Lukens Company

Nature of Debt (Purpose):

Letter

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD1

Amount Incurred This Period

6583.31

Payment This Period

0.00

Outstanding Balance at Close of This Period

6583.31

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

AT&T

Nature of Debt (Purpose):

Cell Phone

Mailing Address P.O. BOX 5019

City

State

Zip Code

CAROL STREAM

IL

60197

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD2

Amount Incurred This Period

811.77

Payment This Period

403.39

Outstanding Balance at Close of This Period

408.38

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

CMDI

Nature of Debt (Purpose):

Credit Card Fees

Mailing Address 7704 LEESBURG PIKE

City

State

Zip Code

FALLS CHURCH

VA

22043

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD3

Amount Incurred This Period

2713.05

Payment This Period

2624.30

Outstanding Balance at Close of This Period

88.75

1) SUBTOTALS This Period This Page (optional) ▶

7080.44

2) TOTALS This Period (last page this line number only) ▶

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶

1433096.40

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

1433096.40

FEC Schedule D (Form 3) (Revised 02/2003)

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate
schedule(s)
for each
numbered line)

PAGE 93 OF 93

FOR LINE NUMBER:
(check only one)

9

☒ 10

NAME OF COMMITTEE (In Full)

Raese for Senate

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

UPS

Nature of Debt (Purpose):

Postage & Overnight Delivery

Mailing Address P.O. BOX 7247-0244

City State

Zip Code

PHILADELPHIA

PA

19170

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD4

Amount Incurred This Period

118.96

Payment This Period

116.22

Outstanding Balance at Close of This Period

2.74

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

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

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

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

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)

2) **TOTALS** This Period (last page this line number only)

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

2.74

7083.18

1433096.40

1440179.58

FEC Schedule D (Form 3) (Revised 02/2003)

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

HAND DELIVERED 04-13-12
Date of Receipt

USPS FIRST CLASS MAIL _____
Postmark

USPS REGISTERED/CERTIFIED _____
Postmark

USPS PRIORITY MAIL _____
Postmark
DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL ☐

USPS EXPRESS MAIL _____
Postmark

OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	☐
UPS	_____	☐
DHL	_____	☐
AIRBORNE EXPRESS	_____	☐

RECEIVED FROM FEDERAL ELECTION COMMISSION _____
Date of Receipt

POSTMARK ILLEGIBLE ☐ NO POSTMARK ☐

FAX _____
Date of Receipt

OTHER _____
Date of Receipt or Postmark

PREPARER RD DATE PREPARED 04-13-12

12020243429

12020243430

