

**RAESE FOR SENATE
P. O. BOX 262
MORGANTOWN, WV 26507-0262
304-594-0468**

SECRETARY OF THE SENATE
JUL -2 PM 4:37

June 27, 2007

Office of the Secretary of the Senate
Senate Office of Public Records
232 Hart Senate Office Building
Washington, DC 20510

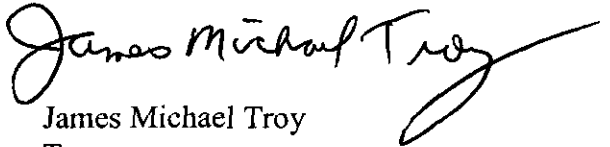
Re: FEC Form 3, Schedules A
Reporting Period: October 15 Quarterly Report 2006 (7/1/06 – 9/30/06)
Committee Name: Raese for Senate Committee
Committee No.: C00182089
Senate Candidate: John Reeves Raese
Candidate No.: S4WV00084

Dear Sir or Madam:

You will find enclosed an amended memo Schedule A for the referenced period listing all of the contributions for which additional donor information was subsequently received pursuant to the Committee's "best efforts".

Please let me know if you need additional information.

Very truly yours,


James Michael Troy
Treasurer

Enclosure: Amended Schedule A
Cc: Ms. Robin Kelly

27020192401

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

SECRETARY OF THE SENATE

07 JUL -2 PM 4:38
Office Use Only

1. NAME OF
COMMITTEE (in full)

USE FEC MAILING LABEL
OR TYPE OR PRINT ▼

Example: If typing, type
over the lines

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

C00182089

3. IS THIS
REPORT

☐

NEW
(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

in the
State of

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

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

07

01

2006

through

09

30

2006

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

Date

06

15

2007

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)

27020192402

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Raese for Senate

Report Covering the Period:

From:

M M
0 7

D D
0 1

Y Y Y Y
2 0 0 6

To:

M M
0 9

D D
3 0

Y Y Y Y
2 0 0 6

	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)).....	337293.56	805378.73
(b) Total Contribution Refunds (from Line 20(d)).....	598.76	598.76
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	336694.80	804779.97
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	1273664.06	2406989.19
(b) Total Offsets to Operating Expenditures (from Line 14).....	9773.39	9773.39
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	1263890.67	2397215.80
8. Cash on Hand at Close of Reporting Period (from Line 27).....	142248.63	
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).....	2287803.00	

For further information contact:

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

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

27020192403

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 02/2003)

Page 3

Write or Type Committee Name
Raese for Senate

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

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		
(i) Itemized (use Schedule A).....	264410.93	587808.94
(ii) Unitemized.....	45297.65	100384.81
(iii) TOTAL of contributions from individuals..... ►	309708.58	688193.75
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACS).....	27584.98	117184.98
	0.00	0.00
(d) The Candidate.....		
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	337293.56	805378.73
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	890000.00	2015000.00
	0.00	0.00
(b) All Other Loans.....		
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	890000.00	2015000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	9773.39	9773.39
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ►	1237066.95	2830152.12

1

27020192404

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS

COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date

17. OPERATING EXPENDITURES.....	1273664.06	2406989.19
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	4200.00	4200.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	4200.00	4200.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	598.76	598.76
(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)).....	598.76	598.76
21. OTHER DISBURSEMENTS.....	0.00	380.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▷	1278462.82	2412167.95

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	183644.50
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	1237066.95
25. SUBTOTAL (add Line 23 and Line 24).....	1420711.45
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	1278462.82
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	142248.63

27020192405

SCHEDULE C (FEC Form 3)

LOANS

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

PAGE 5 / 305

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Raese for Senate

Transaction ID: SC006

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

MR. JOHN R. RAESE

Election:

☐ Primary

☐ General

☒ Other (specify) ▼

PRIMARY - 1984

Mailing Address PO BOX 262

City MORGANTOWN

State WV

ZIP Code 26507

Original Amount of Loan

90000.00

Cumulative Payment To Date

216.44

Balance Outstanding at Close of This Period

89783.56

TERMS

Date Incurred

M M
0 4

D D
2 4

Y Y Y Y
1 9 8 4

Date Due

NONE

Interest Rate

0.0000 % (apr)

Secured:

☐ Yes ☒ No

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

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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 6 / 305

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID: SC007

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

Election:
☐ Primary
☐ General
☒ Other (specify) ▼
PRIMARY - 1984

Mailing Address PO BOX 262

City MORGANTOWN State WV ZIP Code 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: M M D D Y Y Y Y 0 5 0 4 1 9 8 4
Date Due: NONE
Interest Rate: 0.0000 % (apr)
Secured: ☐ Yes ☒ No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

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 7 / 305

FOR LINE NUMBER:
(check only one) ☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Raese for Senate

Transaction ID: SC008

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

MR. JOHN R. RAESE

Election:

☐ Primary

☐ General

☒ Other (specify) ▼

PRIMARY - 1984

Mailing Address PO BOX 262

City MORGANTOWN

State WV

ZIP Code 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

Secured:

M M
0 5

D D
0 7

Y Y Y Y Y Y
1 9 8 4

NONE

0.0000 % (apr)

☐ Yes ☒ No

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

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

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FOR LINE NUMBER:
(check only one) ☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Raese for Senate

Transaction ID: SC009

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

MR. JOHN R. RAESE

Election:

☐ Primary

☐ General

☒ Other (specify) ▼

PRIMARY - 1984

Mailing Address PO BOX 262

City MORGANTOWN

State WV

ZIP Code 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:

M M
0 5

D D
1 2

Y Y Y Y
1 9 8 4

NONE

0.0000 % (apr)

☐ Yes ☒ No

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

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

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FOR LINE NUMBER:
(check only one) ☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID: SC011

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

Election:
☐ Primary
☐ General
☒ Other (specify) ▼
PRIMARY - 1984

Mailing Address PO BOX 262

City MORGANTOWN State WV ZIP Code 26507

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
4700.00	200.00	4500.00

TERMS

Date Incurred: M M D D Y Y Y Y 0 6 0 4 1 9 8 4
Date Due: NONE
Interest Rate: 0.0000 % (apr)
Secured: ☐ Yes ☒ No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

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.

27020192410

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: SC012

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

Election:
☐ Primary
☐ General
☒ Other (specify) ▼
PRIMARY - 1984

Mailing Address PO BOX 262

City MORGANTOWN State WV ZIP Code 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: M 06 D 29 Y 1984
Date Due: NONE
Interest Rate: 0.0000% (apr)
Secured: ☐ Yes ☒ No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

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 11 / 305

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID: SC013

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

Election:
☐ Primary
☐ General
☒ Other (specify) ▼
GENERAL - 1984

Mailing Address PO BOX 262

City MORGANTOWN State WV ZIP Code 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: M M D D Y Y Y Y 0 7 1 8 1 9 8 4
Date Due: NONE
Interest Rate: 0.0000% (apr)
Secured: ☐ Yes ☒ No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
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 12 / 305

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID: SC014

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

Election:
☐ Primary
☐ General
☒ Other (specify) ▼
GENERAL - 1984

Mailing Address PO BOX 262

City MORGANTOWN State WV ZIP Code 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: M 07 D 18 Y 1984
Date Due: NONE
Interest Rate: 0.0000 % (apr)
Secured: ☐ Yes ☒ No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
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 13 / 305

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID: SC015

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

Election:

☐ Primary
☐ General
☒ Other (specify) ▼
GENERAL - 1984

Mailing Address PO BOX 262

City MORGANTOWN State WV ZIP Code 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: M 09 D 04 Y 1984
Date Due: NONE
Interest Rate: 0.0000 % (apr)
Secured: ☐ Yes ☒ No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

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 14 / 305

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Raese for Senate

Transaction ID: SC016

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

MR. JOHN R. RAESE

Election:

☐ Primary
☐ General
☒ Other (specify) ▼

GENERAL - 1984

Mailing Address PO BOX 262

City MORGANTOWN

State WV

ZIP Code 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

M M
09

D D
24

Y Y Y Y
1984

Date Due

NONE

Interest Rate

0.0000 % (apr)

Secured:

☐ Yes ☒ No

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

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

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FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID: SC017

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

Election:
☐ Primary
☐ General
☒ Other (specify) ▼
GENERAL - 1984

Mailing Address PO BOX 262

City MORGANTOWN State WV ZIP Code 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: M 10 D 05 Y 1984
Date Due: NONE
Interest Rate: 0.0000% (apr)
Secured: ☐ Yes ☒ No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

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 16 / 305

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Raese for Senate

Transaction ID: SC018

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

MR. JOHN R. RAESE

Election:

☐ Primary

☐ General

☒ Other (specify) ▼

GENERAL - 1984

Mailing Address PO BOX 262

City MORGANTOWN

State WV

ZIP Code 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:

M M
1 0

D D
2 4

Y Y Y Y
1 9 8 4

NONE

0.0000 % (apr)

☐ Yes ☒ No

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

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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 17 / 305

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Raese for Senate

Transaction ID: SC019

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

MR. JOHN R. RAESE

Election:

☐ Primary

☐ General

☒ Other (specify) ▼

GENERAL - 1984

Mailing Address PO BOX 262

City MORGANTOWN

State WV

ZIP Code 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

M M
1 1

D D
0 8

Y Y Y Y
1 9 8 4

Date Due

NONE

Interest Rate

0.0000 % (apr)

Secured:

☐ Yes ☒ No

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

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

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FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Raese for Senate

Transaction ID: SC010

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

MR. JOHN R. RAESE

Election:

☐ Primary

☐ General

☒ Other (specify) ▼

PRIMARY - 1984

Mailing Address PO BOX 262

City MORGANTOWN

State WV

ZIP Code 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

Date Due

Interest Rate

Secured:

M M
1 2

D D
2 7

Y Y Y Y Y Y
1 9 8 5

NONE

0.0000 % (apr)

☐ Yes

☒ No

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

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

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FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID: SC004

LOAN SOURCE Full Name (Last, First, Middle Initial)
MR. JOHN R. RAESE - PERSONAL FUNDS

Election:
☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address PO BOX 262

City MORGANTOWN State WV ZIP Code 26507

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
35000.00	4200.00	30800.00

TERMS

Date Incurred: M 01 D 31 Y 2006
Date Due: NONE
Interest Rate: 0.0000% (apr)
Secured: ☐ Yes ☒ No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional) ▶

30800.00

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)
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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: SC005

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

MR. JOHN R. RAESE - PERSONAL FUNDS

Election:

☒ Primary

☐ General

☐ Other (specify) ▼

Mailing Address PO BOX 262

City MORGANTOWN

State WV

ZIP Code 26507

Original Amount of Loan

90000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

90000.00

TERMS

Date Incurred

M M
0 3

D D
2 4

Y Y Y Y
2 0 0 6

Date Due

NONE

Interest Rate

0.0000 % (apr)

Secured:

☐ Yes ☒ No

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

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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)

90000.00

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: SC021

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

MR. JOHN R. RAESE - PERSONAL FUNDS

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address PO BOX 262

City MORGANTOWN

State WV

ZIP Code 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:

M M
0 5

D D
0 3

Y Y Y Y
2 0 0 6

NONE

0.0000 % (apr)

☐ Yes ☒ No

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

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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

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FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Raese for Senate

Transaction ID: SC022

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

MR. JOHN R. RAESE - PERSONAL FUNDS

Election:

☐ Primary
☒ General
☐ Other (specify) ▼

Mailing Address PO BOX 262

City MORGANTOWN

State WV

ZIP Code 26507

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

35000.00

0.00

35000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 5

D D
1 6

Y Y Y Y
2 0 0 6

NONE

0.0000 % (apr)

☐ Yes ☒ No

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

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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)

35000.00

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: SC031

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

MR. JOHN R. RAESE - BANK LOAN SECURED BY PERSONAL PROPERTY

Election:

☐ Primary
☒ General
☐ Other (specify) ▼

Mailing Address PO BOX 262

City MORGANTOWN State WV ZIP Code 26507

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

179240.00

0.00

179240.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 9

D D
0 8

Y Y Y Y
2 0 0 6

NONE

7.7500 % (apr)

☒ Yes ☐ No

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

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

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) ▶

179240.00

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: SC032

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

MR. JOHN R. RAESE - BANK LOAN SECURED BY PERSONAL PROPERTY

Election:

☐ Primary

☒ General

☐ Other (specify) ▼

Mailing Address PO BOX 262

City MORGANTOWN

State WV

ZIP Code 26507

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

95760.00

0.00

95760.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

MM
09

DD
29

YYYY
2006

NONE

7.7500 % (apr)

☒ Yes ☐ No

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

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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) ▶

95760.00

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 25 / 305

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID: SC001

LOAN SOURCE Full Name (Last, First, Middle Initial)
MR. JOHN R. RAESE - BANK LOAN SECURED BY STOCK

Election:
☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address PO BOX 262

City MORGANTOWN State WV ZIP Code 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:
M M D D Y Y Y Y 0 4 0 7 2 0 0 6	NONE	7.5800 % (apr)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

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

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FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Raese for Senate

Transaction ID: SC002

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

MR. JOHN R. RAESE - BANK LOAN SECURED BY STOCK

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address PO BOX 262

City MORGANTOWN

State WV

ZIP Code 26507

Original Amount of Loan

200000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

200000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 4

D D
1 1

Y Y Y Y Y Y
2 0 0 6

NONE

7.5800 % (apr)

☒ Yes ☐ No

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

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount

Guaranteed
Outstanding:

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 27 / 305

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Raese for Senate

Transaction ID: SC003

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

MR. JOHN R. RAESE - BANK LOAN SECURED BY STOCK

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address PO BOX 262

City MORGANTOWN

State WV

ZIP Code 26507

Original Amount of Loan

70000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

70000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 4

D D
1 9

Y Y Y Y Y Y
2 0 0 6

NONE

7.5800 % (apr)

☒ Yes ☐ No

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

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City

State

ZIP Code

Amount
Guaranteed
Outstanding:

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) ▶

70000.00

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: SC020

LOAN SOURCE Full Name (Last, First, Middle Initial)
MR. JOHN R. RAESE - BANK LOAN SECURED BY STOCK

Election:
☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address PO BOX 262

City MORGANTOWN State WV ZIP Code 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 M D D Y Y Y Y 04 27 2006	NONE	7.5800% (apr)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

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

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FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Raese for Senate

Transaction ID: SC023

LOAN SOURCE Full Name (Last, First, Middle Initial)
MR. JOHN R. RAESE - BANK LOAN SECURED BY STOCK

Election:

☐ Primary
☒ General
☐ Other (specify) ▼

Mailing Address PO BOX 262

City MORGANTOWN State WV ZIP Code 26507

Original Amount of Loan

Cumulative Payment To Date

Balance Outstanding at Close of This Period

125000.00

0.00

125000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 5

D D
2 6

Y Y Y Y
2 0 0 6

NONE

7.5800 % (apr)

☒ Yes ☐ No

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

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

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) ▶

125000.00

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 30 / 305

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID: SC024

LOAN SOURCE Full Name (Last, First, Middle Initial)
MR. JOHN R. RAESE - BANK LOAN SECURED BY STOCK

Election:
☐ Primary
☒ General
☐ Other (specify) ▼

Mailing Address PO BOX 262

City MORGANTOWN State WV ZIP Code 26507

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
135000.00	0.00	135000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
MM DD YYYY 06 23 2006	NONE	7.5800% (apr)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)

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 31 / 305

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID: SC025

LOAN SOURCE Full Name (Last, First, Middle Initial)
MR. JOHN R. RAESE - BANK LOAN SECURED BY STOCK

Election:
☐ Primary
☒ General
☐ Other (specify) ▼

Mailing Address PO BOX 262

City MORGANTOWN State WV ZIP Code 26507

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
40000.00	0.00	40000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M M 0 8 D D 0 7 Y Y Y Y 2 0 0 6	NONE	7.5800% (apr)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)

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 32 / 305

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID: SC026

LOAN SOURCE Full Name (Last, First, Middle Initial)
MR. JOHN R. RAESE - BANK LOAN SECURED BY STOCK

Election:
☐ Primary
☒ General
☐ Other (specify) ▼

Mailing Address PO BOX 262

City MORGANTOWN State WV ZIP Code 26507

Original Amount of Loan 250000.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 250000.00
--------------------------------------	------------------------------------	--

TERMS

Date Incurred M M D D Y Y Y Y 08 10 2006	Date Due NONE	Interest Rate 7.5800 % (apr)	Secured: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
--	------------------	---------------------------------	---

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID: SC027

LOAN SOURCE Full Name (Last, First, Middle Initial)
MR. JOHN R. RAESE - BANK LOAN SECURED BY STOCK

Election:
☐ Primary
☒ General
☐ Other (specify) ▼

Mailing Address PO BOX 262

City MORGANTOWN State WV ZIP Code 26507

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
75000.00	0.00	75000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
MM 08 DD 11 YY 2006	NONE	7.5800 % (apr)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)

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: SC028

LOAN SOURCE Full Name (Last, First, Middle Initial)
MR. JOHN R. RAESE - BANK LOAN SECURED BY STOCK

Election:
☐ Primary
☒ General
☐ Other (specify) ▼

Mailing Address PO BOX 262

City MORGANTOWN State WV ZIP Code 26507

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
75000.00	0.00	75000.00

TERMS

Date Incurred: M M 08 D D 18 Y Y Y Y 2006
Date Due: NONE
Interest Rate: 7.5800 % (apr)
Secured: ☒ Yes ☐ No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional) ▶
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 35 / 305
FOR LINE NUMBER: (check only one)	<input checked="" type="checkbox"/> 13a <input type="checkbox"/> 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID: SC029

LOAN SOURCE Full Name (Last, First, Middle Initial) MR. JOHN R. RAESE - BANK LOAN SECURED BY STOCK	Election: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address PO BOX 262	
City MORGANTOWN State WV ZIP Code 26507	

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
75000.00	0.00	75000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
MM 08 DD 30 YY 2006	NONE	7.5800 % (apr)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

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

Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
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)	75000.00
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.	

27020192436

SCHEDULE C (FEC Form 3)

LOANS

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

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Raese for Senate

Transaction ID: SC030

LOAN SOURCE Full Name (Last, First, Middle Initial)
MR. JOHN R. RAESE - BANK LOAN SECURED BY STOCK

Election:

☐ Primary
☒ General
☐ Other (specify) ▼

Mailing Address PO BOX 262

City MORGANTOWN State WV ZIP Code 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:

MM
09

DD
08

YYYYYY
2006

NONE

7.5800 % (apr)

☒ Yes ☐ No

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

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

Full Name (Last, First, Middle Initial)

Name of Employer

Mailing Address

Occupation

City State ZIP Code

Amount
Guaranteed
Outstanding:

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) ▶

2202283.56

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

27020192437

SCHEDULE C-1

LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for
Information found on
Page 37 / 305 of Schedule C

Federal Election Commission, Washington, D.C. 20463

Name of Committee (in Full) Raese for Senate		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;">C00182089</div>	
Back Ref ID: SC031			
LENDING INSTITUTION (LENDER) Full Name CENTRA BANK, INC.		Amount of Loan <div style="border: 1px solid black; padding: 2px; display: inline-block;">275000.00</div>	
Interest Rate (APR) <div style="border: 1px solid black; padding: 2px; display: inline-block;">7.7500 %</div>		Date Incurred or Established <div style="border: 1px solid black; padding: 2px; display: inline-block;">08 25 2006</div>	
Mailing Address 990 ELMER PRINCE DRIVE PO BOX 656		Date Due <div style="border: 1px solid black; padding: 2px; display: inline-block;">2/25/2017</div>	
City MORGANTOWN	State WV	Zip Code 26507-0656	
A. Has loan been restructured? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, date originally incurred : <div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>			
B. If line of credit, Amount of this Draw: <div style="border: 1px solid black; padding: 2px; display: inline-block;">179240.00</div>		Total Outstanding balance : <div style="border: 1px solid black; padding: 2px; display: inline-block;">179240.00</div>	
C. Are other parties secondarily liable for the debt incurred? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Endorsers and guarantors must be reported on Sch. C)			
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, specify: <u>PERSONAL PROPERTY</u>		What is the value of this collateral? <div style="border: 1px solid black; padding: 2px; display: inline-block;">275000.00</div> Does the lender have a perfected security interest in it? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: <u> </u>		What is the estimated value? <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>	
A depository account must be established pursuant to 11 CFR 100.82 and 100.142.			
Date account established: <div style="border: 1px solid black; padding: 2px; display: inline-block;">12 30 1899</div>		Location of account Address: <u> </u> City, State, Zip: <u> </u>	
F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.			
G. COMMITTEE TREASURER Typed Name Signature		DATE <div style="border: 1px solid black; padding: 2px; display: inline-block;">12 30 1899</div>	
H. Attach a signed copy of the loan agreement.			
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of this loan are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.			
AUTHORIZED REPRESENTATIVE Typed Name Signature		DATE <div style="border: 1px solid black; padding: 2px; display: inline-block;">12 30 1899</div>	
Title			

SCHEDULE C-1

LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for
Information found on
Page 38 / 305 of Schedule C

Federal Election Commission, Washington, D.C. 20463

Name of Committee (in Full) Raese for Senate		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;">C00182089</div>	
Back Ref ID: SC032			
LENDING INSTITUTION (LENDER) Full Name CENTRA BANK, INC.	Amount of Loan <div style="border: 1px solid black; padding: 2px; display: inline-block;">275000.00</div>	Interest Rate (APR) <div style="border: 1px solid black; padding: 2px; display: inline-block;">7.7500 %</div>	
Mailing Address 990 ELMER PRINCE DRIVE PO BOX 656	Date Incurred or Established <div style="border: 1px solid black; padding: 2px; display: inline-block;">08 / 25 / 2006</div>	Date Due <div style="border: 1px solid black; padding: 2px; display: inline-block;">2/25/2017</div>	
City MORGANTOWN	State Zip Code WV 26507-0656		
<p>A. Has loan been restructured? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, date originally incurred : <div style="border: 1px solid black; padding: 2px; display: inline-block;"> / / </div></p>			
B. If line of credit, Amount of this Draw: <div style="border: 1px solid black; padding: 2px; display: inline-block;">95760.00</div>		Total Outstanding balance : <div style="border: 1px solid black; padding: 2px; display: inline-block;">275000.00</div>	
C. Are other parties secondarily liable for the debt incurred? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Endorsers and guarantors must be reported on Sch. C)			
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, specify: <u>PERSONAL PROPERTY</u>		What is the value of this collateral? <div style="border: 1px solid black; padding: 2px; display: inline-block;">275000.00</div> Does the lender have a perfected security interest in it? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____		What is the estimated value? <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>	
A depository account must be established pursuant to 11 CFR 100.82 and 100.142. Date account established: <div style="border: 1px solid black; padding: 2px; display: inline-block;">12 / 30 / 1899</div>		Location of account Address: _____ City, State, Zip: _____	
F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.			
G. COMMITTEE TREASURER Typed Name Signature		DATE <div style="border: 1px solid black; padding: 2px; display: inline-block;">12 / 30 / 1899</div>	
H. Attach a signed copy of the loan agreement.			
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of this loan are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.			
AUTHORIZED REPRESENTATIVE Typed Name Signature		DATE <div style="border: 1px solid black; padding: 2px; display: inline-block;">12 / 30 / 1899</div>	
Title			

SCHEDULE C-1

LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for
Information found on
Page 39 / 305 of Schedule C

Federal Election Commission, Washington, D.C. 20463

Name of Committee (in Full) Raese for Senate		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;">C00182089</div>	
		Back Ref ID: SC001	
LENDING INSTITUTION (LENDER) Full Name THE HUNTINGTON NATIONAL BANK		Amount of Loan <div style="border: 1px solid black; padding: 2px; text-align: center;">400000.00</div>	Interest Rate (APR) <div style="border: 1px solid black; padding: 2px; text-align: center;">7.5800 %</div>
Mailing Address 201 HIGH STREET		Date Incurred or Established <div style="display: flex; justify-content: space-around;"><div style="border: 1px solid black; padding: 2px;">03</div><div style="border: 1px solid black; padding: 2px;">14</div><div style="border: 1px solid black; padding: 2px;">2006</div></div>	
City MORGANTOWN	State WV	Zip Code 26505	Date Due <div style="border: 1px solid black; padding: 2px; text-align: center;">12/31/2006</div>
A. Has loan been restructured? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, date originally incurred : <div style="display: flex; justify-content: space-around;"><div style="border: 1px solid black; padding: 2px;"> </div><div style="border: 1px solid black; padding: 2px;"> </div><div style="border: 1px solid black; padding: 2px;"> </div></div>			
B. If line of credit, Amount of this Draw: <div style="border: 1px solid black; padding: 2px; text-align: center;">30000.00</div>		Total Outstanding balance : <div style="border: 1px solid black; padding: 2px; text-align: center;">30000.00</div>	
C. Are other parties secondarily liable for the debt incurred? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Endorsers and guarantors must be reported on Sch. C)			
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, specify: <u>STOCK IN CERTAIN NON-PUBLICLY TRADED COMPANIES</u>		What is the value of this collateral? <div style="border: 1px solid black; padding: 2px; text-align: center;">2670000.00</div> Does the lender have a perfected security interest in it? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____		What is the estimated value? <div style="border: 1px solid black; padding: 2px; text-align: center;">0.00</div>	
A depository account must be established pursuant to 11 CFR 100.82 and 100.142.			
Date account established: <div style="display: flex; justify-content: space-around;"><div style="border: 1px solid black; padding: 2px;">12</div><div style="border: 1px solid black; padding: 2px;">30</div><div style="border: 1px solid black; padding: 2px;">1899</div></div>		Location of account Address: City, State, Zip: _____	
F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.			
G. COMMITTEE TREASURER Typed Name JAMES TROY Signature _____		DATE <div style="display: flex; justify-content: space-around;"><div style="border: 1px solid black; padding: 2px;">04</div><div style="border: 1px solid black; padding: 2px;">27</div><div style="border: 1px solid black; padding: 2px;">2006</div></div>	
H. Attach a signed copy of the loan agreement.			
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of this loan are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.			
AUTHORIZED REPRESENTATIVE Typed Name N/A Signature _____		DATE <div style="display: flex; justify-content: space-around;"><div style="border: 1px solid black; padding: 2px;">04</div><div style="border: 1px solid black; padding: 2px;">27</div><div style="border: 1px solid black; padding: 2px;">2006</div></div>	

27020192440

SCHEDULE C-1

LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for
Information found on
Page 40 / 305 of Schedule C

Federal Election Commission, Washington, D.C. 20463

Name of Committee (in Full) Raese for Senate		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;">C00182089</div>	
Back Ref ID: SC002			
LENDING INSTITUTION (LENDER) Full Name THE HUNTINGTON NATIONAL BANK	Amount of Loan <div style="border: 1px solid black; padding: 2px; display: inline-block;">400000.00</div>	Interest Rate (APR) <div style="border: 1px solid black; padding: 2px; display: inline-block;">7.5800 %</div>	
Mailing Address 201 HIGH STREET	Date Incurred or Established <div style="border: 1px solid black; padding: 2px; display: inline-block;">03 / 14 / 2006</div>	Date Due <div style="border: 1px solid black; padding: 2px; display: inline-block;">12/31/2006</div>	
City MORGANTOWN	State WV	Zip Code 26505	
<p>A. Has loan been restructured? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, date originally incurred : <div style="border: 1px solid black; padding: 2px; display: inline-block;"> / / </div></p>			
B. If line of credit, Amount of this Draw: <div style="border: 1px solid black; padding: 2px; display: inline-block;">200000.00</div>		Total Outstanding balance : <div style="border: 1px solid black; padding: 2px; display: inline-block;">230000.00</div>	
C. Are other parties secondarily liable for the debt incurred? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Endorsers and guarantors must be reported on Sch. C)			
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, specify: <u>STOCK IN CERTAIN NON-PUBLICLY TRADED COMPANIES</u>		What is the value of this collateral? <div style="border: 1px solid black; padding: 2px; display: inline-block;">2670000.00</div> Does the lender have a perfected security interest in it? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes What is the estimated value? <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>	
E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____			
A depository account must be established pursuant to 11 CFR 100.82 and 100.142. Date account established: <div style="border: 1px solid black; padding: 2px; display: inline-block;">12 / 30 / 1899</div>		Location of account Address: _____ City, State, Zip: _____	
F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.			
G. COMMITTEE TREASURER Typed Name JAMES TROY Signature _____		DATE <div style="border: 1px solid black; padding: 2px; display: inline-block;">04 / 27 / 2006</div>	
H. Attach a signed copy of the loan agreement.			
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of this loan are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.			
AUTHORIZED REPRESENTATIVE Typed Name N/A Signature _____		DATE <div style="border: 1px solid black; padding: 2px; display: inline-block;">04 / 27 / 2006</div>	
Title _____			

SCHEDULE C-1

LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

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Name of Committee (in Full) Raese for Senate		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;">C00182089</div>	
Back Ref ID: SC003			
LENDING INSTITUTION (LENDER) Full Name THE HUNTINGTON NATIONAL BANK	Amount of Loan <div style="border: 1px solid black; padding: 2px; display: inline-block;">400000.00</div>	Interest Rate (APR) <div style="border: 1px solid black; padding: 2px; display: inline-block;">7.5800 %</div>	
Mailing Address 201 HIGH STREET	Date Incurred or Established <div style="border: 1px solid black; padding: 2px; display: inline-block;">03 / 14 / 2006</div>		
City MORGANTOWN	State WV	Zip Code 26505	Date Due <div style="border: 1px solid black; padding: 2px; display: inline-block;">12/31/2006</div>
<p>A. Has loan been restructured? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, date originally incurred : <div style="border: 1px solid black; padding: 2px; display: inline-block;"> / / </div></p>			
<p>B. If line of credit, Amount of this Draw: <div style="border: 1px solid black; padding: 2px; display: inline-block;">70000.00</div> Total Outstanding balance : <div style="border: 1px solid black; padding: 2px; display: inline-block;">300000.00</div></p>			
<p>C. Are other parties secondarily liable for the debt incurred? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Endorsers and guarantors must be reported on Sch. C)</p>			
<p>D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, specify: <u>STOCK IN CERTAIN NON-PUBLICLY TRADED COMPANIES</u></p>			<p>What is the value of this collateral? <div style="border: 1px solid black; padding: 2px; display: inline-block;">2670000.00</div></p> <p>Does the lender have a perfected security interest in it? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes</p>
<p>E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____</p>			<p>What is the estimated value? <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div></p>
<p>A depository account must be established pursuant to 11 CFR 100.82 and 100.142.</p>			
Date account established: <div style="border: 1px solid black; padding: 2px; display: inline-block;">12 / 30 / 1899</div>		Location of account Address: _____ City, State, Zip: _____	
<p>F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.</p>			
<p>G. COMMITTEE TREASURER Typed Name JAMES TROY Signature _____</p>		<p>DATE <div style="border: 1px solid black; padding: 2px; display: inline-block;">04 / 27 / 2006</div></p>	
<p>H. Attach a signed copy of the loan agreement.</p>			
<p>I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of this loan are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.</p>			
<p>AUTHORIZED REPRESENTATIVE Typed Name N/A Signature _____</p>		<p>DATE <div style="border: 1px solid black; padding: 2px; display: inline-block;">04 / 27 / 2006</div></p>	

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LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

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Name of Committee (in Full) Raese for Senate		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px;">C00182089</div>	
Back Ref ID: SC020			
LENDING INSTITUTION (LENDER) Full Name THE HUNTINGTON NATIONAL BANK	Amount of Loan <div style="border: 1px solid black; padding: 2px;">400000.00</div>	Interest Rate (APR) <div style="border: 1px solid black; padding: 2px;">7.5800 %</div>	
Mailing Address 201 HIGH STREET	Date Incurred or Established <div style="border: 1px solid black; padding: 2px;">03 14 2006</div>		
City MORGANTOWN	State WV	Zip Code 26505	Date Due <div style="border: 1px solid black; padding: 2px;">12/31/2006</div>
A. Has loan been restructured? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, date originally incurred : <div style="border: 1px solid black; padding: 2px;"> </div>			
B. If line of credit, Amount of this Draw: <div style="border: 1px solid black; padding: 2px;">100000.00</div>		Total Outstanding balance : <div style="border: 1px solid black; padding: 2px;">400000.00</div>	
C. Are other parties secondarily liable for the debt incurred? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Endorsers and guarantors must be reported on Sch. C)			
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, specify: <u>STOCK IN CERTAIN NON-PUBLICLY TRADED COMPANIES</u>		What is the value of this collateral? <div style="border: 1px solid black; padding: 2px;">2670000.00</div> Does the lender have a perfected security interest in it? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: <u> </u>		What is the estimated value? <div style="border: 1px solid black; padding: 2px;">0.00</div>	
A depository account must be established pursuant to 11 CFR 100.82 and 100.142.			
Date account established: <div style="border: 1px solid black; padding: 2px;">12 30 1899</div>		Location of account Address: <u> </u> City, State, Zip: <u> </u>	
F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.			
G. COMMITTEE TREASURER Typed Name JAMES TROY Signature <u> </u>		DATE <div style="border: 1px solid black; padding: 2px;">07 15 2006</div>	
H. Attach a signed copy of the loan agreement.			
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of this loan are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.			
AUTHORIZED REPRESENTATIVE Typed Name N/A Signature <u> </u>		DATE <div style="border: 1px solid black; padding: 2px;">07 15 2006</div>	
Title N/A			

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SCHEDULE C-1

LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

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Federal Election Commission, Washington, D.C. 20463

Name of Committee (in Full) Raese for Senate		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;">C00182089</div>	
Back Ref ID: SC023			
LENDING INSTITUTION (LENDER) Full Name THE HUNTINGTON NATIONAL BANK	Amount of Loan <div style="border: 1px solid black; padding: 2px; display: inline-block;">700000.00</div>	Interest Rate (APR) <div style="border: 1px solid black; padding: 2px; display: inline-block;">7.5800 %</div>	
Mailing Address 201 HIGH STREET	Date Incurred or Established <div style="border: 1px solid black; padding: 2px; display: inline-block;">05</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">16</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">2006</div>		
City MORGANTOWN	State WV	Zip Code 26505	Date Due <div style="border: 1px solid black; padding: 2px; display: inline-block;">12/31/2006</div>
A. Has loan been restructured? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, date originally incurred : <div style="border: 1px solid black; padding: 2px; display: inline-block;">03</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">14</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">2006</div>			
B. If line of credit, Amount of this Draw: <div style="border: 1px solid black; padding: 2px; display: inline-block;">135000.00</div>		Total Outstanding balance : <div style="border: 1px solid black; padding: 2px; display: inline-block;">525000.00</div>	
C. Are other parties secondarily liable for the debt incurred? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Endorsers and guarantors must be reported on Sch. C)			
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, specify: <u>STOCK IN CERTAIN NON-PUBLICLY TRADED COMPANIES</u>		What is the value of this collateral? <div style="border: 1px solid black; padding: 2px; display: inline-block;">2670000.00</div> Does the lender have a perfected security interest in it? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes What is the estimated value? <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>	
E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____			
A depository account must be established pursuant to 11 CFR 100.82 and 100.142. Location of account _____ Date account established: <div style="border: 1px solid black; padding: 2px; display: inline-block;">12</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">30</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">1899</div> Address: _____ City, State, Zip: _____			
F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.			
G. COMMITTEE TREASURER Typed Name JAMES TROY Signature _____		DATE <div style="border: 1px solid black; padding: 2px; display: inline-block;">07</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">15</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">2006</div>	
H. Attach a signed copy of the loan agreement.			
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of this loan are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.			
AUTHORIZED REPRESENTATIVE Typed Name N/A Signature _____		DATE <div style="border: 1px solid black; padding: 2px; display: inline-block;">07</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">15</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">2006</div>	
Title N/A			

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LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for
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Federal Election Commission, Washington, D.C. 20463

Name of Committee (in Full) Raese for Senate		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;">C00182089</div>	
		Back Ref ID: SC024	
LENDING INSTITUTION (LENDER) Full Name THE HUNTINGTON NATIONAL BANK		Amount of Loan <div style="border: 1px solid black; padding: 2px; text-align: center;">700000.00</div>	Interest Rate (APR) <div style="border: 1px solid black; padding: 2px; text-align: center;">7.5800 %</div>
Mailing Address 201 HIGH STREET		Date Incurred or Established <div style="display: flex; justify-content: space-around;"><div style="border: 1px solid black; padding: 2px;">05</div><div style="border: 1px solid black; padding: 2px;">16</div><div style="border: 1px solid black; padding: 2px;">2006</div></div>	
City MORGANTOWN	State Zip Code WV 26505	Date Due <div style="border: 1px solid black; padding: 2px; text-align: center;">12/31/2006</div>	
A. Has loan been restructured? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, date originally incurred : <div style="display: flex; justify-content: space-around;"><div style="border: 1px solid black; padding: 2px;">03</div><div style="border: 1px solid black; padding: 2px;">14</div><div style="border: 1px solid black; padding: 2px;">2006</div></div>			
B. If line of credit, Amount of this Draw: <div style="border: 1px solid black; padding: 2px; text-align: center;">125000.00</div>		Total Outstanding balance : <div style="border: 1px solid black; padding: 2px; text-align: center;">660000.00</div>	
C. Are other parties secondarily liable for the debt incurred? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Endorsers and guarantors must be reported on Sch. C)			
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, specify: <u>STOCK IN CERTAIN NON-PUBLICLY TRADED COMPANIES</u>		What is the value of this collateral? <div style="border: 1px solid black; padding: 2px; text-align: center;">2670000.00</div> Does the lender have a perfected security interest in it? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____		What is the estimated value? <div style="border: 1px solid black; padding: 2px; text-align: center;">0.00</div>	
A depository account must be established pursuant to 11 CFR 100.82 and 100.142.			
Date account established: <div style="display: flex; justify-content: space-around;"><div style="border: 1px solid black; padding: 2px;">12</div><div style="border: 1px solid black; padding: 2px;">30</div><div style="border: 1px solid black; padding: 2px;">1899</div></div>		Location of account Address: _____ City, State, Zip: _____	
F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.			
G. COMMITTEE TREASURER Typed Name _____ Signature _____		DATE <div style="display: flex; justify-content: space-around;"><div style="border: 1px solid black; padding: 2px;">12</div><div style="border: 1px solid black; padding: 2px;">30</div><div style="border: 1px solid black; padding: 2px;">1899</div></div>	
H. Attach a signed copy of the loan agreement.			
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of this loan are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.			
AUTHORIZED REPRESENTATIVE Typed Name _____ Signature _____		DATE <div style="display: flex; justify-content: space-around;"><div style="border: 1px solid black; padding: 2px;">12</div><div style="border: 1px solid black; padding: 2px;">30</div><div style="border: 1px solid black; padding: 2px;">1899</div></div>	
Title _____			

27020192445

SCHEDULE C-1

LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

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Federal Election Commission, Washington, D.C. 20463

Name of Committee (in Full) Raese for Senate		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;">C00182089</div>	
Back Ref ID: SC025			
LENDING INSTITUTION (LENDER) Full Name THE HUNTINGTON NATIONAL BANK	Amount of Loan <div style="border: 1px solid black; padding: 2px; display: inline-block;">700000.00</div>	Interest Rate (APR) <div style="border: 1px solid black; padding: 2px; display: inline-block;">7.5800 %</div>	
Mailing Address 201 HIGH STREET	Date Incurred or Established <div style="border: 1px solid black; padding: 2px; display: inline-block;">05 / 16 / 2006</div>	Date Due <div style="border: 1px solid black; padding: 2px; display: inline-block;">12/31/2006</div>	
City MORGANTOWN	State WV	Zip Code 26505	
A. Has loan been restructured? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes		If yes, date originally incurred : <div style="border: 1px solid black; padding: 2px; display: inline-block;">03 / 14 / 2006</div>	
B. If line of credit, Amount of this Draw: <div style="border: 1px solid black; padding: 2px; display: inline-block;">40000.00</div>		Total Outstanding balance : <div style="border: 1px solid black; padding: 2px; display: inline-block;">700000.00</div>	
C. Are other parties secondarily liable for the debt incurred? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Endorsers and guarantors must be reported on Sch. C)			
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, specify: <u>STOCK IN CERTAIN NON-PUBLICLY TRADED COMPANIES</u>		What is the value of this collateral? <div style="border: 1px solid black; padding: 2px; display: inline-block;">2670000.00</div> Does the lender have a perfected security interest in it? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____		What is the estimated value? <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>	
A depository account must be established pursuant to 11 CFR 100.82 and 100.142. Date account established: <div style="border: 1px solid black; padding: 2px; display: inline-block;">12 / 30 / 1899</div>		Location of account Address: _____ City, State, Zip: _____	
F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.			
G. COMMITTEE TREASURER Typed Name _____ Signature _____		DATE <div style="border: 1px solid black; padding: 2px; display: inline-block;">12 / 30 / 1899</div>	
H. Attach a signed copy of the loan agreement.			
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of this loan are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.			
AUTHORIZED REPRESENTATIVE Typed Name _____ Signature _____		DATE <div style="border: 1px solid black; padding: 2px; display: inline-block;">12 / 30 / 1899</div>	
Title _____			

SCHEDULE C-1

LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

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Name of Committee (in Full) Raese for Senate		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;">C00182089</div>	
Back Ref ID: SC026			
LENDING INSTITUTION (LENDER) Full Name THE HUNTINGTON NATIONAL BANK	Amount of Loan <div style="border: 1px solid black; padding: 2px; display: inline-block;">1700000.00</div>	Interest Rate (APR) <div style="border: 1px solid black; padding: 2px; display: inline-block;">7.5800 %</div>	
Mailing Address 201 HIGH STREET	Date Incurred or Established <div style="display: flex; justify-content: space-between;"><div>08</div><div>10</div><div>2006</div></div>		
City MORGANTOWN	State WV	Zip Code 26505	Date Due <div style="border: 1px solid black; padding: 2px; display: inline-block;">12/31/2006</div>
A. Has loan been restructured? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, date originally incurred : <div style="display: flex; justify-content: space-between;"><div>03</div><div>14</div><div>2006</div></div>			
B. If line of credit, Amount of this Draw: <div style="border: 1px solid black; padding: 2px; display: inline-block;">250000.00</div>		Total Outstanding balance : <div style="border: 1px solid black; padding: 2px; display: inline-block;">950000.00</div>	
C. Are other parties secondarily liable for the debt incurred? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Endorsers and guarantors must be reported on Sch. C)			
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, specify: <u>STOCK IN CERTAIN NON-PUBLICLY TRADED COMPANIES</u>		What is the value of this collateral? <div style="border: 1px solid black; padding: 2px; display: inline-block;">2670000.00</div> Does the lender have a perfected security interest in it? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____		What is the estimated value? <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>	
A depository account must be established pursuant to 11 CFR 100.82 and 100.142. Date account established: <div style="display: flex; justify-content: space-between;"><div>12</div><div>30</div><div>1899</div></div>		Location of account Address: _____ City, State, Zip: _____	
F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.			
G. COMMITTEE TREASURER Typed Name Signature		DATE <div style="display: flex; justify-content: space-between;"><div>12</div><div>30</div><div>1899</div></div>	
H. Attach a signed copy of the loan agreement.			
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of this loan are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.			
AUTHORIZED REPRESENTATIVE Typed Name Signature		DATE <div style="display: flex; justify-content: space-between;"><div>12</div><div>30</div><div>1899</div></div>	

SCHEDULE C-1

LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for
Information found on
Page 47 / 305 of Schedule C

Federal Election Commission, Washington, D.C. 20463

Name of Committee (in Full) Raese for Senate		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;">C00182089</div>	
Back Ref ID: SC027			
LENDING INSTITUTION (LENDER) Full Name THE HUNTINGTON NATIONAL BANK	Amount of Loan <div style="border: 1px solid black; padding: 2px; display: inline-block;">1700000.00</div>	Interest Rate (APR) <div style="border: 1px solid black; padding: 2px; display: inline-block;">7.5800 %</div>	
Mailing Address 201 HIGH STREET	Date Incurred or Established <div style="border: 1px solid black; padding: 2px; display: inline-block;">08 / 10 / 2006</div>	Date Due <div style="border: 1px solid black; padding: 2px; display: inline-block;">12/31/2006</div>	
City MORGANTOWN	State WV	Zip Code 26505	
A. Has loan been restructured? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, date originally incurred : <div style="border: 1px solid black; padding: 2px; display: inline-block;">03 / 14 / 2006</div>			
B. If line of credit, Amount of this Draw: <div style="border: 1px solid black; padding: 2px; display: inline-block;">75000.00</div>		Total Outstanding balance : <div style="border: 1px solid black; padding: 2px; display: inline-block;">1025000.00</div>	
C. Are other parties secondarily liable for the debt incurred? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Endorsers and guarantors must be reported on Sch. C)			
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, specify: <u>STOCK IN CERTAIN NON-PUBLICLY TRADED COMPANIES</u>		What is the value of this collateral? <div style="border: 1px solid black; padding: 2px; display: inline-block;">2670000.00</div> Does the lender have a perfected security interest in it? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes What is the estimated value? <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>	
E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____			
A depository account must be established pursuant to 11 CFR 100.82 and 100.142. Date account established: <div style="border: 1px solid black; padding: 2px; display: inline-block;">12 / 30 / 1899</div>		Location of account Address: City, State, Zip: _____	
F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.			
G. COMMITTEE TREASURER Typed Name Signature		DATE <div style="border: 1px solid black; padding: 2px; display: inline-block;">12 / 30 / 1899</div>	
H. Attach a signed copy of the loan agreement.			
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of this loan are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.			
AUTHORIZED REPRESENTATIVE Typed Name Signature		DATE <div style="border: 1px solid black; padding: 2px; display: inline-block;">12 / 30 / 1899</div>	
Title			

27020192448

SCHEDULE C-1

LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for
Information found on
Page 48 / 305 of Schedule C

Federal Election Commission, Washington, D.C. 20463

Name of Committee (in Full) Raese for Senate		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;">C00182089</div>	
		Back Ref ID: SC028	
LENDING INSTITUTION (LENDER) Full Name THE HUNTINGTON NATIONAL BANK	Amount of Loan <div style="border: 1px solid black; padding: 2px; display: inline-block;">1700000.00</div>	Interest Rate (APR) <div style="border: 1px solid black; padding: 2px; display: inline-block;">7.5800 %</div>	
Mailing Address 201 HIGH STREET	Date Incurred or Established <div style="border: 1px solid black; padding: 2px; display: inline-block;">08 / 10 / 2006</div>	Date Due <div style="border: 1px solid black; padding: 2px; display: inline-block;">12/31/2006</div>	
City MORGANTOWN	State WV	Zip Code 26505	
A. Has loan been restructured? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes		If yes, date originally incurred : <div style="border: 1px solid black; padding: 2px; display: inline-block;">03 / 14 / 2006</div>	
B. If line of credit, Amount of this Draw: <div style="border: 1px solid black; padding: 2px; display: inline-block;">75000.00</div>		Total Outstanding balance : <div style="border: 1px solid black; padding: 2px; display: inline-block;">1100000.00</div>	
C. Are other parties secondarily liable for the debt incurred? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Endorsers and guarantors must be reported on Sch. C)			
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, specify: <u>STOCK IN CERTAIN NON-PUBLICLY TRADED COMPANIES</u>		What is the value of this collateral? <div style="border: 1px solid black; padding: 2px; display: inline-block;">2670000.00</div> Does the lender have a perfected security interest in it? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	
E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____		What is the estimated value? <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>	
A depository account must be established pursuant to 11 CFR 100.82 and 100.142. Date account established: <div style="border: 1px solid black; padding: 2px; display: inline-block;">12 / 30 / 1899</div>		Location of account Address: _____ City, State, Zip: _____	
F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.			
G. COMMITTEE TREASURER Typed Name _____ Signature _____		DATE <div style="border: 1px solid black; padding: 2px; display: inline-block;">12 / 30 / 1899</div>	
H. Attach a signed copy of the loan agreement.			
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of this loan are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.			
AUTHORIZED REPRESENTATIVE Typed Name _____ Signature _____		DATE <div style="border: 1px solid black; padding: 2px; display: inline-block;">12 / 30 / 1899</div>	
Title _____			

SCHEDULE C-1

LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for
Information found on
Page 49 / 305 of Schedule C

Federal Election Commission, Washington, D.C. 20463

Name of Committee (in Full) Raese for Senate		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;">C00182089</div>	
Back Ref ID: SC029			
LENDING INSTITUTION (LENDER) Full Name THE HUNTINGTON NATIONAL BANK	Amount of Loan <div style="border: 1px solid black; padding: 2px; display: inline-block;">1700000.00</div>	Interest Rate (APR) <div style="border: 1px solid black; padding: 2px; display: inline-block;">7.5800 %</div>	
Mailing Address 201 HIGH STREET	Date Incurred or Established <div style="border: 1px solid black; padding: 2px; display: inline-block;">08 / 10 / 2006</div>	Date Due <div style="border: 1px solid black; padding: 2px; display: inline-block;">12/31/2006</div>	
City MORGANTOWN	State WV	Zip Code 26505	
A. Has loan been restructured? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, date originally incurred : <div style="border: 1px solid black; padding: 2px; display: inline-block;">03 / 14 / 2006</div>			
B. If line of credit, Amount of this Draw: <div style="border: 1px solid black; padding: 2px; display: inline-block;">75000.00</div>		Total Outstanding balance : <div style="border: 1px solid black; padding: 2px; display: inline-block;">1175000.00</div>	
C. Are other parties secondarily liable for the debt incurred? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Endorsers and guarantors must be reported on Sch. C)			
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, specify: <u>STOCK IN CERTAIN NON-PUBLICLY TRADED COMPANIES</u>		What is the value of this collateral? <div style="border: 1px solid black; padding: 2px; display: inline-block;">2670000.00</div> Does the lender have a perfected security interest in it? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes What is the estimated value? <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>	
E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____			
A depository account must be established pursuant to 11 CFR 100.82 and 100.142. Location of account _____ Date account established: <div style="border: 1px solid black; padding: 2px; display: inline-block;">12 / 30 / 1899</div> Address: _____ City, State, Zip: _____			
F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.			
G. COMMITTEE TREASURER Typed Name _____ Signature _____		DATE <div style="border: 1px solid black; padding: 2px; display: inline-block;">12 / 30 / 1899</div>	
H. Attach a signed copy of the loan agreement.			
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of this loan are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.			
AUTHORIZED REPRESENTATIVE Typed Name _____ Signature _____		DATE <div style="border: 1px solid black; padding: 2px; display: inline-block;">12 / 30 / 1899</div>	
Title _____			

SCHEDULE C-1

LOANS AND LINES OF CREDIT FROM LENDING INSTITUTIONS

Supplementary for
Information found on
Page 50 / 305 of Schedule C

Federal Election Commission, Washington, D.C. 20463

Name of Committee (in Full) Raese for Senate		FEC IDENTIFICATION NUMBER <div style="border: 1px solid black; padding: 2px; display: inline-block;">C00182089</div>	
Back Ref ID: SC030			
LENDING INSTITUTION (LENDER) Full Name THE HUNTINGTON NATIONAL BANK	Amount of Loan <div style="border: 1px solid black; padding: 2px; display: inline-block;">1700000.00</div>	Interest Rate (APR) <div style="border: 1px solid black; padding: 2px; display: inline-block;">7.5800 %</div>	
Mailing Address 201 HIGH STREET	Date Incurred or Established <div style="border: 1px solid black; padding: 2px; display: inline-block;">08 / 10 / 2006</div>	Date Due <div style="border: 1px solid black; padding: 2px; display: inline-block;">12/31/2006</div>	
City MORGANTOWN	State WV	Zip Code 26505	
A. Has loan been restructured? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, date originally incurred : <div style="border: 1px solid black; padding: 2px; display: inline-block;">03 / 14 / 2006</div>			
B. If line of credit, Amount of this Draw: <div style="border: 1px solid black; padding: 2px; display: inline-block;">100000.00</div>		Total Outstanding balance : <div style="border: 1px solid black; padding: 2px; display: inline-block;">1275000.00</div>	
C. Are other parties secondarily liable for the debt incurred? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Endorsers and guarantors must be reported on Sch. C)			
D. Are any of the following pledged as collateral for the loan: real estate, personal property, goods, negotiable instruments, certificates of deposit, chattel papers, stocks, accounts receivable, cash on deposit, or other similar traditional collateral? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes If yes, specify: <u>STOCK IN CERTAIN NON-PUBLICLY TRADED COMPANIES</u>		What is the value of this collateral? <div style="border: 1px solid black; padding: 2px; display: inline-block;">2670000.00</div> Does the lender have a perfected security interest in it? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes What is the estimated value? <div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>	
E. Are any future contributions or future receipts of interest income, pledged as collateral for the loan? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If yes, specify: _____			
A depository account must be established pursuant to 11 CFR 100.82 and 100.142. Date account established: <div style="border: 1px solid black; padding: 2px; display: inline-block;">12 / 30 / 1899</div>		Location of account Address: _____ City, State, Zip: _____	
F. If neither of the types of collateral described above was pledged for this loan, or if the amount pledged does not equal or exceed the loan amount, state the basis upon which this loan was made and the basis on which it assures repayment.			
G. COMMITTEE TREASURER Typed Name _____ Signature _____		DATE <div style="border: 1px solid black; padding: 2px; display: inline-block;">12 / 30 / 1899</div>	
H. Attach a signed copy of the loan agreement.			
I. TO BE SIGNED BY THE LENDING INSTITUTION: I. To the best of this institution's knowledge, the terms of the loan and other information regarding the extension of this loan are accurate as stated above. II. The loan was made on terms and conditions (including interest rate) no more favorable at the time than those imposed for similar extensions of credit to other borrowers of comparable credit worthiness. III. This institution is aware of the requirement that a loan must be made on a basis which assures repayment, and has complied with the requirements set forth at 11 CFR 100.82 and 100.142 in making this loan.			
AUTHORIZED REPRESENTATIVE Typed Name _____ Signature _____		DATE <div style="border: 1px solid black; padding: 2px; display: inline-block;">12 / 30 / 1899</div>	
Title _____			

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

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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
MR. CHARLES WELLINGS

Nature of Debt (Purpose):
FUND RAISING - EVENT

Mailing Address HC 68
BOX 3

City State ZIP Code
WEST UNION WV 26456

Outstanding Balance Beginning This Period

0.00

Transaction ID: 15

Amount Incurred This Period

481.05

Payment This Period

0.00

Outstanding Balance at Close of This Period

481.05

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

Nature of Debt (Purpose):
CAMPAIGN CONSULTING

Mailing Address 57 LA BELLE STREET

City State ZIP Code
DAYTON OH 45403

Outstanding Balance Beginning This Period

3000.00

Transaction ID: 1

Amount Incurred This Period

12500.00

Payment This Period

15500.00

Outstanding Balance at Close of This Period

0.00

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

Nature of Debt (Purpose):
UTILITIES

Mailing Address 800 CABIN HILL DRIVE

City State ZIP Code
GREENSBURG PA 15606

Outstanding Balance Beginning This Period

0.00

Transaction ID: 13

Amount Incurred This Period

481.16

Payment This Period

208.20

Outstanding Balance at Close of This Period

272.96

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

754.01

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

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

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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
ARISTEIA GROUP, INC.

Nature of Debt (Purpose):
FUND RAISING - CONSULTING

Mailing Address 1203 PORTNER ROAD

City State ZIP Code
ALEXANDRIA VA 22314

Outstanding Balance Beginning This Period

3927.25

Transaction ID: 2

Amount Incurred This Period

166.50

Payment This Period

4093.75

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
BAKER & HOSTETLER, LLP

Nature of Debt (Purpose):
LEGAL AND PROFESSIONAL

Mailing Address 1050 CONNECTICUT AVE

City State ZIP Code
WASHINGTON DC 20036

Outstanding Balance Beginning This Period

1510.60

Transaction ID: 3

Amount Incurred This Period

3801.65

Payment This Period

4360.65

Outstanding Balance at Close of This Period

951.60

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
BLAINE TURNER ADVERTISING, INC.

Nature of Debt (Purpose):
ADVERTISING

Mailing Address 1401 SARATOGA AVENUE

City State ZIP Code
MORGANTOWN WV 26505

Outstanding Balance Beginning This Period

0.00

Transaction ID: 14

Amount Incurred This Period

55516.00

Payment This Period

54509.00

Outstanding Balance at Close of This Period

1007.00

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

1958.60

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

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

PAGE 53 / 305

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
CAMPAIGN SOLUTIONS // THE DONATELLI GROUP

Nature of Debt (Purpose):
WEBSITE EXPENSES

Mailing Address 118 N. SAINT ASAPH S

City State ZIP Code
ALEXANDRIA VA 22314

Outstanding Balance Beginning This Period

Transaction ID: 4

2182.65

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

2900.17

5082.82

0.00

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

Nature of Debt (Purpose):
COMPLIANCE / DATA SERVICES

Mailing Address 7704 LEESBURG PIKE

City State ZIP Code
FALLS CHURCH VA 22043

Outstanding Balance Beginning This Period

Transaction ID: 16

5250.00

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

16385.54

11619.09

10016.45

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

Nature of Debt (Purpose):
PRINTING

Mailing Address 3126 SEVENTH AVENUE

City State ZIP Code
CHARLESTON WV 25312

Outstanding Balance Beginning This Period

Transaction ID: 5

1703.42

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1497.78

3201.20

0.00

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

10016.45

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

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

PAGE 54 / 305

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
CREATIVE RESPONSE CONCEPTS

Nature of Debt (Purpose):
COMMUNICATIONS CONSULTING

Mailing Address 2760 EISENHOWER AVE

City State ZIP Code
ALEXANDRIA VA 22314

Outstanding Balance Beginning This Period

12647.26

Transaction ID: 6

Amount Incurred This Period

20175.46

Payment This Period

32822.72

Outstanding Balance at Close of This Period

0.00

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

Nature of Debt (Purpose):
TELEPHONE

Mailing Address PO BOX 387

City State ZIP Code
Bruceton Mills WV 26525

Outstanding Balance Beginning This Period

0.00

Transaction ID: 17

Amount Incurred This Period

2385.01

Payment This Period

1731.85

Outstanding Balance at Close of This Period

653.16

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

Nature of Debt (Purpose):
FUND RAISING - EVENT

Mailing Address 1742 FAIRMONT AVE

City State ZIP Code
FAIRMONT WV 26554

Outstanding Balance Beginning This Period

0.00

Transaction ID: 18

Amount Incurred This Period

2876.84

Payment This Period

1751.12

Outstanding Balance at Close of This Period

1125.72

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

1778.88

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

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

PAGE 55 / 305

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
EXPRESS COMMUNICATIONS, LLC

Nature of Debt (Purpose):
TELEPHONE

Mailing Address PO BOX 213
4970 FRIENDSVILLE ROAD

City State ZIP Code
FRIENDSVILLE MD 21531

Outstanding Balance Beginning This Period

0.00

Transaction ID: 19

Amount Incurred This Period

159.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

159.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
FABRIZIO MC LAUGHLIN & ASSOCIATES

Nature of Debt (Purpose):
RESEARCH AND POLLING

Mailing Address 915 KING STREET

City State ZIP Code
ALEXANDRIA VA 22314

Outstanding Balance Beginning This Period

23200.00

Transaction ID: 20

Amount Incurred This Period

36902.51

Payment This Period

46402.51

Outstanding Balance at Close of This Period

13700.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
FOOD AMONG THE FLOWERS

Nature of Debt (Purpose):
CATERING

Mailing Address 1038 QUARRIER STREET

City State ZIP Code
CHARLESTON WV 25301

Outstanding Balance Beginning This Period

0.00

Transaction ID: 21

Amount Incurred This Period

296.80

Payment This Period

0.00

Outstanding Balance at Close of This Period

296.80

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

14155.80

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

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

PAGE 56 / 305

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
GREER INDUSTRIES, INC.

Nature of Debt (Purpose):
AIRPLANE USE

Mailing Address PO BOX 1900

City State ZIP Code
MORGANTOWN WV 26507

Outstanding Balance Beginning This Period

0.00

Transaction ID: 22

Amount Incurred This Period

38337.86

Payment This Period

35037.86

Outstanding Balance at Close of This Period

3300.00

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

Nature of Debt (Purpose):
INTEREST EXPENSE

Mailing Address 201 HIGH STREET

City State ZIP Code
MORGANTOWN WV 26505

Outstanding Balance Beginning This Period

0.00

Transaction ID: 23

Amount Incurred This Period

30355.91

Payment This Period

21399.16

Outstanding Balance at Close of This Period

8956.75

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

Nature of Debt (Purpose):
ADVERTISING

Mailing Address 528 RIDGEWOOD ROAD

City State ZIP Code
HUNTINGTON WV 25701

Outstanding Balance Beginning This Period

0.00

Transaction ID: 24

Amount Incurred This Period

6000.00

Payment This Period

4500.00

Outstanding Balance at Close of This Period

1500.00

1) **SUBTOTALS** This Period This Page (optional).....

13756.75

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

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

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

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FOR LINE NUMBER:
(check only one)

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☒ 10

NAME OF COMMITTEE (In Full)

Raese for Senate

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
JAWS BBQ! INC.

Nature of Debt (Purpose):
FUND RAISING - EVENT

Mailing Address P.O. BOX 429

City State ZIP Code
BUCKHANNON WV 26201

Outstanding Balance Beginning This Period

Transaction ID: 25

0.00

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

2544.00

0.00

2544.00

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

Nature of Debt (Purpose):
VEHICLE LEASE

Mailing Address 1730 MILEGROUND

City State ZIP Code
MORGANTOWN WV 26505

Outstanding Balance Beginning This Period

Transaction ID: 7

984.00

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

0.00

984.00

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
L & K MARKETING

Nature of Debt (Purpose):
ADVERTISING

Mailing Address PO BOX 4379

City State ZIP Code
STAR CITY WV 26504

Outstanding Balance Beginning This Period

Transaction ID: 26

0.00

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

6935.28

5768.38

1166.90

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

3710.90

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

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

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(check only one)

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NAME OF COMMITTEE (In Full)
Raese for Senate

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
MORGANTOWN PRINTING & BINDING

Nature of Debt (Purpose):
PRINTING & STATIONARY

Mailing Address 915 GREENBAG ROAD

City State ZIP Code
MORGANTOWN WV 26508

Outstanding Balance Beginning This Period

0.00

Transaction ID: 27

Amount Incurred This Period

2038.38

Payment This Period

1099.22

Outstanding Balance at Close of This Period

939.16

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

Nature of Debt (Purpose):
FUND RAISING - EVENT

Mailing Address 5 ARMORY ROAD

City State ZIP Code
CLARKSBURG WV 26301

Outstanding Balance Beginning This Period

0.00

Transaction ID: 28

Amount Incurred This Period

320.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

320.00

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

Nature of Debt (Purpose):
OFFICE EXPENSES

Mailing Address 23 SOUTH UNIVERSITY

City State ZIP Code
MORGANTOWN WV 26508

Outstanding Balance Beginning This Period

1683.27

Transaction ID: 8

Amount Incurred This Period

39.75

Payment This Period

1723.02

Outstanding Balance at Close of This Period

0.00

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

1259.16

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

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

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(check only one)

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NAME OF COMMITTEE (In Full)
Raese for Senate

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
RUSS'S RIBS

Nature of Debt (Purpose):
FUND RAISING - EVENT

Mailing Address 103 WEST BEVERLY STREET

City State ZIP Code
KINGWOOD WV 26537

Outstanding Balance Beginning This Period

0.00

Transaction ID: 29

Amount Incurred This Period

4693.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4693.00

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

Nature of Debt (Purpose):
TELEVISION

Mailing Address 705 PRINCE STREET

City State ZIP Code
ALEXANDRIA VA 22314

Outstanding Balance Beginning This Period

1932.56

Transaction ID: 9

Amount Incurred This Period

703103.65

Payment This Period

705036.21

Outstanding Balance at Close of This Period

0.00

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

Nature of Debt (Purpose):
ADVERTISING

Mailing Address 311 N. EISENHOWER DRIVE

City State ZIP Code
BECKLEY WV 25801

Outstanding Balance Beginning This Period

0.00

Transaction ID: 30

Amount Incurred This Period

390.08

Payment This Period

0.00

Outstanding Balance at Close of This Period

390.08

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

5083.08

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

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

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FOR LINE NUMBER:
(check only one)

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☒ 10

NAME OF COMMITTEE (In Full)
Raese for Senate

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
SOUTHWEST PUBLISHING & MAILING

Nature of Debt (Purpose):
FUND RAISING - DIRECT MAIL

Mailing Address 2600 NW TOPEKA AVENU

City State ZIP Code
TOPEKA KS 66617

Outstanding Balance Beginning This Period

Transaction ID: 10

35222.36

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

-3885.86

31336.50

0.00

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

Nature of Debt (Purpose):
FUND RAISING - EVENT

Mailing Address 1310 BRADDOCK PLACE

City State ZIP Code
ALEXANDRIA VA 22314

Outstanding Balance Beginning This Period

Transaction ID: 11

868.64

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

0.00

868.64

0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
STEPHEN WINCHELL & ASSOCIATES

Nature of Debt (Purpose):
FUND RAISING - DIRECT MAIL

Mailing Address 7704 LEESBURG PIKE

City State ZIP Code
FALLS CHURCH VA 22043

Outstanding Balance Beginning This Period

Transaction ID: 12

6102.50

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

23916.59

30019.09

0.00

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

0.00

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

3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

PAGE 61 / 305

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): FUND RAISING - DIRECT MAIL
Mailing Address 2800 SHIRLINGTON ROAD		
City State ARLINGTON VA	ZIP Code 22206	

Outstanding Balance Beginning This Period 0.00		Transaction ID: 31	
Amount Incurred This Period 50060.92	Payment This Period 22017.84	Outstanding Balance at Close of This Period 28043.08	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor TIRELAND OF MORGANTOWN, INC.		Nature of Debt (Purpose): REPAIRS
Mailing Address 1734 MILEGROUND		
City State MORGANTOWN WV	ZIP Code 26505	

Outstanding Balance Beginning This Period 0.00		Transaction ID: 32	
Amount Incurred This Period 777.67	Payment This Period 0.00	Outstanding Balance at Close of This Period 777.67	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor UPS		Nature of Debt (Purpose): POSTAGE
Mailing Address PO BOX 650580		
City State DALLAS TX	ZIP Code 75265	

Outstanding Balance Beginning This Period 0.00		Transaction ID: 33	
Amount Incurred This Period 641.94	Payment This Period 583.42	Outstanding Balance at Close of This Period 58.52	

1) SUBTOTALS This Period This Page (optional).....	28879.27
2) TOTALS This Period (last page this line number only).....	
3) TOTALS 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)	

27020192462

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

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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 VERIZON		Nature of Debt (Purpose): INTERNET EXPENSE	
Mailing Address 3011 HUNGARY SPRING ROAD			
City State RICHMOND VA	ZIP Code 23228		
Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: 34	
Amount Incurred This Period <input type="text" value="908.22"/>	Payment This Period <input type="text" value="828.27"/>	Outstanding Balance at Close of This Period <input type="text" value="79.95"/>	
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor WACHOVIA BANK		Nature of Debt (Purpose): BANK CHARGES	
Mailing Address 6844 OLD DOMINION DRIVE			
City State MCLEAN VA	ZIP Code 22101		
Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: 35	
Amount Incurred This Period <input type="text" value="634.28"/>	Payment This Period <input type="text" value="589.28"/>	Outstanding Balance at Close of This Period <input type="text" value="45.00"/>	
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor WATERFRONT PLACE HOTEL		Nature of Debt (Purpose): FUND RAISING - EVENT	
Mailing Address TWO WATERFRONT PLACE			
City State MORGANTOWN WV	ZIP Code 26501-5958		
Outstanding Balance Beginning This Period <input type="text" value="0.00"/>		Transaction ID: 36	
Amount Incurred This Period <input type="text" value="4041.59"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="4041.59"/>	

1) SUBTOTALS This Period This Page (optional).....	<input type="text" value="4166.54"/>
2) TOTALS This Period (last page this line number only).....	<input type="text" value="85519.44"/>
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	<input type="text"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	<input type="text"/>

27020192463

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 63 / 305
(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) A. MR. DONNIE L. ADKINS		Date of Receipt MM / DD / YYYY 09 / 30 / 2006
Mailing Address P.O. BOX 737		Transaction ID: SA11.3270
City DANIELS	State WV	Zip Code 25832-0737
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2100.00
Name of Employer ASPEN CORPORATION	Occupation EXECUTIVE	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4200.00	

Full Name (Last, First, Middle Initial) B. MRS. ROSA K. ADKINS		Date of Receipt MM / DD / YYYY 09 / 30 / 2006
Mailing Address 561 CLUB CIRCLE		Transaction ID: SA11.3271
City DANIELS	State WV	Zip Code 25832-9215
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2100.00
Name of Employer	Occupation HOMEMAKER	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4200.00	

Full Name (Last, First, Middle Initial) C. MR. GLENN T. ADRIAN		Date of Receipt MM / DD / YYYY 09 / 13 / 2006
Mailing Address 1015 LUCAS DRIVE		Transaction ID: SA11.2926
City MORGANTOWN	State WV	Zip Code 26505-8040
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2100.00
Name of Employer GLENMARK HOLDING LLC	Occupation EXECUTIVE	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3100.00	

SUBTOTAL of Receipts This Page (optional)	6300.00
TOTAL This Period (last page this line number only)	

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SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
or 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) A. MISBAH AHDAB		Date of Receipt MM / DD / YYYY 09 / 30 / 2006
Mailing Address 177 CLARKE AVENUE		Transaction ID: SA11.3279
City PALM BEACH	State FL	Zip Code 33480-6122
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer SELF-EMPLOYED	Occupation REAL ESTATE	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. MR. MICHAEL AINSLIE		Date of Receipt MM / DD / YYYY 09 / 30 / 2006
Mailing Address P.O. BOX 425		Transaction ID: SA11.3363
City SARATOGA SPRINGS	State NY	Zip Code 12866-0425
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer SELF-EMPLOYED	Occupation INVESTOR	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. MR. PATRICK D. ALEXANDER		Date of Receipt MM / DD / YYYY 09 / 30 / 2006
Mailing Address 1325 STEWARTSTOWN ROAD		Transaction ID: SA11.3379
City MORGANTOWN	State WV	Zip Code 26505-2972
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer ALEXANDER CONSTRUCTION CO.	Occupation EXECUTIVE	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

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

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SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

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(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Raese for Senate

Full Name (Last, First, Middle Initial) A. MR. JOEL ALLEN Mailing Address 3951 EASTLAKE DRIVE City State Zip Code MORGANTOWN WV 26508-8673 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 19 / 2006 Transaction ID: SA11.2969 Amount of Each Receipt this Period 250.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) B. MR. DAVID B. ALVAREZ Mailing Address 446 LOCUST AVENUE City State Zip Code BRIDGEPORT WV 26330-1662 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 19 / 2006 Transaction ID: SA11.2972 Amount of Each Receipt this Period 1000.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) C. MR. MANUEL ALVAREZ, III Mailing Address 813 BIRCH STREET City State Zip Code BRIDGEPORT WV 26330-1623 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 30 / 2006 Transaction ID: SA11.3273 Amount of Each Receipt this Period 1000.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)		2250.00
TOTAL This Period (last page this line number only)		

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SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 66 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full) Raese for Senate

Full Name (Last, First, Middle Initial) A. MRS. JAN ANDERSON		Date of Receipt MM / DD / YYYY 09 / 13 / 2006
Mailing Address 3 14TH FAIRWAY COURT		Transaction ID: SA11.2933
City MORGANTOWN	State WV	Zip Code 26508-4575
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation HOMEMAKER	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. MS. LUANNE E. ANILE		Date of Receipt MM / DD / YYYY 09 / 05 / 2006
Mailing Address 468 LAURELWOOD PLACE		Transaction ID: SA11.2873
City WEIRTON	State WV	Zip Code 26062
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation HOMEMAKER	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. MR. JAMES R. AUGUST, JR.		Date of Receipt MM / DD / YYYY 09 / 19 / 2006
Mailing Address 17 FERRY STREET		Transaction ID: SA11.3001
City LEETSDALE	State PA	Zip Code 15056-1141
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer AUGUST TRANSPORT, INC.	Occupation PRESIDENT	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

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

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SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

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(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
Raese for Senate

A. Full Name (Last, First, Middle Initial) MRS. MARIA L. BACINICH Mailing Address 1048 S. OCEAN BLVD. City PALM BEACH State FL Zip Code 33480-4933 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 21 / 2006 Transaction ID: SA11.3068 Amount of Each Receipt this Period 500.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) DR. JULIAN BAILES, M.D. Mailing Address 4135 COVE POINT DR City MORGANTOWN State WV Zip Code 26508-8679 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 19 / 2006 Transaction ID: SA11.2945 Amount of Each Receipt this Period 1000.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) MR. DANNY BALIKER Mailing Address 1126 BLUE HORIZON DRIVE City MORGANTOWN State WV Zip Code 26501-2063 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 08 / 18 / 2006 Transaction ID: SA11.2754 Amount of Each Receipt this Period 500.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)		2000.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 68 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full) Raese for Senate

Full Name (Last, First, Middle Initial) A. MR. DANNY BALIKER		Date of Receipt MM / DD / YYYY 09 / 30 / 2006	
Mailing Address 1126 BLUE HORIZON DRIVE		Transaction ID: SA11.3361	
City MORGANTOWN	State WV	Zip Code 26501-2063	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer DANNY'S DOOR SERVICE	Occupation OWNER	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. MR. DANNY BALIKER		Date of Receipt MM / DD / YYYY 09 / 30 / 2006	
Mailing Address 1126 BLUE HORIZON DRIVE		Transaction ID: SA11.3362	
City MORGANTOWN	State WV	Zip Code 26501-2063	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer DANNY'S DOOR SERVICE	Occupation OWNER	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) C. MS. JACQUELINE H. BALLL		Date of Receipt MM / DD / YYYY 07 / 14 / 2006	
Mailing Address R.R. 2 BOX 565		Transaction ID: SA11.2107	
City MILTON	State WV	Zip Code 25541-9799	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer	Occupation RETIRED	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional)	1000.00
TOTAL This Period (last page this line number only)	

27020192469

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 69 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial)

A. MR. MATTHEW M. BEHNAM

Mailing Address 296 TOMS RUN ROAD

City State Zip Code
MORGANTOWN WV 26508-2348

FEC ID number of contributing
federal political committee.

C

Name of Employer
MATTHEW BEHNAM COMPANY

Occupation
CONTRACTOR

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1250.00

Date of Receipt

MM / DD / YYYY
09 / 29 / 2006

Transaction ID: SA11.3255

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. MR. HERALD BENNETT

Mailing Address 686 MT. HAMMOND LANE

City State Zip Code
CHARLESTOWN WV 25414-4313

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
INSURANCE AGENT

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

MM / DD / YYYY
09 / 19 / 2006

Transaction ID: SA11.2949

Amount of Each Receipt this Period

250.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. MR. BRAD BERLIN

Mailing Address 84 LAKEWOOD ROAD

City State Zip Code
NEW CASTLE PA 16101-2730

FEC ID number of contributing
federal political committee.

C

Name of Employer
DUNBAR ASPHALT

Occupation
PRESIDENT/OWNER

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

MM / DD / YYYY
09 / 19 / 2006

Transaction ID: SA11.3003

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 70 / 305

(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)

A. MRS. CHARLOTTE ANN BISHOP

Mailing Address R.R. 1 BOX 265A

City State Zip Code
KINGWOOD WV 26537-9708

FEC ID number of contributing
federal political committee.

C

Name of Employer
MOUNTAINEER CONTRACTING

Occupation
CONTROLLER

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
4200.00

Date of Receipt

MM / DD / YYYY
09 / 29 / 2006

Transaction ID: SA11.3258

Amount of Each Receipt this Period

2100.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. MR. BRIAN P. BLANKENSHIP

Mailing Address 170 LAKEVIEW DRIVE
SUITE 1

City State Zip Code
MORGANTOWN WV 26508-9284

FEC ID number of contributing
federal political committee.

C

Name of Employer
GREER INDUSTRIES, INC.

Occupation
EXECUTIVE

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
3550.00

Date of Receipt

MM / DD / YYYY
09 / 19 / 2006

Transaction ID: SA11.2977

Amount of Each Receipt this Period

500.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. MR. BRIAN P. BLANKENSHIP

Mailing Address 170 LAKEVIEW DRIVE
SUITE 1

City State Zip Code
MORGANTOWN WV 26508-9284

FEC ID number of contributing
federal political committee.

C

Name of Employer
GREER INDUSTRIES, INC.

Occupation
EXECUTIVE

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
3550.00

Date of Receipt

MM / DD / YYYY
09 / 19 / 2006

Transaction ID: SA11.3013

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

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)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 71 / 305							
(check only one)									
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d		
<input type="checkbox"/>	12	<input type="checkbox"/>	13a	<input type="checkbox"/>	13b	<input type="checkbox"/>	14	<input type="checkbox"/>	15

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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial)

A. MRS. MICHEL MARRARA BLANKENSHIP

Mailing Address 170 LAKEVIEW DRIV#1E

City

MORGANTOWN

State

WV

Zip Code

26508-9284

FEC ID number of contributing
federal political committee.

C

Name of Employer
SPA ROMA

Occupation

OWNER

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
09 / 30 / 2006

Transaction ID: SA11.3383

Amount of Each Receipt this Period

500.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. MRS. PATRICIA BLASS

Mailing Address 261 LAKEVIEW DRIVE

City

MORGANTOWN

State

WV

Zip Code

26508-8081

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

MM / DD / YYYY
07 / 19 / 2006

Transaction ID: SA11.2267

Amount of Each Receipt this Period

200.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. MRS. PATRICIA BLASS

Mailing Address 261 LAKEVIEW DRIVE

City

MORGANTOWN

State

WV

Zip Code

26508-8081

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

700.00

Date of Receipt

MM / DD / YYYY
09 / 21 / 2006

Transaction ID: SA11.3074

Amount of Each Receipt this Period

500.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 72 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Raese for Senate

Full Name (Last, First, Middle Initial) A. MR. JOSEPH J. BOCZEK		Date of Receipt MM / DD / YYYY 09 / 29 / 2006
Mailing Address 1390 FAIRFIELD STREET		Transaction ID: SA11.3268
City STAR CITY	State WV	Zip Code 26505-2114
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 567.77	
Name of Employer L. & K. MARKETING	Occupation OWNER	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1692.77	IN-KIND - CAMPAIGN MATERIALS

Full Name (Last, First, Middle Initial) B. MR. JOSEPH J. BOCZEK		Date of Receipt MM / DD / YYYY 09 / 30 / 2006
Mailing Address 1390 FAIRFIELD STREET		Transaction ID: SA11.3377
City STAR CITY	State WV	Zip Code 26505-2114
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer L. & K. MARKETING	Occupation OWNER	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1692.77	

Full Name (Last, First, Middle Initial) C. MRS. ANNALIA BOLYARD		Date of Receipt MM / DD / YYYY 09 / 26 / 2006
Mailing Address 1171 LIONS AVENUE		Transaction ID: SA11.3116
City MORGANTOWN	State WV	Zip Code 26505-2216
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer US AIR	Occupation FLIGHT ATTENDANT	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	1317.77
TOTAL This Period (last page this line number only)	

27020192473

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: **PAGE 73 / 305**
(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. MS. BRIENNE A. BOYLE Full Name (Last, First, Middle Initial) Mailing Address 617 GRAND STREET City MORGANTOWN State WV Zip Code 26501-6911 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 29 / 2006 Transaction ID: SA11.3250 Amount of Each Receipt this Period 2100.00
Name of Employer SOFTWARE SYSTEMS INC. Occupation SALES Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2100.00		CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. MR. EDWARD PATRICK BOYLE Full Name (Last, First, Middle Initial) Mailing Address RT. 26 SOUTH BOX 606 City KINGWOOD State WV Zip Code 26537-0606 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 29 / 2006 Transaction ID: SA11.3260 Amount of Each Receipt this Period 2100.00
Name of Employer MOUNTAINEER CONTRACTING Occupation EXECUTIVE Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4200.00		CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. MR. JOHN P. BOYLE, II Full Name (Last, First, Middle Initial) Mailing Address 15 WATERSIDE DRIVE City MORGANTOWN State WV Zip Code 26508-2997 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 29 / 2006 Transaction ID: SA11.3261 Amount of Each Receipt this Period 2100.00
Name of Employer MOUNTAINEER CONTRACTORS Occupation EXECUTIVE Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2100.00		CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)		6300.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 74 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Raese for Senate

A. Full Name (Last, First, Middle Initial) MS. MARY BOYLE Mailing Address 12 GREENTREE DRIVE City MORGANTOWN State WV Zip Code 26508-8635 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 29 / 2006 Transaction ID: SA11.3252 Amount of Each Receipt this Period 2100.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Name of Employer Occupation HOMEMAKER Election Cycle-to-Date ▼ 2100.00		
B. Full Name (Last, First, Middle Initial) MR. RYAN P. BOYLE Mailing Address 12 GREENTREE DRIVE City MORGANTOWN State WV Zip Code 26505 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 29 / 2006 Transaction ID: SA11.3253 Amount of Each Receipt this Period 2100.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation MOUNTAINEER CONTRACTORS MANAGER Election Cycle-to-Date ▼ 2100.00		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Name of Employer Occupation MOUNTAINEER CONTRACTING EXECUTIVE Election Cycle-to-Date ▼ 4200.00		
C. Full Name (Last, First, Middle Initial) MR. WILLIAM G. BOYLE Mailing Address 217 SEEMONT DRIVE City KINGWOOD State WV Zip Code 26537-1705 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 29 / 2006 Transaction ID: SA11.3262 Amount of Each Receipt this Period 2100.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation MOUNTAINEER CONTRACTING EXECUTIVE Election Cycle-to-Date ▼ 4200.00		
SUBTOTAL of Receipts This Page (optional)		6300.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 75 / 305
(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) A. MR. STEWART C. BROBERG		Date of Receipt MM / DD / YYYY 09 / 29 / 2006
Mailing Address 208 EL PUEBLO WAY		Transaction ID: SA11.3220
City PALM BEACH	State FL	Zip Code 33480-3218
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1500.00
Name of Employer SELF-EMPLOYED	Occupation PRIVATE INVESTIGATOR	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1500.00	
Full Name (Last, First, Middle Initial) B. MRS. MARCIA A. BROUGHTON		Date of Receipt MM / DD / YYYY 09 / 13 / 2006
Mailing Address 227 CARR AVENUE		Transaction ID: SA11.2935
City CLARKSBURG	State WV	Zip Code 26301-0645
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer JACKSON KELLY	Occupation ATTORNEY	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) C. MR. G. ALLAN BROWN		Date of Receipt MM / DD / YYYY 09 / 21 / 2006
Mailing Address RD #2 294A		Transaction ID: SA11.3072
City TRIADDELPHIA	State WV	Zip Code 26059-9622
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation RETIRED	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1600.00	
SUBTOTAL of Receipts This Page (optional)		2250.00
TOTAL This Period (last page this line number only)		

27020192476

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 76 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
Raese for Senate

A. Full Name (Last, First, Middle Initial) MR. G. ALLAN BROWN Mailing Address RD #2 294A City TRIADELPHIA State WV Zip Code 26059-9622 FEC ID number of contributing federal political committee. C Name of Employer Occupation RETIRED Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1600.00		Date of Receipt MM / DD / YYYY 09 / 30 / 2006 Transaction ID: SA11.3431 Amount of Each Receipt this Period 100.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) MR. MITCH BROZIK Mailing Address 3101 N. GREYSTONE DRIVE City MORGANTOWN State WV Zip Code 26508-8601 FEC ID number of contributing federal political committee. C Name of Employer Occupation OWNER SECURE US Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		Date of Receipt MM / DD / YYYY 09 / 30 / 2006 Transaction ID: SA11.3387 Amount of Each Receipt this Period 500.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) MR. THOMAS J. BRYAN Mailing Address 2145 N. FLAUGHERTY ROAD City CORAOPOLIS State PA Zip Code 15108 FEC ID number of contributing federal political committee. C Name of Employer Occupation PRESIDENT BRYAN CONCRETE Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		Date of Receipt MM / DD / YYYY 09 / 30 / 2006 Transaction ID: SA11.3286 Amount of Each Receipt this Period 1000.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)		1600.00
TOTAL This Period (last page this line number only)		

27020192477

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 77 / 305

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full) Raese for Senate																	
A. MR. C. THOMAS BUCK Full Name (Last, First, Middle Initial) Mailing Address 1237 KINGS ROAD <table style="width: 100%;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">Zip Code</td> </tr> <tr> <td>MORGANTOWN</td> <td>WV</td> <td>26508-9155</td> </tr> </table> FEC ID number of contributing federal political committee. C <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer</td> <td style="width: 33%;">Occupation</td> </tr> <tr> <td>GREER INDUSTRIES, INC.</td> <td>ACCOUNTANT</td> </tr> </table> Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00	City	State	Zip Code	MORGANTOWN	WV	26508-9155	Name of Employer	Occupation	GREER INDUSTRIES, INC.	ACCOUNTANT	Date of Receipt <table style="width: 100%;"> <tr> <td style="width: 33%; text-align: center;">MM / DD / YY</td> <td style="width: 33%; text-align: center;">MM / DD / YY</td> <td style="width: 33%; text-align: center;">MM / DD / YY</td> </tr> <tr> <td style="text-align: center;">09 / 26 / 06</td> <td style="text-align: center;">09 / 26 / 06</td> <td style="text-align: center;">09 / 26 / 06</td> </tr> </table> Transaction ID: SA11.3109 Amount of Each Receipt this Period 1500.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	MM / DD / YY	MM / DD / YY	MM / DD / YY	09 / 26 / 06	09 / 26 / 06	09 / 26 / 06
City	State	Zip Code															
MORGANTOWN	WV	26508-9155															
Name of Employer	Occupation																
GREER INDUSTRIES, INC.	ACCOUNTANT																
MM / DD / YY	MM / DD / YY	MM / DD / YY															
09 / 26 / 06	09 / 26 / 06	09 / 26 / 06															
B. MRS. BETH BURNS Full Name (Last, First, Middle Initial) Mailing Address 40 RIVER BIRCH DRIVE <table style="width: 100%;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">Zip Code</td> </tr> <tr> <td>MORGANTOWN</td> <td>WV</td> <td>26508-5251</td> </tr> </table> FEC ID number of contributing federal political committee. C <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer</td> <td style="width: 33%;">Occupation</td> </tr> <tr> <td>SELF-EMPLOYED</td> <td>REAL ESTATE</td> </tr> </table> Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00	City	State	Zip Code	MORGANTOWN	WV	26508-5251	Name of Employer	Occupation	SELF-EMPLOYED	REAL ESTATE	Date of Receipt <table style="width: 100%;"> <tr> <td style="width: 33%; text-align: center;">MM / DD / YY</td> <td style="width: 33%; text-align: center;">MM / DD / YY</td> <td style="width: 33%; text-align: center;">MM / DD / YY</td> </tr> <tr> <td style="text-align: center;">09 / 29 / 06</td> <td style="text-align: center;">09 / 29 / 06</td> <td style="text-align: center;">09 / 29 / 06</td> </tr> </table> Transaction ID: SA11.3237 Amount of Each Receipt this Period 500.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	MM / DD / YY	MM / DD / YY	MM / DD / YY	09 / 29 / 06	09 / 29 / 06	09 / 29 / 06
City	State	Zip Code															
MORGANTOWN	WV	26508-5251															
Name of Employer	Occupation																
SELF-EMPLOYED	REAL ESTATE																
MM / DD / YY	MM / DD / YY	MM / DD / YY															
09 / 29 / 06	09 / 29 / 06	09 / 29 / 06															
C. MR. GARY B. CAIN Full Name (Last, First, Middle Initial) Mailing Address P.O. BOX 2008 <table style="width: 100%;"> <tr> <td style="width: 33%;">City</td> <td style="width: 33%;">State</td> <td style="width: 33%;">Zip Code</td> </tr> <tr> <td>WESTOVER</td> <td>WV</td> <td>26502-2008</td> </tr> </table> FEC ID number of contributing federal political committee. C <table style="width: 100%;"> <tr> <td style="width: 33%;">Name of Employer</td> <td style="width: 33%;">Occupation</td> </tr> <tr> <td>SWANSON PLATING</td> <td>EXECUTIVE</td> </tr> </table> Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 3000.00	City	State	Zip Code	WESTOVER	WV	26502-2008	Name of Employer	Occupation	SWANSON PLATING	EXECUTIVE	Date of Receipt <table style="width: 100%;"> <tr> <td style="width: 33%; text-align: center;">MM / DD / YY</td> <td style="width: 33%; text-align: center;">MM / DD / YY</td> <td style="width: 33%; text-align: center;">MM / DD / YY</td> </tr> <tr> <td style="text-align: center;">09 / 13 / 06</td> <td style="text-align: center;">09 / 13 / 06</td> <td style="text-align: center;">09 / 13 / 06</td> </tr> </table> Transaction ID: SA11.2932 Amount of Each Receipt this Period 1000.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	MM / DD / YY	MM / DD / YY	MM / DD / YY	09 / 13 / 06	09 / 13 / 06	09 / 13 / 06
City	State	Zip Code															
WESTOVER	WV	26502-2008															
Name of Employer	Occupation																
SWANSON PLATING	EXECUTIVE																
MM / DD / YY	MM / DD / YY	MM / DD / YY															
09 / 13 / 06	09 / 13 / 06	09 / 13 / 06															
SUBTOTAL of Receipts This Page (optional) 3000.00																	
TOTAL This Period (last page this line number only) 3000.00																	

27020192478

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 78 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Raese for Senate

A. Full Name (Last, First, Middle Initial) MRS. LORI KAY CALLEN		Date of Receipt MM / DD / YYYY 09 / 05 / 2006	
Mailing Address 144 WILLEY STREET		Transaction ID: SA11.2876	
City MORGANTOWN	State WV	Zip Code 26505-5521	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer KLM PROPERTIES		Occupation REAL ESTATE	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2000.00	
B. Full Name (Last, First, Middle Initial) MR. MICHAEL K. CALLEN		Date of Receipt MM / DD / YYYY 09 / 05 / 2006	
Mailing Address 144 WILLEY STREET		Transaction ID: SA11.2877	
City MORGANTOWN	State WV	Zip Code 26505-5521	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer SELF-EMPLOYED		Occupation BUSINESSMAN	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00	
C. Full Name (Last, First, Middle Initial) MR. STEPHEN J. CALLEN		Date of Receipt MM / DD / YYYY 09 / 05 / 2006	
Mailing Address 144 WILLEY STREET		Transaction ID: SA11.2878	
City MORGANTOWN	State WV	Zip Code 26505-5521	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer WEST VIRGINIA JUNIOR COLLEGE		Occupation EXECUTIVE	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 3000.00	
SUBTOTAL of Receipts This Page (optional)		5000.00	
TOTAL This Period (last page this line number only)			

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 79 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full) Raese for Senate

Full Name (Last, First, Middle Initial) A. MRS. MARY CANTERBURY		Date of Receipt MM / DD / YYYY 09 / 30 / 2006
Mailing Address P.O. BOX 188		Transaction ID: SA11.3438
City WALTON	State WV	Zip Code 25286-0188
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer	Occupation HOMEMAKER	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. MRS. KATHY A. CARNA		Date of Receipt MM / DD / YYYY 09 / 19 / 2006
Mailing Address 30 CLUB DRIVE		Transaction ID: SA11.3007
City NEW CASTLE	State PA	Zip Code 16105-9134
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. MR. RUSSELL L. CARSON		Date of Receipt MM / DD / YYYY 07 / 19 / 2006
Mailing Address 930 FIFTH AVENUE		Transaction ID: SA11.2260
City NEW YORK	State NY	Zip Code 10021-2651
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer WELSH, LARSON, ANDERSON & STOWE	Occupation PARTNER	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

SUBTOTAL of Receipts This Page (optional)	3150.00
TOTAL This Period (last page this line number only)	

27020192480

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 80 / 305

(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)

A. MR. PETER J. CARUSO, III

Mailing Address 3324 VALEWOOD ROAD

City

MUNHALL

State

PA

Zip Code

15120-3530

FEC ID number of contributing
federal political committee.

C

Name of Employer
CARUSO PAVING

Occupation

PRESIDENT/OWNER

Receipt For: 2006

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
09 / 19 / 2006

Transaction ID: SA11.3005

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. MR. GARY CECCHINELLI

Mailing Address 334 PENNSYLVANIA AVENUE

City

MORGANTOWN

State

WV

Zip Code

26501-6016

FEC ID number of contributing
federal political committee.

C

Name of Employer
GREER INDUSTRIES INC

Occupation

SALES REP.

Receipt For: 2006

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

MM / DD / YYYY
09 / 26 / 2006

Transaction ID: SA11.3103

Amount of Each Receipt this Period

50.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. MR. GARY CECCHINELLI

Mailing Address 334 PENNSYLVANIA AVENUE

City

MORGANTOWN

State

WV

Zip Code

26501-6016

FEC ID number of contributing
federal political committee.

C

Name of Employer
GREER INDUSTRIES INC

Occupation

SALES REP.

Receipt For: 2006

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

MM / DD / YYYY
09 / 30 / 2006

Transaction ID: SA11.3367

Amount of Each Receipt this Period

500.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1550.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 81 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
Raese for Senate

<p>Full Name (Last, First, Middle Initial) A. MR. JOHN N. CHARNOCK, JR.</p> <p>Mailing Address P.O. BOX 207 523 PEOPLES BUILDING</p> <p>City CHARLESTON State WV Zip Code 25321-0207</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer SELF-EMPLOYED Occupation ATTORNEY AT LAW</p> <p>Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 400.00</p>		<p>Date of Receipt MM / DD / YYYY 09 / 29 / 2006</p> <p>Transaction ID: SA11.3232</p> <p>Amount of Each Receipt this Period 250.00</p> <p>CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>Full Name (Last, First, Middle Initial) B. MR. GLEN CLARKE</p> <p>Mailing Address P.O. BOX 329</p> <p>City CORTLAND State NY Zip Code 13045-0329</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer S.U.N.Y. CORTLAND Occupation RESEARCH ADMINISTRATIVE</p> <p>Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 250.00</p>		<p>Date of Receipt MM / DD / YYYY 07 / 06 / 2006</p> <p>Transaction ID: SA11.1718</p> <p>Amount of Each Receipt this Period 250.00</p> <p>CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>Full Name (Last, First, Middle Initial) C. MR. STEVE CLARK</p> <p>Mailing Address 1046 GRANDVIEW FARMS DRIVE</p> <p>City BETHEL PARK State PA Zip Code 15102-3776</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer TRUMBULL CORPORATION/P.J. DICK INC. Occupation EXECUTIVE VICE PRESIDENT OF FINANCE</p> <p>Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>		<p>Date of Receipt MM / DD / YYYY 09 / 19 / 2006</p> <p>Transaction ID: SA11.2989</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>SUBTOTAL of Receipts This Page (optional)</p>		<p>1500.00</p>
<p>TOTAL This Period (last page this line number only)</p>		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 82 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Raese for Senate

Full Name (Last, First, Middle Initial)		Date of Receipt	
A. MR. JAY W. CLEVELAND		MM / DD / YYYY	
Mailing Address 617 SOUTHRIDGE DRIVE		09 / 19 / 2006	
City	State	Zip Code	Transaction ID: SA11.3010
MECHANICSBURG	PA	17055-6056	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		1000.00	
C		CONTRIBUTION	
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
CLEVELAND BROTHERS	OWNER/PRESIDENT		
Receipt For: 2006	Election Cycle-to-Date	1000.00	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial)		Date of Receipt	
B. MR. L. RANDALL COBER		MM / DD / YYYY	
Mailing Address 702 PARKSIDE LANE		09 / 13 / 2006	
City	State	Zip Code	Transaction ID: SA11.2930
MORGANTOWN	WV	26501-6224	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		250.00	
C		CONTRIBUTION	
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
ACORDIA OF WEST VIRGINIA	EXECUTIVE		
Receipt For: 2006	Election Cycle-to-Date	1500.00	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial)		Date of Receipt	
C. MR. L. RANDALL COBER		MM / DD / YYYY	
Mailing Address 702 PARKSIDE LANE		09 / 13 / 2006	
City	State	Zip Code	Transaction ID: SA11.2931
MORGANTOWN	WV	26501-6224	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		250.00	
C		CONTRIBUTION	
Name of Employer	Occupation	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
ACORDIA OF WEST VIRGINIA	EXECUTIVE		
Receipt For: 2006	Election Cycle-to-Date	1500.00	
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General			
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional)	1500.00
TOTAL This Period (last page this line number only)	

27020192483

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 83 / 305
(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)

A. MR. MARK COLANTONIO

Mailing Address 468 LAURELWOOD PLACE

City State Zip Code
WEIRTON WV 26062

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
HOMEMAKER

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

MM / DD / YYYY
09 / 05 / 2006

Transaction ID: SA11.2872

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. MS. TAMMY COLE

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
REALITY FITNESS, LLC

Occupation
PROPRIETOR

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
4200.00

Date of Receipt

MM / DD / YYYY
08 / 25 / 2006

Transaction ID: SA11.2855

Amount of Each Receipt this Period

2100.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. MS. DENISE ROBYN COLOSIMO

Mailing Address 3360 EVERGREEN ROAD

City State Zip Code
PITTSBURGH PA 15237-2660

FEC ID number of contributing
federal political committee.

C

Name of Employer
PITTSBURGH POST GAZETTE

Occupation
ADMINISTRATIVE ASSISTANT

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

MM / DD / YYYY
09 / 19 / 2006

Transaction ID: SA11.2993

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

5100.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 84 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Raese for Senate

Full Name (Last, First, Middle Initial) A. MR. JOSEPH P. CONTE		Date of Receipt MM / DD / YYYY 09 / 19 / 2006	
Mailing Address 375 RIVERVIEW DRIVE		Transaction ID: SA11.3009	
City NEW KENSINGTON	State PA	Zip Code 15068-5934	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer PITTSBURGH GENERAL TIRE	Occupation VICE PRESIDENT OF OPERATIONS	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) B. MR. CRAIG T. COSTELLO		Date of Receipt MM / DD / YYYY 09 / 19 / 2006	
Mailing Address RD. 1 BOX 169G		Transaction ID: SA11.2953	
City WEIRTON	State WV	Zip Code 26062-9719	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer	Occupation RETIRED	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. MR. ROBERT G. COSTELLO		Date of Receipt MM / DD / YYYY 09 / 19 / 2006	
Mailing Address 1368 TERRACE ROAD		Transaction ID: SA11.2954	
City NEW PHILADELPHIA	State OH	Zip Code 44663-1384	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer GREER STEEL COMPANY	Occupation EXECUTIVE	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		

SUBTOTAL of Receipts This Page (optional)	1500.00
TOTAL This Period (last page this line number only)	

27020192485

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 85 / 305
(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)

A. MR. JAMES E. CRAIG

Mailing Address 14TH FAIRWAY COURT 2

City State Zip Code
MORGANTOWN WV 26508-4575

FEC ID number of contributing
federal political committee.

C

Name of Employer
WVU MEDICAL CORPORATION

Occupation
ADMINISTRATOR

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

MM / DD / YYYY
09 / 30 / 2006

Transaction ID: SA11.3285

Amount of Each Receipt this Period

250.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. MRS. DEBRA R. CYPHERT

Mailing Address 1877 FAIRCHANCE ROAD

City State Zip Code
MORGANTOWN WV 26508-2660

FEC ID number of contributing
federal political committee.

C

Name of Employer
FAIR PLAY LLC

Occupation
OWNER

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

MM / DD / YYYY
09 / 19 / 2006

Transaction ID: SA11.3026

Amount of Each Receipt this Period

500.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. MR. TODD P. DAENZER

Mailing Address 1739 BRIGHTWOOD ROAD SE

City State Zip Code
NEW PHILADELPHIA OH 44663-6765

FEC ID number of contributing
federal political committee.

C

Name of Employer
GREER STEEL COMPANY

Occupation
EXECUTIVE

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
4200.00

Date of Receipt

MM / DD / YYYY
09 / 30 / 2006

Transaction ID: SA11.3368

Amount of Each Receipt this Period

2100.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

2850.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: **PAGE 86 / 305**
(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)

A. MR. NORMAN T. DANIELS, JR.

Mailing Address P.O. BOX 1433

City State Zip Code
CHARLESTON WV 25325-1433

FEC ID number of contributing
federal political committee.

C

Name of Employer
DANIELS LAW FIRM, PLLC

Occupation
ATTORNEY

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

09 / 19 / 2006

Transaction ID: SA11.2970

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. MR. JOSEPH B. DEAN, SR

Mailing Address R.R. 1 BOX 1042

City State Zip Code
ROWLESBURG WV 26425-9652

FEC ID number of contributing
federal political committee.

C

Name of Employer
GREER INDUSTRIES, INC.

Occupation
ENGINEER

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2350.00

Date of Receipt

09 / 26 / 2006

Transaction ID: SA11.3110

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. MR. JOSEPH B. DEAN, SR

Mailing Address R.R. 1 BOX 1042

City State Zip Code
ROWLESBURG WV 26425-9652

FEC ID number of contributing
federal political committee.

C

Name of Employer
GREER INDUSTRIES, INC.

Occupation
ENGINEER

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2350.00

Date of Receipt

09 / 29 / 2006

Transaction ID: SA11.3140

Amount of Each Receipt this Period

100.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

2100.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 87 / 305
(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) A. MR. LAURENCE DELYNN		Date of Receipt MM / DD / YYYY 09 / 19 / 2006
Mailing Address 2 WATERFRONT PLACE #1506		Transaction ID: SA11.2944
City MORGANTOWN	State WV	Amount of Each Receipt this Period 1000.00
Zip Code 26501-5968	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) B. MR. H. A. DEPROSPERO		Date of Receipt MM / DD / YYYY 09 / 19 / 2006
Mailing Address 53 CEDAR DRIVE		Transaction ID: SA11.2951
City HURRICANE	State WV	Amount of Each Receipt this Period 2100.00
Zip Code 25526-9221	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer AUSTIN POWDER COMPANY	Occupation DIVISION PRESIDENT	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2100.00	
Full Name (Last, First, Middle Initial) C. MRS. JOANN DERRICO		Date of Receipt MM / DD / YYYY 09 / 29 / 2006
Mailing Address 1103 STEEPLECHASE DRIVE		Transaction ID: SA11.3265
City MORGANTOWN	State WV	Amount of Each Receipt this Period 500.00
Zip Code 26508-9173	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer DAIRY MART INC.	Occupation BUSINESSWOMAN	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		3600.00
TOTAL This Period (last page this line number only)		

27020192488

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 88 / 305
(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)
MR. THOMAS J. DEWITT

Mailing Address 457 LAKEVIEW DRIVE

City MORGANTOWN State WV Zip Code 26508-9295

FEC ID number of contributing federal political committee. C

Name of Employer SWANSON INDUSTRIES, INC. Occupation PRESIDENT

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt
MM / DD / YYYY
09 / 13 / 2006

Transaction ID: SA11.2924

Amount of Each Receipt this Period
250.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
MS. MARY A. DIAMOND

Mailing Address P.O. BOX262

City MORGANTOWN State WV Zip Code 26507

FEC ID number of contributing federal political committee. C

Name of Employer RAESE FOR SENATE Occupation STAFF

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

295.16

Date of Receipt
MM / DD / YYYY
07 / 21 / 2006

Transaction ID: SA111.3482

Amount of Each Receipt this Period
176.60

CONTRIBUTION

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

IN-KIND - POSTAGE

C. Full Name (Last, First, Middle Initial)
MS. MARY A. DIAMOND

Mailing Address P.O. BOX262

City MORGANTOWN State WV Zip Code 26507

FEC ID number of contributing federal political committee. C

Name of Employer RAESE FOR SENATE Occupation STAFF

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

295.16

Date of Receipt
MM / DD / YYYY
07 / 21 / 2006

Transaction ID: SA111.3483

Amount of Each Receipt this Period
1.56

CONTRIBUTION

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

IN-KIND - SUPPLIES

SUBTOTAL of Receipts This Page (optional) 428.16

TOTAL This Period (last page this line number only)

27020192489

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 89 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Raese for Senate

<p>Full Name (Last, First, Middle Initial) A. MS. MARY A. DIAMOND</p> <p>Mailing Address P.O. BOX262</p> <p>City State Zip Code MORGANTOWN WV 26507</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer RAESE FOR SENATE</p> <p>Occupation STAFF</p> <p>Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 295.16</p>		<p>Date of Receipt MM / DD / YYYY 08 / 18 / 2006</p> <p>Transaction ID: SA111.3485</p> <p>Amount of Each Receipt this Period 117.00</p> <p>CONTRIBUTION</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p> <p>IN-KIND - POSTAGE</p>
<p>Full Name (Last, First, Middle Initial) B. MR. JOSEPH B. DIBARTOLOMEO</p> <p>Mailing Address 229 VISTA DRIVE</p> <p>City State Zip Code WEIRTON WV 26062-5024</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer CITY OF WEIRTON</p> <p>Occupation ATTORNEY</p> <p>Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 250.00</p>		<p>Date of Receipt MM / DD / YYYY 09 / 05 / 2006</p> <p>Transaction ID: SA11.2865</p> <p>Amount of Each Receipt this Period 250.00</p> <p>CONTRIBUTION</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>Full Name (Last, First, Middle Initial) C. MR. FRANK DIPPEL</p> <p>Mailing Address P.O. BOX 4249</p> <p>City State Zip Code STAR CITY WV 26504-4249</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer SELF EMPLOYED</p> <p>Occupation COAL BROKER</p> <p>Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 500.00</p>		<p>Date of Receipt MM / DD / YYYY 09 / 21 / 2006</p> <p>Transaction ID: SA11.3064</p> <p>Amount of Each Receipt this Period 500.00</p> <p>CONTRIBUTION</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>SUBTOTAL of Receipts This Page (optional)</p> <p>TOTAL This Period (last page this line number only)</p>		<p>867.00</p>

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 90 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Raese for Senate

A. Full Name (Last, First, Middle Initial) MR. GUY DIRIENZO		Date of Receipt MM / DD / YYYY 09 / 19 / 2006	
Mailing Address 101 QUAIL HOLLOW LANE		Transaction ID: SA11.2997	
City WEXFORD	State PA	Zip Code 15090-7597	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer MICHAEL JOSEPH DEVELOPMENT		Occupation PRESIDENT	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) MR. GENE T. DODD		Date of Receipt MM / DD / YYYY 09 / 29 / 2006	
Mailing Address RT. 1 BOX 45		Transaction ID: SA11.3242	
City BRIDGEPORT	State WV	Zip Code 26330-9324	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer DODD PAVING COMPANY		Occupation EXECUTIVE	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1500.00	
Full Name (Last, First, Middle Initial) MR. JACK DONAHUE		Date of Receipt MM / DD / YYYY 09 / 30 / 2006	
Mailing Address BOX 101 BARTON CHAPEL ROAD		Transaction ID: SA11.3360	
City FRAZIERS BOTTOM	State WV	Zip Code 25082-0101	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer SELF EMPLOYED		Occupation BUSINESSMAN	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		1750.00	
TOTAL This Period (last page this line number only)			

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 91 / 305
(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) A. MRS. DARLENE T. DUNN		Date of Receipt MM / DD / YYYY 09 / 21 / 2006
Mailing Address 223 LAKESIDE DRIVE		Transaction ID: SA11.3073
City MORGANTOWN	State WV	Zip Code 26508-5605
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer BB&T	Occupation EXECUTIVE	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. MR. WILLIAM H. DYER		Date of Receipt MM / DD / YYYY 09 / 13 / 2006
Mailing Address 436 REBECCA STREET		Transaction ID: SA11.2928
City MORGANTOWN	State WV	Zip Code 26505-2226
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation RETIRED	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. MR. PAUL H. EAGLE		Date of Receipt MM / DD / YYYY 09 / 07 / 2006
Mailing Address 7454 SCANDINAVIA DRIVE		Transaction ID: SA11.2896
City MAUMEE	State OH	Zip Code 43537-9537
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer GREER STEEL COMPANY	Occupation EXECUTIVE	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1250.00	

SUBTOTAL of Receipts This Page (optional)	750.00
TOTAL This Period (last page this line number only)	

27020192492

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 92 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial)

A. MR. STEPHEN T. ECKELS

Mailing Address 1139 STEEPLECHASE DRIVE

City State Zip Code
MORGANTOWN WV 26508-9173

FEC ID number of contributing
federal political committee.

C

Name of Employer
CENTRA BANK

Occupation
EXECUTIVE

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

MM / DD / YYYY
09 / 30 / 2006

Transaction ID: SA11.3384

Amount of Each Receipt this Period

500.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. MR. JOHN R. ELLIOTT

Mailing Address 105 MORGAN HILL ROAD

City State Zip Code
MORGANTOWN WV 26508-4461

FEC ID number of contributing
federal political committee.

C

Name of Employer
FUCHS LUBRICANT COMPANY

Occupation
VICE PRESIDENT / SALES

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

MM / DD / YYYY
09 / 29 / 2006

Transaction ID: SA11.3240

Amount of Each Receipt this Period

500.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. MS. MILDRED W. FAHEY

Mailing Address 246 WATER AVENUE

City State Zip Code
WESTON WV 26452-2053

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
HOMEMAKER

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

MM / DD / YYYY
09 / 19 / 2006

Transaction ID: SA11.2947

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 93 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Raese for Senate

Full Name (Last, First, Middle Initial) A. DR. ROBERT J. FANNING, JR. Mailing Address 1307 MOUNT DE CHANTAL ROAD City State Zip Code WHEELING WV 26003-6334 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 30 / 2006 Transaction ID: SA11.3427 Amount of Each Receipt this Period 500.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) B. MR. GEORGE R. FARMER, JR. Mailing Address P.O. BOX 515 City State Zip Code MORGANTOWN WV 26507-0515 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 19 / 2006 Transaction ID: SA11.2974 Amount of Each Receipt this Period 500.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) C. MS. PAULA K. FAZENBAKER Mailing Address P.O. BOX 604 City State Zip Code MORGANTOWN WV 26507-0604 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 19 / 2006 Transaction ID: SA11.3020 Amount of Each Receipt this Period 250.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) DR. ROBERT J. FANNING, JR. Mailing Address 1307 MOUNT DE CHANTAL ROAD City State Zip Code WHEELING WV 26003-6334 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 30 / 2006 Transaction ID: SA11.3427 Amount of Each Receipt this Period 500.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) MR. GEORGE R. FARMER, JR. Mailing Address P.O. BOX 515 City State Zip Code MORGANTOWN WV 26507-0515 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 19 / 2006 Transaction ID: SA11.2974 Amount of Each Receipt this Period 500.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) MS. PAULA K. FAZENBAKER Mailing Address P.O. BOX 604 City State Zip Code MORGANTOWN WV 26507-0604 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 19 / 2006 Transaction ID: SA11.3020 Amount of Each Receipt this Period 250.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)		1250.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 94 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial)

A. MRS. CONNIE L. FOLINO

Mailing Address BUCHANAN ROAD P.O. BOX 11

City State Zip Code
OAKMONT PA 15139-0011

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
HOMEMAKER

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

MM / DD / YYYY
09 / 19 / 2006

Transaction ID: SA11.2995

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. MR. DINO FOLINO

Mailing Address 6019 9TH STREET

City State Zip Code
OAKMONT PA 15139

FEC ID number of contributing
federal political committee.

C

Name of Employer
A. FOLINO CONSTRUCTION,
INC.

Occupation
MANAGER

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

MM / DD / YYYY
09 / 19 / 2006

Transaction ID: SA11.2994

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. MRS. LINDA D. FORMAN

Mailing Address R.R. 1 BOX 380

City State Zip Code
BRUCETON MILLS WV 26525-9764

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
HOMEMAKER

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2100.00

Date of Receipt

MM / DD / YYYY
09 / 29 / 2006

Transaction ID: SA11.3257

Amount of Each Receipt this Period

2100.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

4100.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 95 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Raese for Senate

<p>A. Full Name (Last, First, Middle Initial) MRS. ALICE S. FRANKOVITCH</p> <p>Mailing Address 1366 LICK RUN ROAD</p> <p>City WEIRTON State WV Zip Code 26062-5512</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation HOMEMAKER</p> <p>Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 4100.00</p>		<p>Date of Receipt MM / DD / YYYY 09 / 05 / 2006</p> <p>Transaction ID: SA11.2866</p> <p>Amount of Each Receipt this Period 1134.15</p> <p>CONTRIBUTION</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>B. Full Name (Last, First, Middle Initial) MRS. ALICE S. FRANKOVITCH</p> <p>Mailing Address 1366 LICK RUN ROAD</p> <p>City WEIRTON State WV Zip Code 26062-5512</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation HOMEMAKER</p> <p>Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 4100.00</p>		<p>Date of Receipt MM / DD / YYYY 09 / 05 / 2006</p> <p>Transaction ID: SA11.3037</p> <p>Amount of Each Receipt this Period 965.85</p> <p>CONTRIBUTION</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p> <p>IN-KIND - FOOD & BEVERAGES</p>
<p>C. Full Name (Last, First, Middle Initial) MR. CARL N. FRANKOVITCH</p> <p>Mailing Address 337 PENCO ROAD</p> <p>City WEIRTON State WV Zip Code 26062-3828</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation FRANKOVICH, ANETAKIS, COL-ANTONIO & SIM ATTORNEY</p> <p>Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 2200.00</p>		<p>Date of Receipt MM / DD / YYYY 09 / 26 / 2006</p> <p>Transaction ID: SA11.3120</p> <p>Amount of Each Receipt this Period 200.00</p> <p>CONTRIBUTION</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>SUBTOTAL of Receipts This Page (optional)</p>		<p>2300.00</p>
<p>TOTAL This Period (last page this line number only)</p>		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 96 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full) Raese for Senate

Full Name (Last, First, Middle Initial) A. MR. J. MANCE FRANKOVITCH		Date of Receipt MM / DD / YYYY 09 / 05 / 2006
Mailing Address 1952 LYONS ROAD		Transaction ID: SA11.2874
City WEIRTON	State WV	Amount of Each Receipt this Period 1000.00
Zip Code 26062-5578		
FEC ID number of contributing federal political committee. C		
Name of Employer WEIRTON LUMBER	Occupation PROPRIETOR	CONTRIBUTION
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial) B. MR. M. ERIC FRANKOVITCH		Date of Receipt MM / DD / YYYY 09 / 05 / 2006
Mailing Address 1366 LICK RUN ROAD		Transaction ID: SA11.2867
City WEIRTON	State WV	Amount of Each Receipt this Period 2100.00
Zip Code 26062-5512		
FEC ID number of contributing federal political committee. C		
Name of Employer FRANKOVICH, ANETAKIS, COL-ANTONIO & SIM	Occupation ATTORNEY	CONTRIBUTION
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4100.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial) C. MR. JAMES R. FRENEY		Date of Receipt MM / DD / YYYY 09 / 21 / 2006
Mailing Address 241 JAMAICA LANE		Transaction ID: SA11.3066
City PALM BEACH	State FL	Amount of Each Receipt this Period 500.00
Zip Code 33480-3321		
FEC ID number of contributing federal political committee. C		
Name of Employer CALLISTO PARTNERSHIP LLC	Occupation INVESTOR	CONTRIBUTION
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	3600.00
TOTAL This Period (last page this line number only)	

27020192497

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 97 / 305
(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) A. MR. ROBERT C. FRIEND		Date of Receipt MM / DD / YYYY 07 / 19 / 2006
Mailing Address 414 FOX CHAPEL ROAD		Transaction ID: SA11.2266
City PITTSBURGH	State PA	Zip Code 15238-2244
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer GREER INDUSTRIES, INC.	Occupation EXECUTIVE	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1250.00	

Full Name (Last, First, Middle Initial) B. MR. ROBERT C. FRIEND		Date of Receipt MM / DD / YYYY 08 / 28 / 2006
Mailing Address 414 FOX CHAPEL ROAD		Transaction ID: SA11.2832
City PITTSBURGH	State PA	Zip Code 15238-2244
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer GREER INDUSTRIES, INC.	Occupation EXECUTIVE	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1250.00	

Full Name (Last, First, Middle Initial) C. MR. ROBERT C. FRIEND		Date of Receipt MM / DD / YYYY 09 / 30 / 2006
Mailing Address 414 FOX CHAPEL ROAD		Transaction ID: SA11.3365
City PITTSBURGH	State PA	Zip Code 15238-2244
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer GREER INDUSTRIES, INC.	Occupation EXECUTIVE	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1250.00	

SUBTOTAL of Receipts This Page (optional)	1000.00
TOTAL This Period (last page this line number only)	

27020192498

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 98 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full) Raese for Senate

Full Name (Last, First, Middle Initial) A. MR. CRIS FRY		Date of Receipt MM / DD / YYYY 09 / 05 / 2006
Mailing Address P.O. BOX 508		Transaction ID: SA11.2879
City ASHLAND	State KY	Zip Code 41105-0508
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer CHAMPION FUELS, INC.	Occupation PRESIDENT	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. MR. ARTHUR GABRIEL		Date of Receipt MM / DD / YYYY 09 / 19 / 2006
Mailing Address 132 HERITAGE HILLS ROAD		Transaction ID: SA11.2963
City UNIONTOWN	State PA	Zip Code 15401-5642
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer GABRIEL BROTHERS, INC.	Occupation PRESIDENT	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. DR. FREDERICK J. GABRIELE		Date of Receipt MM / DD / YYYY 09 / 30 / 2006
Mailing Address 20 KINGSTON DRIVE		Transaction ID: SA11.3371
City MORGANTOWN	State WV	Zip Code 26505-3619
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer RADIOLOGY ASSOCIATES	Occupation PHYSICIAN	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 99 / 305

(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)

A. MR. PAUL GABRIEL

Mailing Address 114 LAMPLIGHTER DRIVE

City State Zip Code
MORGANTOWN WV 26508-8649

FEC ID number of contributing
federal political committee.

C

Name of Employer
GABRIEL BROTHERS, INC.

Occupation
EXECUTIVE

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2100.00

Date of Receipt

MM / DD / YYYY
09 / 19 / 2006

Transaction ID: SA11.2979

Amount of Each Receipt this Period

2100.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. MRS. MARGARET GAIS

Mailing Address 939 BAKERS RIDGE ROAD

City State Zip Code
MORGANTOWN WV 26508-1441

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
HOMEMAKER

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

MM / DD / YYYY
09 / 13 / 2006

Transaction ID: SA11.2925

Amount of Each Receipt this Period

500.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. MRS. ROSEMARY P. GALBRAITH

Mailing Address 500 CRESTWOOD DRIVE
APARTMENT 1604

City State Zip Code
CHARLOTTESVILLE VA 22903-4861

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
RETIRED

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

MM / DD / YYYY
07 / 21 / 2006

Transaction ID: SA11.2439

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

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)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 100 / 305
(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)

A. MR. PATRICK E. GALLAGHER

Mailing Address 80 CANDLELIGHT DRIVE

City State Zip Code
MORGANTOWN WV 26508-8125

FEC ID number of contributing
federal political committee.

C

Name of Employer
CTL ENGINEERING

Occupation
EXECUTIVE

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

MM / DD / YYYY
09 / 30 / 2006

Transaction ID: SA11.3381

Amount of Each Receipt this Period

250.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. MRS. JUDITH H. GAUDELLI

Mailing Address 583 BROUGHTON ROAD

City State Zip Code
BETHEL PARK PA 15102-3728

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
HOMEMAKER

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

MM / DD / YYYY
09 / 19 / 2006

Transaction ID: SA11.3000

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. DR. ANGELO N. GEORGES

Mailing Address 3 ARRONWOODS COURT

City State Zip Code
WHEELING WV 26003-9358

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
PHYSICIAN

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

MM / DD / YYYY
07 / 14 / 2006

Transaction ID: SA11.2169

Amount of Each Receipt this Period

500.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 101 / 305
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
Raese for Senate

A. Full Name (Last, First, Middle Initial)
MS. JOAN R. GIBSON
Mailing Address 1104 KOONTZ AVENUE

City State Zip Code
MORGANTOWN WV 26505-3321

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
RETIRED

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

275.00

Date of Receipt

MM / DD / YYYY
09 / 21 / 2006

Transaction ID: SA11.3063

Amount of Each Receipt this Period

250.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
MR. ROY GIBSON
Mailing Address ROUTE 1 BOX 3

City State Zip Code
MASONTOWN WV 26542-9702

FEC ID number of contributing
federal political committee.

C

Name of Employer
ROY GIBSON CONTRACTING

Occupation
CONTRACTOR

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
09 / 26 / 2006

Transaction ID: SA11.3119

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
MS. HOLLY GLENN
Mailing Address 16 WILSON AVENUE

City State Zip Code
MORGANTOWN WV 26501-6561

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMERICAN HOMES

Occupation
SALES REP

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
09 / 30 / 2006

Transaction ID: SA11.3374

Amount of Each Receipt this Period

500.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 102 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Raese for Senate

A. Full Name (Last, First, Middle Initial) MR. MARK E. GODFREY Mailing Address 843 VANDALIA ROAD City MORGANTOWN State WV Zip Code 26501-6247 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 29 / 2006 Transaction ID: SA11.3259 Amount of Each Receipt this Period 1000.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) MR. JAMES M. GOFF Mailing Address 3503 MAPLE COURT City MORGANTOWN State WV Zip Code 26508-5964 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 08 / 18 / 2006 Transaction ID: SA11.2755 Amount of Each Receipt this Period 500.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) MR. JAMES M. GOFF Mailing Address 3503 MAPLE COURT City MORGANTOWN State WV Zip Code 26508-5964 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 29 / 2006 Transaction ID: SA11.3156 Amount of Each Receipt this Period 250.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)		1750.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 103 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Raese for Senate

A. Full Name (Last, First, Middle Initial) MR. JAMES M. GOFF		Date of Receipt MM / DD / YYYY 09 / 29 / 2006	
Mailing Address 3503 MAPLE COURT		Transaction ID: SA11.3264	
City MORGANTOWN	State WV	Zip Code 26508-5964	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer W.V. RADIO CORPORATION		Occupation ACCOUNTANT	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1750.00	
B. Full Name (Last, First, Middle Initial) MR. TIMOTHY D. GOOCH		Date of Receipt MM / DD / YYYY 09 / 19 / 2006	
Mailing Address 1823 MORGANTOWN AVENUE		Transaction ID: SA11.3027	
City FAIRMONT	State WV	Zip Code 26554-3384	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer NORTHERN MOUNTAIN STATE METALS, INC.		Occupation PRESIDENT	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00	
C. Full Name (Last, First, Middle Initial) MRS. NANCY L. GUNNOE		Date of Receipt MM / DD / YYYY 07 / 12 / 2006	
Mailing Address 2040 OAKRIDGE DRIVE		Transaction ID: SA11.1989	
City CHARLESTON	State WV	Zip Code 25311-1112	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer		Occupation RETIRED	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		1750.00	
TOTAL This Period (last page this line number only)			

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 104 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Raese for Senate

Full Name (Last, First, Middle Initial) A. MR. WILLIAM E. GUY		Date of Receipt MM / DD / YYYY 08 / 04 / 2006	
Mailing Address 990 E. DEL MAR BLVD.		Transaction ID: SA11.2648	
City PASADENA	State CA	Zip Code 91106-3252	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C	CONTRIBUTION		
Name of Employer	Occupation RETIRED	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 350.00		
Full Name (Last, First, Middle Initial) B. MR. WILLIAM E. GUY		Date of Receipt MM / DD / YYYY 09 / 30 / 2006	
Mailing Address 990 E. DEL MAR BLVD.		Transaction ID: SA11.3447	
City PASADENA	State CA	Zip Code 91106-3252	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C	CONTRIBUTION		
Name of Employer	Occupation RETIRED	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 350.00		
Full Name (Last, First, Middle Initial) C. MR. ROBERT E. HADEN		Date of Receipt MM / DD / YYYY 09 / 19 / 2006	
Mailing Address 653 VILLA PLACE		Transaction ID: SA11.2937	
City MORGANTOWN	State WV	Zip Code 26505-2414	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C	CONTRIBUTION		
Name of Employer KOPPER GLO FUEL, INC.	Occupation VICE PRESIDENT	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		
SUBTOTAL of Receipts This Page (optional)		750.00	
TOTAL This Period (last page this line number only)			

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 105 / 305
(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) MRS. RACHEL A. HAGEDORN		Date of Receipt MM / DD / YYYY 09 / 29 / 2006	
Mailing Address 528 BURROUGHS STREET		Transaction ID: SA11.3221	
City MORGANTOWN	State WV	Zip Code 26505-3356	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer HAGEDORN'S GAS SERVICE		Occupation OWNER	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) B. MR. JOHN R. HALE		Date of Receipt MM / DD / YYYY 09 / 30 / 2006	
Mailing Address P.O. BOX 1322		Transaction ID: SA11.3430	
City KEYSER	State WV	Zip Code 26726-1322	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer MINERAL FABRICATION, INC.		Occupation PRESIDENT	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2600.00	
Full Name (Last, First, Middle Initial) C. MRS. MARY ANN HARDESTY		Date of Receipt MM / DD / YYYY 08 / 04 / 2006	
Mailing Address 3120 N. GREYSTONE DRIVE		Transaction ID: SA11.2628	
City MORGANTOWN	State WV	Zip Code 26508-8601	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer		Occupation HOMEMAKER	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional)		2000.00	
TOTAL This Period (last page this line number only)			

27020192506

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 106 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Raese for Senate

Full Name (Last, First, Middle Initial) A. MRS. MARGARET L. HASSENPFUG Mailing Address 3034 GRAFTON ROAD City MORGANTOWN State WV Zip Code 26508-3537 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 07 / 12 / 2006 Transaction ID: SA11.1990 Amount of Each Receipt this Period 50.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation HOMEMAKER Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 265.00		
Full Name (Last, First, Middle Initial) B. MRS. MARGARET L. HASSENPFUG Mailing Address 3034 GRAFTON ROAD City MORGANTOWN State WV Zip Code 26508-3537 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 08 / 08 / 2006 Transaction ID: SA11.2707 Amount of Each Receipt this Period 50.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation HOMEMAKER Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 265.00		
Full Name (Last, First, Middle Initial) C. MRS. MARGARET L. HASSENPFUG Mailing Address 3034 GRAFTON ROAD City MORGANTOWN State WV Zip Code 26508-3537 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 13 / 2006 Transaction ID: SA11.2929 Amount of Each Receipt this Period 50.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer Occupation HOMEMAKER Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 265.00		
SUBTOTAL of Receipts This Page (optional)		150.00
TOTAL This Period (last page this line number only)		

27020192507

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 107 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Raese for Senate

<p>Full Name (Last, First, Middle Initial) A. MR. EDWARD D. HASTINGS</p> <p>Mailing Address 7 BATES ROAD</p> <p>City MORGANTOWN State WV Zip Code 26505-3605</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer HASTINGS FUNERAL HOME Occupation FUNERAL DIRECTOR</p> <p>Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 2000.00</p>		<p>Date of Receipt MM / DD / YYYY 09 / 19 / 2006</p> <p>Transaction ID: SA11.3019</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>Full Name (Last, First, Middle Initial) B. MR. EDWARD A. HEFLIN</p> <p>Mailing Address 116 MEADOW VIEW LANE</p> <p>City MORGANTOWN State WV Zip Code 26508-2906</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer HEFLIN INSURANCE AGENCY Occupation EXECUTIVE</p> <p>Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 500.00</p>		<p>Date of Receipt MM / DD / YYYY 09 / 30 / 2006</p> <p>Transaction ID: SA11.3280</p> <p>Amount of Each Receipt this Period 500.00</p> <p>CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>Full Name (Last, First, Middle Initial) C. MR. DON C. HEMMANN</p> <p>Mailing Address P.O. BOX 261</p> <p>City MORGANTOWN State WV Zip Code 26507-0261</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED</p> <p>Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 250.00</p>		<p>Date of Receipt MM / DD / YYYY 07 / 21 / 2006</p> <p>Transaction ID: SA11.2360</p> <p>Amount of Each Receipt this Period 100.00</p> <p>CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>SUBTOTAL of Receipts This Page (optional)</p>		<p>1600.00</p>
<p>TOTAL This Period (last page this line number only)</p>		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 108 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full) Raese for Senate

Full Name (Last, First, Middle Initial) A. MR. DON C. HEMMANN		Date of Receipt MM / DD / YYYY 09 / 29 / 2006
Mailing Address P.O. BOX 261		Transaction ID: SA11.3151
City MORGANTOWN	State WV	Zip Code 26507-0261
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 150.00	
Name of Employer Retired	Occupation RETIRED	CONTRIBUTION
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial) B. MS. DEBORAH ANN HENN		Date of Receipt MM / DD / YYYY 09 / 26 / 2006
Mailing Address 2016 STEWARTSTOWN ROAD		Transaction ID: SA11.3115
City MORGANTOWN	State WV	Zip Code 26508-1409
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer MONONGALIA COUNTY BOARD OF EDUCATION	Occupation TEACHER	CONTRIBUTION
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial) C. MR. ROBERT A. HENN		Date of Receipt MM / DD / YYYY 08 / 01 / 2006
Mailing Address 137 HUMMINGBIRD LANE		Transaction ID: SA11.2571
City MORGANTOWN	State WV	Zip Code 26508-8661
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2100.00	
Name of Employer GREER INDUSTRIES, INC.	Occupation EXECUTIVE	CONTRIBUTION
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4200.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	2750.00
TOTAL This Period (last page this line number only)	

27020192509

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: **PAGE 109 / 305**
 (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) A. MR. WILLIAM HENNESSEY		Date of Receipt MM / DD / YYYY 09 / 19 / 2006
Mailing Address 981 MAPLE DRIVE		Transaction ID: SA11.2980
City MORGANTOWN	State WV	Zip Code 26505-2812
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer MONONGALIA GENERAL HOSPITAL	Occupation ADMINISTRATOR	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. MR. JOHN F. HERBST		Date of Receipt MM / DD / YYYY 09 / 29 / 2006
Mailing Address 1256 SAYBROOK ROAD		Transaction ID: SA11.3230
City HADDAM	State CT	Zip Code 06438-1366
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2100.00
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2100.00	

Full Name (Last, First, Middle Initial) C. MR. E. RICHARD HILLEARY		Date of Receipt MM / DD / YYYY 09 / 19 / 2006
Mailing Address 738 COURTNEY AVE.		Transaction ID: SA11.2959
City MORGANTOWN	State WV	Zip Code 26501-5300
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer CENTRA BANK	Occupation EXECUTIVE	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 3000.00	

SUBTOTAL of Receipts This Page (optional)	4350.00
TOTAL This Period (last page this line number only)	

27020192510

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 110 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Raese for Senate

Full Name (Last, First, Middle Initial) A. MR. BARRY L. HODGE		Date of Receipt MM / DD / YYYY 09 / 19 / 2006	
Mailing Address 150 CLAY STREET SUITE 440		Transaction ID: SA11.2967	
City MORGANTOWN	State WV	Zip Code 26501-5942	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer SECURLINX CORPORATION	Occupation EXECUTIVE	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. MR. WILLIAM HOLLISTER		Date of Receipt MM / DD / YYYY 09 / 29 / 2006	
Mailing Address 302 FRONT STREET		Transaction ID: SA11.3144	
City WILLIAMSTOWN	State WV	Zip Code 26187-1204	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer PAR MAR COMPANIES	Occupation BUSINESS OWNER	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. MR. L. FRED HORTON, JR.		Date of Receipt MM / DD / YYYY 09 / 26 / 2006	
Mailing Address 63 HORTON LANE		Transaction ID: SA11.3106	
City MORGANTOWN	State WV	Zip Code 26508-2939	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer DOMINION ENERGY	Occupation PETROLEUM ENGINEER	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional)	850.00
TOTAL This Period (last page this line number only)	

27020192511

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 111 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Raese for Senate

Full Name (Last, First, Middle Initial) A. MR. L. FRED HORTON, JR.		Date of Receipt MM / DD / YYYY 09 / 30 / 2006	
Mailing Address 63 HORTON LANE		Transaction ID: SA11.3405	
City MORGANTOWN	State WV	Zip Code 26508-2939	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer DOMINION ENERGY		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Occupation PETROLEUM ENGINEER			
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) B. MRS. JOHANNA GEIER HOWARD		Date of Receipt MM / DD / YYYY 08 / 30 / 2006	
Mailing Address 15 ACORN ROAD		Transaction ID: SA11.2859	
City TUXEDO PARK	State NY	Zip Code 10987	Amount of Each Receipt this Period 2100.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Occupation HOMEMAKER		[MEMO ITEM]	
Receipt For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 4200.00	
Full Name (Last, First, Middle Initial) C. MRS. JOHANNA GEIER HOWARD		Date of Receipt MM / DD / YYYY 08 / 30 / 2006	
Mailing Address 15 ACORN ROAD		Transaction ID: SA11.1441B	
City TUXEDO PARK	State NY	Zip Code 10987	Amount of Each Receipt this Period -2100.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Occupation HOMEMAKER		[MEMO ITEM]	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 4200.00	
SUBTOTAL of Receipts This Page (optional)		500.00	
TOTAL This Period (last page this line number only)			

27020192512

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 112 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial)

A. MR. PETE HUDSON

Mailing Address 1050 WINDSOR AVENUE

City State Zip Code
MORGANTOWN WV 26505-3326

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
AUTO DEALER

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

MM / DD / YYYY
09 / 26 / 2006

Transaction ID: SA11.3098

Amount of Each Receipt this Period

500.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. MR. DAVID E. HUFFMAN

Mailing Address 517 SHEARWOOD FOREST DRIVE

City State Zip Code
BRIDGEPORT WV 26330-1765

FEC ID number of contributing
federal political committee.

C

Name of Employer
BECKWITH MACHINERY CO

Occupation
SALES MANAGER

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

MM / DD / YYYY
09 / 19 / 2006

Transaction ID: SA11.2938

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. MR. THOMAS W. JARRETT

Mailing Address 1333 LAKE DRIVE

City State Zip Code
DANIELS WV 25832-9237

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
DENTIST

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

MM / DD / YYYY
08 / 11 / 2006

Transaction ID: SA11.2744

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

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)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 113 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Raese for Senate

Full Name (Last, First, Middle Initial) A. MRS. PAMELA JENKINS		Date of Receipt MM / DD / YYYY 09 / 26 / 2006
Mailing Address RT. 1 BOX 46A		Transaction ID: SA11.3124
City ALBRIGHT	State WV	Zip Code 26519-9705
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer STREETS' APARTMENTS	Occupation MANAGER	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. MR. MICHAEL J. JENKINS		Date of Receipt MM / DD / YYYY 09 / 28 / 2006
Mailing Address RT. 1 BOX 46A		Transaction ID: SA11.3125
City ALBRIGHT	State WV	Zip Code 26519-9705
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer AQUA FIX INC.	Occupation OWNER	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] REATTRIBUTED
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. MRS. PAMELA JENKINS		Date of Receipt MM / DD / YYYY 09 / 28 / 2006
Mailing Address RT. 1 BOX 46A		Transaction ID: SA11.3124B
City ALBRIGHT	State WV	Zip Code 26519-9705
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -250.00
Name of Employer STREETS' APARTMENTS	Occupation MANAGER	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] REATTRIBUTED
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	500.00
TOTAL This Period (last page this line number only)	

27020192514

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 114 / 305
(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) A. MR. KENNETH J. JUSKOWICH		Date of Receipt MM / DD / YYYY 09 / 19 / 2006
Mailing Address 674 WEST VIEW AVENUE		Transaction ID: SA11.2966
City MORGANTOWN	State WV	Zip Code 26505-2418
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1100.00
Name of Employer ACORDIA	Occupation EXECUTIVE	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2400.00	
Full Name (Last, First, Middle Initial) B. MRS. ANNE KANDEL		Date of Receipt MM / DD / YYYY 09 / 29 / 2006
Mailing Address 4140 SWONGER ROAD N.W.		Transaction ID: SA11.3226
City DOVER	State OH	Zip Code 44622-7055
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2100.00
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2100.00	
Full Name (Last, First, Middle Initial) C. MR. HENRY M. KAYES, JR.		Date of Receipt MM / DD / YYYY 09 / 19 / 2006
Mailing Address 122 N. ROSEMONT AVENUE		Transaction ID: SA11.2981
City MARTINSBURG	State WV	Zip Code 25401-2329
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer CENTRA BANK	Occupation ADMINISTRATOR	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	
SUBTOTAL of Receipts This Page (optional)		5200.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 115 / 305
(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)

A. MR. LEWIS E. KELLER

Mailing Address P.O. BOX 639

City State Zip Code
WHITE SULPHUR SPRI WV 24986-0639

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
GOLF CLUB MAKER

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Date of Receipt

MM / DD / YYYY
09 / 26 / 2006

Transaction ID: SA11.3118

Amount of Each Receipt this Period

250.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. MR. LEWIS E. KELLER

Mailing Address P.O. BOX 639

City State Zip Code
WHITE SULPHUR SPRI WV 24986-0639

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
GOLF CLUB MAKER

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
600.00

Date of Receipt

MM / DD / YYYY
09 / 30 / 2006

Transaction ID: SA11.3437

Amount of Each Receipt this Period

150.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. MRS. LAUREN KELLY

Mailing Address 65 MEADOW ROAD

City State Zip Code
RIVERSIDE CT 06878-2507

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
TRUSTEE / MANAGER

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt

MM / DD / YYYY
09 / 21 / 2006

Transaction ID: SA11.3060

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

1900.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 116 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Raese for Senate

Full Name (Last, First, Middle Initial) A. MR. HARVEY H. KERCHEVAL, III		Date of Receipt MM / DD / YYYY 09 / 29 / 2006	
Mailing Address 1225 KINGS ROAD		Transaction ID: SA11.3234	
City MORGANTOWN	State WV	Zip Code 26508-9155	Amount of Each Receipt this Period 2100.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer WEST VIRGINIA RADIO CORPO- RATION	Occupation BROADCASTER	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4200.00		

Full Name (Last, First, Middle Initial) B. MR. L. ROBERT KIMBALL		Date of Receipt MM / DD / YYYY 08 / 25 / 2006	
Mailing Address 615 W. HIGHLAND AVENUE		Transaction ID: SA11.2856	
City EBENSBURG	State PA	Zip Code 15931-1048	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer L. ROBERT KIMBALL & ASSOC- INC.	Occupation CHAIRMAN OF THE BOARD	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00		

Full Name (Last, First, Middle Initial) C. R. E. KINCAID		Date of Receipt MM / DD / YYYY 09 / 30 / 2006	
Mailing Address 1087 FOLEY DRIVE		Transaction ID: SA11.3417	
City SAINT ALBANS	State WV	Zip Code 25177-3633	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer	Occupation RETIRED	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional)	3350.00
TOTAL This Period (last page this line number only)	

27020192517

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 117 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
 Raese for Senate

Full Name (Last, First, Middle Initial) A. MRS. EDNA M. KING		Date of Receipt MM / DD / YYYY 09 / 19 / 2006
Mailing Address 4006 MORNINGSIDE WAY		Transaction ID: SA11.3022
City MORGANTOWN	State WV	Zip Code 26505-2359
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer	Occupation RETIRED	CONTRIBUTION
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 275.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial) B. MRS. EDNA M. KING		Date of Receipt MM / DD / YYYY 09 / 26 / 2006
Mailing Address 4006 MORNINGSIDE WAY		Transaction ID: SA11.3123
City MORGANTOWN	State WV	Zip Code 26505-2359
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 75.00	
Name of Employer	Occupation RETIRED	CONTRIBUTION
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 275.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial) C. MRS. EDNA M. KING		Date of Receipt MM / DD / YYYY 09 / 30 / 2006
Mailing Address 4006 MORNINGSIDE WAY		Transaction ID: SA11.3403
City MORGANTOWN	State WV	Zip Code 26505-2359
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
Name of Employer	Occupation RETIRED	CONTRIBUTION
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 275.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	225.00
TOTAL This Period (last page this line number only)	

27020192518

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 118 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Raese for Senate

Full Name (Last, First, Middle Initial) A. DR. ROGER E. KING		Date of Receipt MM / DD / YYYY 09 / 30 / 2006
Mailing Address P.O. BOX 4306		Transaction ID: SA11.3359
City MORGANTOWN	State WV	Zip Code 26505-1730
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN	CONTRIBUTION
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial) B. MR. GLENN LAREW		Date of Receipt MM / DD / YYYY 09 / 07 / 2006
Mailing Address 149 MEADOW VIEW LANE		Transaction ID: SA11.2899
City MORGANTOWN	State WV	Zip Code 26508-2909
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2100.00	
Name of Employer SELF-EMPLOYED	Occupation CONTRACTOR	CONTRIBUTION
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2600.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial) C. MR. JAMES L. LAURITA, JR.		Date of Receipt MM / DD / YYYY 09 / 30 / 2006
Mailing Address 2367 GRAFTON ROAD		Transaction ID: SA11.3388
City MORGANTOWN	State WV	Zip Code 26508-3504
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer MEPCO, INC.	Occupation PRESIDENT	CONTRIBUTION
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	3350.00
TOTAL This Period (last page this line number only)	

27020192519

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 119 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full) Raese for Senate

Full Name (Last, First, Middle Initial) A. MR. DOUGLAS J. LEECH		Date of Receipt MM / DD / YYYY 09 / 19 / 2006
Mailing Address 704 WHITE TAIL WAY		Transaction ID: SA11.2941
City MORGANTOWN	State WV	Zip Code 26508-8086
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer CENTRA FINANCIAL HOLDINGS, INC.	Occupation EXECUTIVE	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4100.00	

Full Name (Last, First, Middle Initial) B. MR. ROBERT E. LEIGH		Date of Receipt MM / DD / YYYY 09 / 29 / 2006
Mailing Address P.O. BOX 64		Transaction ID: SA11.3256
City MEADOWBROOK	State WV	Zip Code 26404-0064
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2100.00
Name of Employer MOUNTAINEER CONTRACTING	Occupation EXECUTIVE	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4200.00	

Full Name (Last, First, Middle Initial) C. MR. THEODORE W. LEMASTERS		Date of Receipt MM / DD / YYYY 09 / 26 / 2006
Mailing Address 707 WILLIS AVENUE		Transaction ID: SA11.3114
City BRIDGEPORT	State WV	Zip Code 26330-1265
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer BECKWITH MACHINERY CO	Occupation SALES REPRESENTATIVE	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	4600.00
TOTAL This Period (last page this line number only)	

27020192520

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 120 / 305

(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)

A. MR. KEVIN D. LEMLEY

Mailing Address 206 LEMLEY ROAD

City State Zip Code
 WAYNESBURG PA 15370-3599

FEC ID number of contributing
 federal political committee.

C

Name of Employer
 CENTRA BANK, INC.

Occupation
 BANKER

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 2000.00

Date of Receipt

MM / DD / YYYY
 09 / 19 / 2006

Transaction ID: SA11.2955

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. MR. FREDERICK LIBERATORE

Mailing Address P.O. BOX 395

City State Zip Code
 MORGANTOWN WV 26507-0395

FEC ID number of contributing
 federal political committee.

C

Name of Employer
 MONTMARTRE RESTAURANT

Occupation
 RESTAURATEUR

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 438.00

Date of Receipt

MM / DD / YYYY
 09 / 30 / 2006

Transaction ID: SA11.3378

Amount of Each Receipt this Period

188.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. MR. JOSEPH A. LONG

Mailing Address 85 FLAT TOP LAKE ROAD

City State Zip Code
 GHENT WV 25843-9359

FEC ID number of contributing
 federal political committee.

C

Name of Employer

Occupation
 RETIRED

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 225.00

Date of Receipt

MM / DD / YYYY
 07 / 12 / 2006

Transaction ID: SA11.1991

Amount of Each Receipt this Period

25.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2213.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 121 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Raese for Senate

Full Name (Last, First, Middle Initial) A. MR. JOSEPH A. LONG Mailing Address 85 FLAT TOP LAKE ROAD City State Zip Code GHENT WV 25843-9359 FEC ID number of contributing federal political committee. C Name of Employer Occupation RETIRED Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 225.00		Date of Receipt MM / DD / YYYY 08 / 11 / 2006 Transaction ID: SA11.2716 Amount of Each Receipt this Period 200.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) B. MR. GREG LORENZE Mailing Address 735A CHESTNUT RIDGE ROAD City State Zip Code MORGANTOWN WV 26505-2729 FEC ID number of contributing federal political committee. C Name of Employer Occupation SUBURBAN PLAZA REAL ESTATE Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00		Date of Receipt MM / DD / YYYY 09 / 30 / 2006 Transaction ID: SA11.3372 Amount of Each Receipt this Period 1000.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) C. MR. JERRY A. LORENZE Mailing Address 2011 ICES FERRY DRIVE City State Zip Code MORGANTOWN WV 26508-4233 FEC ID number of contributing federal political committee. C Name of Employer Occupation LORENZE PROPERTIES REAL ESTATE DEVELOPER Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4100.00		Date of Receipt MM / DD / YYYY 09 / 30 / 2006 Transaction ID: SA11.3373 Amount of Each Receipt this Period 2100.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)		3300.00
TOTAL This Period (last page this line number only)		

27020192522

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 122 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Raese for Senate

<p>Full Name (Last, First, Middle Initial) A. MR. STEVE LORENZE</p> <p>Mailing Address 735A CHESTNUT RIDGE ROAD</p> <p>City MORGANTOWN State WV Zip Code 26505-2729</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer LORENZE PROPERTIES Occupation REAL ESTATE DEVELOPER</p> <p>Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 3000.00</p>		<p>Date of Receipt 09 / 30 / 2006</p> <p>Transaction ID: SA11.3370</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>Full Name (Last, First, Middle Initial) B. MRS. KATHY KAZEN LUBIN</p> <p>Mailing Address 244 JAMAICA LANE</p> <p>City PALM BEACH State FL Zip Code 33480-3322</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS</p> <p>Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 250.00</p>		<p>Date of Receipt 09 / 29 / 2006</p> <p>Transaction ID: SA11.3223</p> <p>Amount of Each Receipt this Period 250.00</p> <p>CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>Full Name (Last, First, Middle Initial) C. MR. JOHN D. LYNCH</p> <p>Mailing Address 376 JACOBS DRIVE</p> <p>City MORGANTOWN State WV Zip Code 26505-7202</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer DAVIS-LYNCH GLASS CO. Occupation VICE PRESIDENT</p> <p>Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>		<p>Date of Receipt 09 / 19 / 2006</p> <p>Transaction ID: SA11.2975</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>SUBTOTAL of Receipts This Page (optional)</p>		<p>2250.00</p>
<p>TOTAL This Period (last page this line number only)</p>		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 123 / 305
(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)

A. MR. ROBERT E. LYNCH, JR.

Mailing Address 305 ROTARY STREET

City

MORGANTOWN

State

WV

Zip Code

26505-3234

FEC ID number of contributing
federal political committee.

C

Name of Employer
DAVIS-LYNCH GLASS CO.

Occupation

GLASS MANUFACTURER, EXECUTIVE

Receipt For:

2006

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
09 / 19 / 2006

Transaction ID: SA11.2943

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. BRUCE MALASKY

Mailing Address 2341 TECUMSEH DRIVE

City

WEST PALM BEACH

State

FL

Zip Code

33409-7436

FEC ID number of contributing
federal political committee.

C

Name of Employer
MALASKY COMPANIES

Occupation

REAL ESTATE DEVELOPERS

Receipt For:

2006

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

MM / DD / YYYY
08 / 11 / 2006

Transaction ID: SA11.2762

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. DR. PAUL MALONE

Mailing Address 977 N. WESTERN AVENUE

City

MORGANTOWN

State

WV

Zip Code

26505-2801

FEC ID number of contributing
federal political committee.

C

Name of Employer
MORGANTOWN ENT CLINIC

Occupation

PHYSICIAN

Receipt For:

2006

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
09 / 19 / 2006

Transaction ID: SA11.2940

Amount of Each Receipt this Period

250.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

3250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 124 / 305

(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)

A. DR. PAUL MALONE

Mailing Address 977 N. WESTERN AVENUE

City State Zip Code
MORGANTOWN WV 26505-2801

FEC ID number of contributing
federal political committee.

C

Name of Employer
MORGANTOWN ENT CLINIC

Occupation
PHYSICIAN

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

MM / DD / YYYY
09 / 19 / 2006

Transaction ID: SA11.2971

Amount of Each Receipt this Period

250.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. MRS. SHARON H. MALONEY

Mailing Address 3959 EASTLAKE DRIVE

City State Zip Code
MORGANTOWN WV 26508-8673

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
HOMEMAKER

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2100.00

Date of Receipt

MM / DD / YYYY
09 / 19 / 2006

Transaction ID: SA11.2965

Amount of Each Receipt this Period

2100.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. MR. WILLIAM J. MALONEY

Mailing Address 3959 EASTLAKE DRIVE

City State Zip Code
MORGANTOWN WV 26508-8673

FEC ID number of contributing
federal political committee.

C

Name of Employer
NORTH AMERICAN DRILLERS

Occupation
EXECUTIVE

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
4200.00

Date of Receipt

MM / DD / YYYY
08 / 18 / 2006

Transaction ID: SA11.2749

Amount of Each Receipt this Period

2100.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

4450.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 125 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Raese for Senate

Full Name (Last, First, Middle Initial) A. MRS. LORAIN MANGINE Mailing Address 4412 NEW CASTLE ROAD City State Zip Code LOWELLVILLE OH 44436-9707 FEC ID number of contributing federal political committee. C Name of Employer STATE LINE PAVING L.L.C. Occupation OWNER Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00		Date of Receipt MM / DD / YYYY 09 / 19 / 2006 Transaction ID: SA11.2996 Amount of Each Receipt this Period 1000.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) B. MRS. DARLENE F. S. MANLEY Mailing Address 91 TERRACE VIEW DRIVE City State Zip Code MORGANTOWN WV 26508-7001 FEC ID number of contributing federal political committee. C Name of Employer WVU REACH OF ECONOMIC DEVELOPMENT Occupation SENIOR ACCOUNTANT Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4200.00		Date of Receipt MM / DD / YYYY 07 / 12 / 2006 Transaction ID: SA11.2050 Amount of Each Receipt this Period 2100.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) C. MR. MICHAEL L. MANLEY Mailing Address 91 TERRACE VIEW DRIVE City State Zip Code MORGANTOWN WV 26508-7001 FEC ID number of contributing federal political committee. C Name of Employer PREMIER COMPUTER SERVICES Occupation EXECUTIVE Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 4200.00		Date of Receipt MM / DD / YYYY 07 / 12 / 2006 Transaction ID: SA11.2049 Amount of Each Receipt this Period 2100.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)		5200.00
TOTAL This Period (last page this line number only)		

27020192526

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 126 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
Raese for Senate

<p>Full Name (Last, First, Middle Initial) A. MR. EMMANUEL MARSHALL</p> <p>Mailing Address 1263 NOSTRAND AVENUE</p> <p>City BROOKLYN State NY Zip Code 11226-1503</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer HARMONY HOMES REALTY Occupation REAL ESTATE BROKER</p> <p>Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 250.00</p>		<p>Date of Receipt MM / DD / YYYY 07 / 21 / 2006</p> <p>Transaction ID: SA11.2371</p> <p>Amount of Each Receipt this Period 250.00</p> <p>CONTRIBUTION</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>Full Name (Last, First, Middle Initial) B. MR. HARRY C. MARSON, IV</p> <p>Mailing Address P.O. BOX 629</p> <p>City ELKINS State WV Zip Code 26241-0629</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer MARSON COAL COMPANY Occupation EXECUTIVE</p> <p>Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1050.00</p>		<p>Date of Receipt MM / DD / YYYY 09 / 29 / 2006</p> <p>Transaction ID: SA11.3152</p> <p>Amount of Each Receipt this Period 50.00</p> <p>CONTRIBUTION</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>Full Name (Last, First, Middle Initial) C. MRS. GERTRAUD E. MARTIN</p> <p>Mailing Address 196 GREENBRIER DRIVE</p> <p>City MORGANTOWN State WV Zip Code 26501</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED</p> <p>Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>		<p>Date of Receipt MM / DD / YYYY 09 / 26 / 2006</p> <p>Transaction ID: SA11.3108</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>CONTRIBUTION</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>SUBTOTAL of Receipts This Page (optional)</p>		1300.00
<p>TOTAL This Period (last page this line number only)</p>		

27020192527

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 127 / 305
(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)
MR. JOHN G. MARTICH
Mailing Address 212 VISTA DRIVE
City WEIRTON State WV Zip Code 26062-5023
FEC ID number of contributing federal political committee. C
Name of Employer FAST LANE CAFE Occupation OWNER
Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼
Election Cycle-to-Date ▼
250.00
Date of Receipt 09 / 30 / 2006
Transaction ID: SA11.3301
Amount of Each Receipt this Period 150.00
CONTRIBUTION
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
MR. PATRICK J. MARTIN
Mailing Address 75 WHARF STREET
LOFT 3
City MORGANTOWN State WV Zip Code 26501-5940
FEC ID number of contributing federal political committee. C
Name of Employer BB&T BANK Occupation EXECUTIVE
Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼
Election Cycle-to-Date ▼
250.00
Date of Receipt 09 / 30 / 2006
Transaction ID: SA11.3284
Amount of Each Receipt this Period 250.00
CONTRIBUTION
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
MR. CHARLES A. MAUL
Mailing Address 2722 MACDUFF CIRCLE N.W.
City NORTH CANTON State OH Zip Code 44720-9504
FEC ID number of contributing federal political committee. C
Name of Employer GREER STEEL COMPANY Occupation EXECUTIVE
Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼
Election Cycle-to-Date ▼
500.00
Date of Receipt 09 / 30 / 2006
Transaction ID: SA11.3272
Amount of Each Receipt this Period 250.00
CONTRIBUTION
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 650.00
TOTAL This Period (last page this line number only)

27020192528

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 128 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Raese for Senate

Full Name (Last, First, Middle Initial) A. MRS. CONNIE L. MAYLE		Date of Receipt MM / DD / YYYY 09 / 29 / 2006	
Mailing Address 2071 LAKESIDE ESTATES		Transaction ID: SA11.3238	
City MORGANTOWN	State WV	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation HOMEMAKER Election Cycle-to-Date ▼ 500.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Full Name (Last, First, Middle Initial) B. MR. MARK W. MCCLYMONDS		Date of Receipt MM / DD / YYYY 09 / 19 / 2006	
Mailing Address P.O. BOX 296		Transaction ID: SA11.2990	
City PORTERSVILLE	State PA	Amount of Each Receipt this Period 3000.00	
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer MCCLYMONDS TRANSIT CO., INC. Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation PRESIDENT Election Cycle-to-Date ▼ 1500.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Full Name (Last, First, Middle Initial) C. MRS. JANET L. MCCLYMONDS		Date of Receipt MM / DD / YYYY 09 / 19 / 2006	
Mailing Address P.O. BOX 296		Transaction ID: SA11.2991	
City PORTERSVILLE	State PA	Amount of Each Receipt this Period 1500.00	
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer MUDDY CREEK LEASING Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation ACCOUNTS RECEIVABLE MANAGER Election Cycle-to-Date ▼ 1500.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] REATTRIBUTED	
SUBTOTAL of Receipts This Page (optional)		3500.00	
TOTAL This Period (last page this line number only)			

27020192529

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 129 / 305
 (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) A. MR. MARK W. MCCLYMONDS Mailing Address P.O. BOX 296 City State Zip Code PORTERSVILLE PA 16051-0296 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 19 / 2006 Transaction ID: SA11.2990B Amount of Each Receipt this Period -1500.00
Name of Employer MCCLYMONDS TRANSIT CO., INC. Occupation PRESIDENT Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1500.00		CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] REATTRIBUTED
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		Date of Receipt MM / DD / YYYY 09 / 30 / 2006 Transaction ID: SA11.3302 Amount of Each Receipt this Period 500.00
Name of Employer RETIRED Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2600.00		CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) C. MR. MELVIN R. MCGREW Mailing Address 3005 2ND AVENUE City State Zip Code CHARLESTON WV 25312-2229 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 30 / 2006 Transaction ID: SA11.3424 Amount of Each Receipt this Period 250.00
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 250.00		CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)		750.00
TOTAL This Period (last page this line number only)		

27020192530

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 130 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial)

A. MR. DOUGLAS E. MCKINNEY

Mailing Address 636 RIVENDELL DRIVE

City State Zip Code
BRIDGEPORT WV 26330-1358

FEC ID number of contributing
federal political committee.

C

Name of Employer
CLARKSBURG VAMC

Occupation
PHYSICIAN

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

MM / DD / YYYY
09 / 19 / 2006

Transaction ID: SA11.3023

Amount of Each Receipt this Period

500.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. MR. HAROLD W. MEDCALF

Mailing Address 624 CLUB CIRCLE DRIVE

City State Zip Code
DANIELS WV 25832

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

MM / DD / YYYY
08 / 11 / 2006

Transaction ID: SA11.2713

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. MR. ANTHONY J. MEDURE

Mailing Address 26 CLUB DRIVE

City State Zip Code
NEW CASTLE PA 16105-9134

FEC ID number of contributing
federal political committee.

C

Name of Employer
LINDY PAVING, INC.

Occupation
ASSISTANT SECRETARY

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2000.00

Date of Receipt

MM / DD / YYYY
09 / 19 / 2006

Transaction ID: SA11.3006

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

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)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 131 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial)

A. MR. GARY MERTINS

Mailing Address 3719 SWALLOWTAIL ROAD

City State Zip Code
MORGANTOWN WV 26508-8825

FEC ID number of contributing
federal political committee.

C

Name of Employer
WEST VIRGINIA RADIO CORPO-
RATION

Occupation
SALES MANAGER

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

MM / DD / YYYY
09 / 29 / 2006

Transaction ID: SA11.3263

Amount of Each Receipt this Period

250.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

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: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
4200.00

Date of Receipt

MM / DD / YYYY
08 / 25 / 2006

Transaction ID: SA11.2847

Amount of Each Receipt this Period

2100.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. MR. JOSEPH L. MOSER

Mailing Address 3861 STEWARTSTOWN ROAD

City State Zip Code
MORGANTOWN WV 26508-1408

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
DEVELOPER

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

MM / DD / YYYY
09 / 30 / 2006

Transaction ID: SA11.3281

Amount of Each Receipt this Period

250.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

2600.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 132 / 305

(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)

A. MRS. MARIANNE MOSER

Mailing Address 41 TYRONE ROAD

City

MORGANTOWN

State

WV

Zip Code

26508-2948

FEC ID number of contributing
federal political committee.

C

Name of Employer
ASHEBROOKE

Occupation
OWNER

Receipt For: 2006

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
09 / 29 / 2006

Transaction ID: SA11.3243

Amount of Each Receipt this Period

250.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. MR. LESTER L. MULLENS

Mailing Address 101 MCCORMICK ROAD

City

MORGANTOWN

State

WV

Zip Code

26508

FEC ID number of contributing
federal political committee.

C

Name of Employer
LEMAC MINE SERVICE

Occupation
PRESIDENT

Receipt For: 2006

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
09 / 30 / 2006

Transaction ID: SA11.3380

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. MR. PHILLIP R. MULLENS

Mailing Address 209 JADE DRIVE

City

MORGANTOWN

State

WV

Zip Code

26508-4026

FEC ID number of contributing
federal political committee.

C

Name of Employer
LEMAC MINE SERVICE

Occupation
VICE PRESIDENT

Receipt For: 2006

☐ Primary ☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
09 / 30 / 2006

Transaction ID: SA11.3389

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 133 / 305

(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)

A. 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: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
3100.00

Date of Receipt

MM / DD / YYYY
09 / 30 / 2006

Transaction ID: SA11.3369

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. MS. PAMELA A. MURPHY

Mailing Address 55 ALDERMAN DRIVE

City State Zip Code
MORGANTOWN WV 26508-8069

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

MM / DD / YYYY
09 / 19 / 2006

Transaction ID: SA11.2939

Amount of Each Receipt this Period

250.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. MR. GREG MURRAY

Mailing Address 1136 EMERALD ROAD

City State Zip Code
CHARLESTON WV 25314-2266

FEC ID number of contributing
federal political committee.

C

Name of Employer
WV RADIO CORP.

Occupation
SALES DIRECTOR

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

MM / DD / YYYY
09 / 30 / 2006

Transaction ID: SA11.3303

Amount of Each Receipt this Period

150.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

1400.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 134 / 305
 (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)
 MR. ROBERT L. MYERS
 Mailing Address 12 CATALPA STREET
 City State Zip Code
 MORGANTOWN WV 26505-3676
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
 CENTRA BANK VP HUMAN RESOURCES
 Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼
 Election Cycle-to-Date ▼
 1750.00
 Date of Receipt
 MM / DD / YYYY
 09 / 19 / 2006
 Transaction ID: SA11.2957
 Amount of Each Receipt this Period
 1750.00
 CONTRIBUTION
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
 MS. BARBARA A. NEAL
 Mailing Address 1445 ANDERSON AVENUE
 City State Zip Code
 MORGANTOWN WV 26505-2321
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
 MYLAN PHARMACEUTICALS REGISTERED NURSE
 Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼
 Election Cycle-to-Date ▼
 250.00
 Date of Receipt
 MM / DD / YYYY
 09 / 29 / 2006
 Transaction ID: SA11.3246
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
 MR. WILLIAM A. NEAL
 Mailing Address 2315 LAKESIDE ESTATES
 City State Zip Code
 MORGANTOWN WV 26508-5624
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
 WVU PHYSICIAN
 Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼
 Election Cycle-to-Date ▼
 1000.00
 Date of Receipt
 MM / DD / YYYY
 08 / 18 / 2006
 Transaction ID: SA11.2751
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

27020192535

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 135 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Raese for Senate

A. Full Name (Last, First, Middle Initial)
DR. KELLY R. NELSON
Mailing Address 46 JUNIPER LANE

City State Zip Code
BRIDGEPORT WV 26330-9335

FEC ID number of contributing federal political committee. ☐ C

Name of Employer
INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Election Cycle-to-Date ▼

500.00

Date of Receipt

09 / 30 / 2006

Transaction ID: SA11.3335

Amount of Each Receipt this Period

500.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
MRS. JOANNA S. NESSELROAD
Mailing Address 376 W. RUN ROAD

City State Zip Code
MORGANTOWN WV 26508-9055

FEC ID number of contributing federal political committee. ☐ C

Name of Employer

Occupation

HOMEMAKER

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

08 / 18 / 2006

Transaction ID: SA11.2752

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

C. Full Name (Last, First, Middle Initial)
MR. PAUL E. NESSELROAD
Mailing Address 376 W. RUN ROAD

City State Zip Code
MORGANTOWN WV 26508-9055

FEC ID number of contributing federal political committee. ☐ C

Name of Employer

Occupation

RETIRED

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

08 / 18 / 2006

Transaction ID: SA11.2753

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

4500.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 136 / 305
 (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)
A. MR. ROGER ALLEN NUZUM
 Mailing Address 1688 FAIRMONT AVENUE
 City FAIRMONT State WV Zip Code 26554-2157
 FEC ID number of contributing federal political committee. **C**
 Name of Employer NUZUM TRUCKING COMPANY Occupation VICE PRESIDENT
 Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼
 Election Cycle-to-Date ▼ 500.00
 Date of Receipt 09 / 30 / 2006
 Transaction ID: SA11.3394
 Amount of Each Receipt this Period 500.00
 CONTRIBUTION
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)
B. MR. HOYT S. PARDEE
 Mailing Address 10580 WILSHIRE BLVD.
 City LOS ANGELES State CA Zip Code 90024-7614
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation RETIRED
 Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼
 Election Cycle-to-Date ▼ 250.00
 Date of Receipt 07 / 27 / 2006
 Transaction ID: SA11.2531
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)
C. MR. LELAND PARK
 Mailing Address P.O. BOX 777
 City DAVIDSON State NC Zip Code 28036-0777
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation RETIRED
 Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼
 Election Cycle-to-Date ▼ 250.00
 Date of Receipt 08 / 11 / 2006
 Transaction ID: SA11.2741
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) 1000.00
 TOTAL This Period (last page this line number only)

27020192537

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 137 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full) Raese for Senate

Full Name (Last, First, Middle Initial) A. MR. FREDERICK W. PARSONS		Date of Receipt MM / DD / YYYY 09 / 21 / 2006
Mailing Address R.R. 1 BOX 181A		Transaction ID: SA11.3128
City EVANS	State WV	Zip Code 25241-9764
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 234.00	
Name of Employer WEST VIRGINIA RADIO CORPORATION	Occupation EXECUTIVE	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2334.00	

Full Name (Last, First, Middle Initial) B. MRS. STACY PARSONS		Date of Receipt MM / DD / YYYY 09 / 21 / 2006
Mailing Address R.R. 1 BOX 181A		Transaction ID: SA11.3127
City EVANS	State WV	Zip Code 25241-9764
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1866.00	
Name of Employer JACKSON COUNTY BOARD OF EDUCATION	Occupation SCHOOL TEACHER	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1866.00	

Full Name (Last, First, Middle Initial) C. MR. LARRY M. PFOST		Date of Receipt MM / DD / YYYY 08 / 08 / 2006
Mailing Address 5307 WEDGEBROOK LANE		Transaction ID: SA11.2684
City CROSS LANES	State WV	Zip Code 25313-1683
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2100.00	
Name of Employer METRO NEWS RADIO NETWORKS	Occupation SALES MANAGER	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2100.00	

SUBTOTAL of Receipts This Page (optional)	4200.00
TOTAL This Period (last page this line number only)	

27020192538

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: **PAGE 138 / 305**
 (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. MR. TIM PISEGNA Full Name (Last, First, Middle Initial) Mailing Address 214 POPLAR DRIVE City MORGANTOWN State WV Zip Code 26505-2539 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 19 / 2006 Transaction ID: SA11.3025 Amount of Each Receipt this Period 2100.00
Name of Employer GREER INDUSTRIES, INC. Occupation MANAGER Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 3600.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. MR. RONALD R. POTEITA Full Name (Last, First, Middle Initial) Mailing Address 1831 LOUDEN HEIGHTS ROAD City CHARLESTON State WV Zip Code 25314-1564 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 08 / 01 / 2006 Transaction ID: SA11.2569 Amount of Each Receipt this Period 500.00
Name of Employer POTEITA & ASSOCIATES, INC. Occupation BUSINESS PERSON Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. MR. RONALD R. POTEITA Full Name (Last, First, Middle Initial) Mailing Address 1831 LOUDEN HEIGHTS ROAD City CHARLESTON State WV Zip Code 25314-1564 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 29 / 2006 Transaction ID: SA11.3145 Amount of Each Receipt this Period 500.00
Name of Employer POTEITA & ASSOCIATES, INC. Occupation BUSINESS PERSON Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)		3100.00
TOTAL This Period (last page this line number only)		

27020192539

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 139 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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

NAME OF COMMITTEE (In Full)
Raese for Senate

A. Full Name (Last, First, Middle Initial) MR. JOHN F. POTT Mailing Address P.O. BOX 1524 City LA QUINTA State CA Zip Code 92247-1524 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 29 / 2006 Transaction ID: SA11.3233 Amount of Each Receipt this Period 500.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) MR. ROBERT L. PRESTON, JR. Mailing Address 26 BRISTOL LANE APARTMENT 6 City NEW CASTLE State PA Zip Code 16105-2706 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 19 / 2006 Transaction ID: SA11.3012 Amount of Each Receipt this Period 1000.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) MR. WILLIAM J. PULICE, II Mailing Address 98 GARDEN CIRCLE City BRIDGEPORT State WV Zip Code 26330-1367 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 30 / 2006 Transaction ID: SA11.3276 Amount of Each Receipt this Period 250.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Subtotal: SUBTOTAL of Receipts This Page (optional) Total: TOTAL This Period (last page this line number only)		1750.00

27020192540

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 140 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Raese for Senate

Full Name (Last, First, Middle Initial) A. MR. CHARLES D. RAESE		Date of Receipt MM / DD / YYYY 09 / 26 / 2006	
Mailing Address 118 TOMCAT HOLLOW ROAD		Transaction ID: SA11.3112	
City SMITHFIELD	State PA	Zip Code 15478-1332	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer WV RADIO CORP	Occupation ACCOUNT EXECUTIVE		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2100.00		
Full Name (Last, First, Middle Initial) B. MR. CHARLES D. RAESE		Date of Receipt MM / DD / YYYY 09 / 30 / 2006	
Mailing Address 118 TOMCAT HOLLOW ROAD		Transaction ID: SA11.3375	
City SMITHFIELD	State PA	Zip Code 15478-1332	Amount of Each Receipt this Period 850.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer WV RADIO CORP	Occupation ACCOUNT EXECUTIVE		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2100.00		
Full Name (Last, First, Middle Initial) C. MS. REBECCA RAESE		Date of Receipt MM / DD / YYYY 08 / 25 / 2006	
Mailing Address 233 LEBANON STREET		Transaction ID: SA11.2845	
City MORGANTOWN	State WV	Zip Code 26501-6535	Amount of Each Receipt this Period 2100.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer	Occupation STUDENT		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2100.00		
SUBTOTAL of Receipts This Page (optional)		3950.00	
TOTAL This Period (last page this line number only)			

27020192541

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 141 / 305
(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)

A. MR. ROBERT A. RAESE

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
GREER INDUSTRIES, INC.

Occupation

MANAGER

Receipt For: 2006

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2250.00

Date of Receipt

MM / DD / YYYY
08 / 01 / 2006

Transaction ID: SA11.2573

Amount of Each Receipt this Period

500.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. MR. ROBERT A. RAESE

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
GREER INDUSTRIES, INC.

Occupation

MANAGER

Receipt For: 2006

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2250.00

Date of Receipt

MM / DD / YYYY
09 / 19 / 2006

Transaction ID: SA11.3021

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. MR. LEWIS S. RANIERI

Mailing Address 50 CHARLES LINDBERGH BLVD.
#500

City

UNIONDALE

State

NY

Zip Code

11553-3650

FEC ID number of contributing
federal political committee.

C

Name of Employer
RANIERI & COMPANY, INC.

Occupation

CHAIRMAN

Receipt For: 2006

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
07 / 25 / 2006

Transaction ID: SA11.2470

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

3000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 142 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Raese for Senate

Full Name (Last, First, Middle Initial) A. MRS. DORIS S. REED		Date of Receipt MM / DD / YYYY 09 / 29 / 2006
Mailing Address 308 GRAND STREET		Transaction ID: SA11.3224
City MORGANTOWN	State WV	Zip Code 26501-7512
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer	Occupation HOMEMAKER	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. MR. EUGENE D. REGAD, JR.		Date of Receipt MM / DD / YYYY 07 / 12 / 2006
Mailing Address 854 RIVERVIEW DRIVE		Transaction ID: SA11.2048
City MORGANTOWN	State WV	Zip Code 26505-4660
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer	Occupation RETIRED	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. MR. THOMAS H. REYNOLDS		Date of Receipt MM / DD / YYYY 09 / 13 / 2006
Mailing Address 111 BRECKENRIDGE DRIVE		Transaction ID: SA11.2934
City WEXFORD	State PA	Zip Code 15090-9400
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer HIGHWAY EQUIPMENT	Occupation PRESIDENT	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	2250.00
TOTAL This Period (last page this line number only)	

27020192543

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 143 / 305
 (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)

A. MR. ROBERT M. RICHARDSON

Mailing Address 400 RUNNING DEER ROAD

City State Zip Code
 BLYTHEWOOD SC 29016-9219

FEC ID number of contributing federal political committee. C

Name of Employer
 RICHARDSON CONSTRUCTION COMPANY

Occupation
 CONTRACTOR

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 500.00

Date of Receipt

MM / DD / YYYY
 08 / 04 / 2006

Transaction ID: SA11.2671

Amount of Each Receipt this Period

500.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. MR. BRENT D. ROBINSON

Mailing Address 2021 ICES FERRY DRIVE

City State Zip Code
 MORGANTOWN WV 26508-8059

FEC ID number of contributing federal political committee. C

Name of Employer
 BB&T CORPORATION

Occupation
 BANKER

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 250.00

Date of Receipt

MM / DD / YYYY
 09 / 19 / 2006

Transaction ID: SA11.3017

Amount of Each Receipt this Period

250.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. MRS. VIRGINIA ROBINSON

Mailing Address 108 FROSTY VALLEY

City State Zip Code
 MC MURRAY PA 15317-3122

FEC ID number of contributing federal political committee. C

Name of Employer

Occupation
 HOMEMAKER

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
 1000.00

Date of Receipt

MM / DD / YYYY
 09 / 19 / 2006

Transaction ID: SA11.3002

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

1750.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 144 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Raese for Senate

Full Name (Last, First, Middle Initial) A. MRS. JEANETTE M. RODEGHIER		Date of Receipt MM / DD / YYYY 07 / 12 / 2006	
Mailing Address 1440 TOWNSHIP AVENUE		Transaction ID: SA11.2024	
City State Zip Code WISCONSIN RAPIDS WI 54494-6332		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer Occupation HOMEMAKER		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) B. MR. THOMAS P. ROGERS		Date of Receipt MM / DD / YYYY 09 / 19 / 2006	
Mailing Address 245 LAKEVIEW DRIVE		Transaction ID: SA11.2958	
City State Zip Code MORGANTOWN WV 26508-8081		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer Occupation THOUGHTFULNESS, INC. CHAIRMAN & CEO		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) C. MR. MICHAEL P. ROLLAGE		Date of Receipt MM / DD / YYYY 09 / 19 / 2006	
Mailing Address 158 DELAWARE TRAIL		Transaction ID: SA11.3008	
City State Zip Code VENETIA PA 15367-1015		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer Occupation MCCRORY & MCDOWELL L.L.C. PRINCIPAL		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 2000.00	
SUBTOTAL of Receipts This Page (optional)		2250.00	
TOTAL This Period (last page this line number only)			

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 145 / 305
(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)
A. MR. HUYEN T. ROMINGER
Mailing Address ROUTE 2 BOX 20

City State Zip Code
SALEM WV 26426-7331

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

Name of Employer
SELF-EMPLOYED

Occupation
OIL/GAS

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2006

Transaction ID: SA11.3393

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)
B. MR. CLIFFORD ROWE
Mailing Address P.O. BOX 98100

City State Zip Code
PITTSBURGH PA 15227-0500

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

Name of Employer
TRUMBULL CORPORATION/P.J. DICK INC.

Occupation
C.E.O.

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
09 / 19 / 2006

Transaction ID: SA11.2987

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)
C. MR. DELBERT R. ROYCE, III
Mailing Address 6028 WOODLAND BLUFF

City State Zip Code
MORGANTOWN WV 26508-9402

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

Name of Employer
BLAINETURNER ADVERTISING, INC.

Occupation
EXECUTIVE

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2006

Transaction ID: SA11.3278

Amount of Each Receipt this Period
500.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

2500.00

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

27020192548

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 146 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)

Raese for Senate

<p>Full Name (Last, First, Middle Initial) A. MS. REBECCA CARPENTER RUNNELS</p> <p>Mailing Address 106 CHELTENHAM ROAD</p> <p>City NEWARK State DE Zip Code 19711-3616</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer _____ Occupation RETIRED</p> <p>Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 1000.00</p>		<p>Date of Receipt MM / DD / YYYY 08 / 21 / 2006</p> <p>Transaction ID: SA11.2785</p> <p>Amount of Each Receipt this Period 1000.00</p> <p>CONTRIBUTION</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>Full Name (Last, First, Middle Initial) B. MR. JOHN P. RUSSELL</p> <p>Mailing Address P.O. BOX 117</p> <p>City MILL CREEK State WV Zip Code 26280-0117</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer _____ Occupation RETIRED</p> <p>Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 500.00</p>		<p>Date of Receipt MM / DD / YYYY 07 / 14 / 2006</p> <p>Transaction ID: SA11.2105</p> <p>Amount of Each Receipt this Period 500.00</p> <p>CONTRIBUTION</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>Full Name (Last, First, Middle Initial) C. MR. TIMOTHY P. SAAB</p> <p>Mailing Address 887 RIVERVIEW DRIVE</p> <p>City MORGANTOWN State WV Zip Code 26505-4631</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer CENTRA FINANCIAL HOLDINGS, INC. Occupation EXECUTIVE</p> <p>Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 3000.00</p>		<p>Date of Receipt MM / DD / YYYY 09 / 19 / 2006</p> <p>Transaction ID: SA11.2961</p> <p>Amount of Each Receipt this Period 2000.00</p> <p>CONTRIBUTION</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>SUBTOTAL of Receipts This Page (optional)</p>		<p>3500.00</p>
<p>TOTAL This Period (last page this line number only)</p>		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 147 / 305
(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)
A. MR. KEVIN L. SALISBURY
Mailing Address 1201 CHASE STREET

City State Zip Code
MORGANTOWN WV 26508-6840

FEC ID number of contributing
federal political committee.

C

Name of Employer
MARCH WESTIN

Occupation
CONTROLLER

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

MM / DD / YYYY
09 / 19 / 2006

Transaction ID: SA11.2978

Amount of Each Receipt this Period

500.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)
B. MR. J. ANTHONY SAWCZYSZYN
Mailing Address P.O. BOX 739

City State Zip Code
MORGANTOWN WV 26507-0739

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
INSURANCE AGENT

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

MM / DD / YYYY
07 / 27 / 2006

Transaction ID: SA11.2508

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)
C. MR. STEPHEN A. SCHMIDT
Mailing Address 775 MOUNTAIN VIEW PLACE

City State Zip Code
MORGANTOWN WV 26501-6242

FEC ID number of contributing
federal political committee.

C

Name of Employer
SELF-EMPLOYED

Occupation
REAL ESTATE APPRAISER

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

MM / DD / YYYY
09 / 21 / 2006

Transaction ID: SA11.3075

Amount of Each Receipt this Period

500.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

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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. SAMUEL C. SELLARO

Mailing Address 804 W. MAIN STREET

City

BRIDGEPORT

State

WV

Zip Code

26330-1649

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For: 2006

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
09 / 29 / 2006

Transaction ID: SA11.3249

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. MR. BOB SEPICH

Mailing Address P.O. BOX 177

City

OAKDALE

State

PA

Zip Code

15071-0177

FEC ID number of contributing
federal political committee.

C

Name of Employer

O.E.C. RENTALS

Occupation

OWNER/PRESIDENT

Receipt For: 2006

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
09 / 19 / 2006

Transaction ID: SA11.3011

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. MR. DAVID SHAFFER

Mailing Address 37 MILLAN STREET, WO

City

MORGANTOWN

State

WV

Zip Code

26501-4321

FEC ID number of contributing
federal political committee.

C

Name of Employer
GREER INDUSTRIES, INC.

Occupation

EXECUTIVE

Receipt For: 2006

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
09 / 29 / 2006

Transaction ID: SA11.3241

Amount of Each Receipt this Period

500.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

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)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:		PAGE 149 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full) Raese for Senate

Full Name (Last, First, Middle Initial) A. MR. DONALD G. SHAFFER		Date of Receipt MM / DD / YYYY 09 / 29 / 2006
Mailing Address P.O. BOX 272		Transaction ID: SA11.3147
City MORGANTOWN	State WV	Zip Code 26507-0272
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50.00	
Name of Employer CENTER SERVICE AUTO BODY	Occupation OWNER	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1050.00	

Full Name (Last, First, Middle Initial) B. MRS. PATRICIA M. SHAFFER		Date of Receipt MM / DD / YYYY 09 / 13 / 2006
Mailing Address P.O. BOX 137		Transaction ID: SA11.2927
City ARTHURDALE	State WV	Zip Code 26520-0137
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2100.00	
Name of Employer SHAFFER TRUCKING	Occupation OFFICE MANAGER	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 4200.00	

Full Name (Last, First, Middle Initial) C. MR. JOHN C. SHOTT		Date of Receipt MM / DD / YYYY 09 / 26 / 2006
Mailing Address 100 BLUEFIELD AVENUE		Transaction ID: SA11.3095
City BLUEFIELD	State WV	Zip Code 24701-2836
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer	Occupation RETIRED	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 750.00	

SUBTOTAL of Receipts This Page (optional)	2650.00
TOTAL This Period (last page this line number only)	

27020192550

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 150 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
 Raese for Senate

Full Name (Last, First, Middle Initial) A. MR. ROBERT SHOUSE Mailing Address 629 S. MAIN STREET City KERNERSVILLE State NC Zip Code 27284-2741 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 30 / 2006 Transaction ID: SA11.3467 Amount of Each Receipt this Period 150.00
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation RETIRED Election Cycle-to-Date ▼ 250.00		CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) B. MR. BRUCE A. SIDWELL Mailing Address 434 OHIO AVENUE City WESTOVER State WV Zip Code 26501-3943 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 29 / 2006 Transaction ID: SA11.3254 Amount of Each Receipt this Period 1000.00
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation CONTRACTOR Election Cycle-to-Date ▼ 1000.00		CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) C. MR. MICHAEL G. SIMON Mailing Address 412 SUNRISE DRIVE City WEIRTON State WV Zip Code 26062-5090 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 05 / 2006 Transaction ID: SA11.2882 Amount of Each Receipt this Period 1800.00
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Occupation ATTORNEY Election Cycle-to-Date ▼ 1800.00		CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)		2950.00
TOTAL This Period (last page this line number only)		

27020192551

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 151 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Raese for Senate

Full Name (Last, First, Middle Initial) A. MR. CHARLES D. SIMPSON		Date of Receipt MM / DD / YYYY 09 / 29 / 2006
Mailing Address 56 CLARK ROAD		Transaction ID: SA11.3266
City MORGANTOWN	State WV	Zip Code 26508-2622
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer GREER INDUSTRIES, INC.	Occupation MANAGER	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. MRS. DEBORAH W. SIMPSON		Date of Receipt MM / DD / YYYY 08 / 11 / 2006
Mailing Address 56 CLARK ROAD		Transaction ID: SA11.2804
City MORGANTOWN	State WV	Zip Code 26508-2622
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 4.64	
Name of Employer GREER INDUSTRIES, INC.	Occupation EXECUTIVE ASSISTANT	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 544.28	

Full Name (Last, First, Middle Initial) C. MRS. DEBORAH W. SIMPSON		Date of Receipt MM / DD / YYYY 08 / 07 / 2006
Mailing Address 56 CLARK ROAD		Transaction ID: SA11.3134
City MORGANTOWN	State WV	Zip Code 26508-2622
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 4.64	
Name of Employer GREER INDUSTRIES, INC.	Occupation EXECUTIVE ASSISTANT	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 544.28	

SUBTOTAL of Receipts This Page (optional)	259.28
TOTAL This Period (last page this line number only)	

27020192552

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 152 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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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 State Zip Code MORGANTOWN WV 26508-2622 FEC ID number of contributing federal political committee. C Name of Employer GREER INDUSTRIES, INC. Occupation EXECUTIVE ASSISTANT Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 544.28		Date of Receipt 09 / 18 / 2006 Transaction ID: SA11.3135 Amount of Each Receipt this Period 4.64 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) IN-KIND - POSTAGE
Full Name (Last, First, Middle Initial) B. MRS. DEBORAH W. SIMPSON Mailing Address 56 CLARK ROAD City State Zip Code MORGANTOWN WV 26508-2622 FEC ID number of contributing federal political committee. C Name of Employer GREER INDUSTRIES, INC. Occupation EXECUTIVE ASSISTANT Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 544.28		Date of Receipt 09 / 08 / 2006 Transaction ID: SA11.3136 Amount of Each Receipt this Period 4.64 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) IN-KIND - POSTAGE
Full Name (Last, First, Middle Initial) C. MRS. DEBORAH W. SIMPSON Mailing Address 56 CLARK ROAD City State Zip Code MORGANTOWN WV 26508-2622 FEC ID number of contributing federal political committee. C Name of Employer GREER INDUSTRIES, INC. Occupation EXECUTIVE ASSISTANT Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 544.28		Date of Receipt 08 / 31 / 2006 Transaction ID: SA11.3137 Amount of Each Receipt this Period 4.64 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) IN-KIND - POSTAGE
SUBTOTAL of Receipts This Page (optional)		13.92
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 153 / 305
(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)

A. MRS. DEBORAH W. SIMPSON

Mailing Address 56 CLARK ROAD

City State Zip Code
MORGANTOWN WV 26508-2622

FEC ID number of contributing
federal political committee.

C

Name of Employer
GREER INDUSTRIES, INC.

Occupation
EXECUTIVE ASSISTANT

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
544.28

Date of Receipt

MM / DD / YYYY
09 / 29 / 2006

Transaction ID: SA11.3267

Amount of Each Receipt this Period

250.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. MRS. DEBORAH W. SIMPSON

Mailing Address 56 CLARK ROAD

City State Zip Code
MORGANTOWN WV 26508-2622

FEC ID number of contributing
federal political committee.

C

Name of Employer
GREER INDUSTRIES, INC.

Occupation
EXECUTIVE ASSISTANT

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
544.28

Date of Receipt

MM / DD / YYYY
09 / 29 / 2006

Transaction ID: SA11.3269

Amount of Each Receipt this Period

11.80

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

IN-KIND - POSTAGE

Full Name (Last, First, Middle Initial)

C. MS. HOPE GEIER SMITH

Mailing Address 70 E. 55TH STREET

City State Zip Code
NEW YORK NY 10022-3222

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
HOMEMAKER

Receipt For: 2006
☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
4200.00

Date of Receipt

MM / DD / YYYY
08 / 30 / 2006

Transaction ID: SA11.2857

Amount of Each Receipt this Period

2100.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]
REDESIGNATION FROM GENERAL
(DEBT REDUCTION)

SUBTOTAL of Receipts This Page (optional)

261.80

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

Use separate schedule(s)
 or each category of the
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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)

A. MS. HOPE GEIER SMITH

Mailing Address 70 E. 55TH STREET

City

NEW YORK

State

NY

Zip Code

10022-3222

FEC ID number of contributing
 federal political committee.

C

Name of Employer

Occupation

HOMEMAKER

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

4200.00

Date of Receipt

MM / DD / YYYY
 08 / 30 / 2006

Transaction ID: SA11.1440B

Amount of Each Receipt this Period

-2100.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

[MEMO ITEM]

REDESIGNATION TO PRIMARY
 (DEBT REDUCTION)

Full Name (Last, First, Middle Initial)

B. WILLIAM SNYDER

Mailing Address P.O. BOX 829

City

LEWISBURG

State

WV

Zip Code

24901-0829

FEC ID number of contributing
 federal political committee.

C

Name of Employer
 RBS INC.

Occupation

BUSINESS OWNER / BASIC MATERIA

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
 08 / 11 / 2006

Transaction ID: SA11.2763

Amount of Each Receipt this Period

500.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. MR. MICHAEL L. SOLOMON

Mailing Address 347 LAKEVIEW DRIVE

City

MORGANTOWN

State

WV

Zip Code

26508-8080

FEC ID number of contributing
 federal political committee.

C

Name of Employer
 SOLOMON & SOLOMON

Occupation

ATTORNEY

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

MM / DD / YYYY
 09 / 30 / 2006

Transaction ID: SA11.3282

Amount of Each Receipt this Period

500.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 155 / 305
(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)

A. MRS. RITA JO SOLOMON

Mailing Address 667 COLONIAL DRIVE

City State Zip Code
MORGANTOWN WV 26505-0655

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
HOMEMAKER

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

MM / DD / YYYY
09 / 26 / 2006

Transaction ID: SA11.3111

Amount of Each Receipt this Period

500.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. MR. DOMINIC M. SPAGNUOLO

Mailing Address 75 BILTMORE ESTATES

City State Zip Code
PHOENIX AZ 85016-2827

FEC ID number of contributing
federal political committee.

C

Name of Employer
SDB COMPANY

Occupation
OWNER

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

MM / DD / YYYY
09 / 29 / 2006

Transaction ID: SA11.3231

Amount of Each Receipt this Period

500.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. MRS. JANET K. STARR

Mailing Address 287 LEHAN ROAD

City State Zip Code
BETHLEHEM NH 03574-5855

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
RETIRED

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

MM / DD / YYYY
08 / 21 / 2006

Transaction ID: SA11.2801

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 156 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial) A. MR. DAVID M. STATON Mailing Address 368 JAGUAR DRIVE City State Zip Code INWOOD WV 25428-3184 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 08 / 04 / 2006 Transaction ID: SA11.2679 Amount of Each Receipt this Period 500.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer CAPITAL LINK Occupation CONSULTANT Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1000.00		
Full Name (Last, First, Middle Initial) B. MR. CARL J. STEENSTRA Mailing Address ROUTE 1 BOX 22 City State Zip Code GRAFTON WV 26354-9703 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 08 / 18 / 2006 Transaction ID: SA11.2756 Amount of Each Receipt this Period 50.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer D & L LIMOUSINE Occupation TAXI DRIVER Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 350.00		
Full Name (Last, First, Middle Initial) C. MR. CARL J. STEENSTRA Mailing Address ROUTE 1 BOX 22 City State Zip Code GRAFTON WV 26354-9703 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 08 / 25 / 2006 Transaction ID: SA11.2848 Amount of Each Receipt this Period 100.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Name of Employer D & L LIMOUSINE Occupation TAXI DRIVER Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 350.00		
SUBTOTAL of Receipts This Page (optional)		650.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 157 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial) A. MR. CARL J. STEENSTRA		Date of Receipt MM / DD / YYYY 09 / 19 / 2006	
Mailing Address ROUTE 1 BOX 22		Transaction ID: SA11.3016	
City GRAFTON	State WV	Amount of Each Receipt this Period 100.00	
Zip Code 26354-9703		CONTRIBUTION	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer D & L LIMOUSINE		Occupation TAXI DRIVER	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) B. MR. CARL J. STEENSTRA		Date of Receipt MM / DD / YYYY 09 / 21 / 2006	
Mailing Address ROUTE 1 BOX 22		Transaction ID: SA11.3059	
City GRAFTON	State WV	Amount of Each Receipt this Period 100.00	
Zip Code 26354-9703		CONTRIBUTION	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer D & L LIMOUSINE		Occupation TAXI DRIVER	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) C. MR. FRANC N. STERN		Date of Receipt MM / DD / YYYY 09 / 19 / 2006	
Mailing Address 1 CARRIAGE DRIVE		Transaction ID: SA11.3014	
City FAIRMONT	State WV	Amount of Each Receipt this Period 2100.00	
Zip Code 26554-1460		CONTRIBUTION	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer MT. LEVINE STEEL COMPANY		Occupation EXECUTIVE	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Election Cycle-to-Date ▼ 4100.00	
SUBTOTAL of Receipts This Page (optional)		2300.00	
TOTAL This Period (last page this line number only)			

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 158 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
Raese for Senate

Full Name (Last, First, Middle Initial) A. DR. JAMES M. STEVENSON		Date of Receipt MM / DD / YYYY 09 / 30 / 2006
Mailing Address 232 LEBANON STREET		Transaction ID: SA11.3385
City MORGANTOWN	State WV	Zip Code 26501-6536
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer WVU HOSPITALS INC.	Occupation PHYSICIAN	CONTRIBUTION
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial) B. MR. JOHN STIGLMEIER, JR.		Date of Receipt MM / DD / YYYY 09 / 21 / 2006
Mailing Address P.O. BOX 106		Transaction ID: SA11.3067
City PALM BEACH	State FL	Zip Code 33480-0106
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer SELF-EMPLOYED	Occupation PRIVATE INVESTIGATOR	CONTRIBUTION
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial) C. JAMES STONE, SR.		Date of Receipt MM / DD / YYYY 08 / 11 / 2006
Mailing Address ROUTE 1 BOX 230		Transaction ID: SA11.2760
City KINGWOOD	State WV	Zip Code 26537-9706
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1250.00	
Name of Employer BILL STONE EXCAVATING	Occupation EXCAVATION CONTRACTOR	CONTRIBUTION
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1250.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

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

27020192559

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 159 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Raese for Senate

Full Name (Last, First, Middle Initial) A. MR. LARRY D. SWANN		Date of Receipt MM / DD / YYYY 09 / 30 / 2006	
Mailing Address 405 CAPITOL STREET SUITE 513		Transaction ID: SA11.3366	
City CHARLESTON	State WV	Zip Code 25301-1783	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer SELF EMPLOYED	Occupation GOVERNMENT RELATIONS		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 750.00		
Full Name (Last, First, Middle Initial) B. MR. PAUL T. SWANSON		Date of Receipt MM / DD / YYYY 09 / 19 / 2006	
Mailing Address 2941 HENRY CLAY DRIVE		Transaction ID: SA11.2956	
City MORGANTOWN	State WV	Zip Code 26508	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer CWS, INC.	Occupation CHAIRMAN		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		
Full Name (Last, First, Middle Initial) C. MR. DARRYL J. TAYLOR		Date of Receipt MM / DD / YYYY 09 / 19 / 2006	
Mailing Address P.O. BOX 17		Transaction ID: SA11.3004	
City CLARKSBURG	State PA	Zip Code 15725-0017	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer TAYLOR TRUCKING	Occupation PRESIDENT/OWNER		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00		
SUBTOTAL of Receipts This Page (optional)		2250.00	
TOTAL This Period (last page this line number only)			

27020192560

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 160 / 305
 (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) A. MR. ANDREW K. TEETER		Date of Receipt MM / DD / YYYY 08 / 28 / 2006	
Mailing Address 4307 KANAWHA AVENUE S.E.		Transaction ID: SA11.2835	
City CHARLESTON	State WV	Zip Code 25304-1736	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer ACORDIA OF WEST VIRGINIA	Occupation INSURANCE	Election Cycle-to-Date 250.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		250.00	
Full Name (Last, First, Middle Initial) B. MR. BRIAN E. THOMAS		Date of Receipt MM / DD / YYYY 09 / 19 / 2006	
Mailing Address 263 HORSESHOE RD		Transaction ID: SA11.2964	
City MORGANTOWN	State WV	Zip Code 26508-5307	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer CLEAR MOUNTAIN BANK	Occupation BANKER	Election Cycle-to-Date 1000.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		1000.00	
Full Name (Last, First, Middle Initial) C. MR. JOHN L. THOMAS		Date of Receipt MM / DD / YYYY 09 / 29 / 2006	
Mailing Address 1204 GREENMONT HILLS DRIVE		Transaction ID: SA11.3216	
City VIENNA	State WV	Zip Code 26105-3278	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer TRI-STATE ROOFING & SHEET METAL	Occupation CONTRACTOR	Election Cycle-to-Date 2000.00	
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		2000.00	
SUBTOTAL of Receipts This Page (optional)		2250.00	
TOTAL This Period (last page this line number only)			

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 161 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)
Raese for Senate

<p>Full Name (Last, First, Middle Initial) A. MR. HERBERT R. THOMPSON</p> <p>Mailing Address 1140 PARK AVENUE</p> <p>City WAYNESBURG State PA Zip Code 15370-9727</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer ABPP Occupation MANAGER</p> <p>Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 250.00</p>		<p>Date of Receipt MM / DD / YYYY 09 / 29 / 2006</p> <p>Transaction ID: SA11.3236</p> <p>Amount of Each Receipt this Period 250.00</p> <p>CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>Full Name (Last, First, Middle Initial) B. MR. JAMES M. TROY</p> <p>Mailing Address 804 CASSVILLE-MT. MORRIS ROAD</p> <p>City MORGANTOWN State WV Zip Code 26501-2126</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer GREER INDUSTRIES, INC. Occupation ACCOUNTANT</p> <p>Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 4200.00</p>		<p>Date of Receipt MM / DD / YYYY 08 / 04 / 2006</p> <p>Transaction ID: SA11.2677</p> <p>Amount of Each Receipt this Period 2100.00</p> <p>CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>Full Name (Last, First, Middle Initial) C. MRS. MALISSA RAE TUTINO</p> <p>Mailing Address 3031 WILMINGTON ROAD</p> <p>City NEW CASTLE State PA Zip Code 16105-1242</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation HOMEMAKER</p> <p>Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 500.00</p>		<p>Date of Receipt MM / DD / YYYY 09 / 30 / 2006</p> <p>Transaction ID: SA11.3386</p> <p>Amount of Each Receipt this Period 500.00</p> <p>CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>SUBTOTAL of Receipts This Page (optional)</p>		2850.00
<p>TOTAL This Period (last page this line number only)</p>		

27020192562

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 162 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial)

A. MR. VINCENT P. TUTINO

Mailing Address 3031 WILMINGTON ROAD

City

NEW CASTLE

State

PA

Zip Code

16105-1242

FEC ID number of contributing
federal political committee.

C

Name of Employer
LINDY PAVING, INC.

Occupation

PRESIDENT

Receipt For:

2006

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

09 / 19 / 2006

Transaction ID: SA11.2988

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. MR. NORMAN M. VALZ

Mailing Address 4202 VENABLE AVENUE

City

CHARLESTON

State

WV

Zip Code

25304-2416

FEC ID number of contributing
federal political committee.

C

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:

2006

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

09 / 19 / 2006

Transaction ID: SA11.3028

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. MR. GEORGE R. VANCE

Mailing Address 112 PINERIDGE DRIVE

City

BECKLEY

State

WV

Zip Code

25801-2332

FEC ID number of contributing
federal political committee.

C

Name of Employer
SABER SUPPLY CO. INC

Occupation

PRESIDENT

Receipt For:

2006

☐ Primary

☒ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

08 / 21 / 2006

Transaction ID: SA11.2803

Amount of Each Receipt this Period

300.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 163 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial) A. MR. FRANCIS S. VITALE		Date of Receipt MM / DD / YYYY 09 / 19 / 2006	
Mailing Address 2062 PINECREST DRIVE		Transaction ID: SA11.2946	
City MORGANTOWN	State WV	Zip Code 26505-8031	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer CENTRA BANK	Occupation EXECUTIVE	Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 3000.00			
Full Name (Last, First, Middle Initial) B. MR. DENNIS VITH		Date of Receipt MM / DD / YYYY 09 / 19 / 2006	
Mailing Address 104 BUCKSKIN COURT		Transaction ID: SA11.2998	
City WEXFORD	State PA	Zip Code 15090	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer MICHAEL JOSEPH DEVELOPMENT	Occupation VICE PRESIDENT	Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 2000.00			
Full Name (Last, First, Middle Initial) C. MR. DENNIS VITH		Date of Receipt MM / DD / YYYY 09 / 19 / 2006	
Mailing Address 104 BUCKSKIN COURT		Transaction ID: SA11.2999	
City WEXFORD	State PA	Zip Code 15090	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer MICHAEL JOSEPH DEVELOPMENT	Occupation VICE PRESIDENT	Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Election Cycle-to-Date ▼ 2000.00			
SUBTOTAL of Receipts This Page (optional)		4000.00	
TOTAL This Period (last page this line number only)			

27020192564

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 164 / 305
 (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) A. MRS. LILLIAN JANE VOLK		Date of Receipt MM / DD / YYYY 09 / 21 / 2006
Mailing Address 206 PHIPPS PLAZA		Transaction ID: SA11.3065
City PALM BEACH	State FL	Zip Code 33480-4241
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation RETIRED	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. MRS. JEANNETTE M. WAKIM		Date of Receipt MM / DD / YYYY 09 / 05 / 2006
Mailing Address 1 HAMILTON AVENUE		Transaction ID: SA11.2871
City WHEELING	State WV	Zip Code 26003-6633
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer FOUNDATION CORP.	Occupation SMALL BUSINESS OWNER	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. MS. TINA WALDEN		Date of Receipt MM / DD / YYYY 09 / 29 / 2006
Mailing Address 973 CHESTNUT RIDGE ROAD		Transaction ID: SA11.3251
City MORGANTOWN	State WV	Zip Code 26505-2857
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer SUNCREST FURNITURE COMPANY	Occupation OWNER	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1250.00	

SUBTOTAL of Receipts This Page (optional)	2000.00
TOTAL This Period (last page this line number only)	

27020192565

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 165 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial)

A. MR. JAMES A. WALLS

Mailing Address 4693 SHADYSIDE LANE

City State Zip Code
 MORGANTOWN WV 26508-4400

FEC ID number of contributing
 federal political committee.

C

Name of Employer
 SPILMAN THOMAS & BATTLE,
 PLLC

Occupation
 ATTORNEY

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

MM / DD / YYYY
 09 / 19 / 2006

Transaction ID: SA11.2968

Amount of Each Receipt this Period

250.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. M. D. WARD

Mailing Address 2702 MAIN STREET

City State Zip Code
 HURRICANE WV 25526-1421

FEC ID number of contributing
 federal political committee.

C

Name of Employer
 INFORMATION REQUESTED PER
 BEST EFFORTS

Occupation
 INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
 09 / 26 / 2006

Transaction ID: SA11.3121

Amount of Each Receipt this Period

250.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. K. J. WEAVER

Mailing Address P.O. BOX 597

City State Zip Code
 MORGANTOWN WV 26507-0597

FEC ID number of contributing
 federal political committee.

C

Name of Employer
 INFORMATION REQUESTED PER
 BEST EFFORTS

Occupation
 INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
 09 / 30 / 2006

Transaction ID: SA11.3283

Amount of Each Receipt this Period

250.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

750.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 166 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full) Raese for Senate

Full Name (Last, First, Middle Initial) A. MRS. PAULINE E. WEAVER		Date of Receipt MM / DD / YYYY 09 / 19 / 2006
Mailing Address 103 MARSHALL STRET		Transaction ID: SA11.3024
City KINGWOOD	State WV	Zip Code 26537-1507
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation RETIRED	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) B. MRS. PAULINE E. WEAVER		Date of Receipt MM / DD / YYYY 09 / 26 / 2006
Mailing Address 103 MARSHALL STRET		Transaction ID: SA11.3101
City KINGWOOD	State WV	Zip Code 26537-1507
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 150.00
Name of Employer	Occupation RETIRED	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. MRS. FRANCES LYN WEISS		Date of Receipt MM / DD / YYYY 09 / 30 / 2006
Mailing Address 130 SHERIDAN LANE		Transaction ID: SA11.3382
City MORGANTOWN	State WV	Zip Code 26508-4233
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	650.00
TOTAL This Period (last page this line number only)	

27020192567

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 167 / 305
(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) A. MR. SAM R. WEISS Mailing Address 4 WATERSIDE DRIVE City State Zip Code MORGANTOWN WV 26508-2997 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 29 / 2006 Transaction ID: SA11.3235 Amount of Each Receipt this Period 250.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) B. MR. CHARLES WELLINGS Mailing Address HC 68 BOX 3 City State Zip Code WEST UNION WV 26456-9009 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 30 / 2006 Transaction ID: SA11.3392 Amount of Each Receipt this Period 1000.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) C. MR. BERNARD G. WESTFALL Mailing Address 1800 HALLECK ROAD City State Zip Code MORGANTOWN WV 26508-2388 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 19 / 2006 Transaction ID: SA11.2942 Amount of Each Receipt this Period 1000.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) MR. SAM R. WEISS Mailing Address 4 WATERSIDE DRIVE City State Zip Code MORGANTOWN WV 26508-2997 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 29 / 2006 Transaction ID: SA11.3235 Amount of Each Receipt this Period 250.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) MR. CHARLES WELLINGS Mailing Address HC 68 BOX 3 City State Zip Code WEST UNION WV 26456-9009 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 30 / 2006 Transaction ID: SA11.3392 Amount of Each Receipt this Period 1000.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Full Name (Last, First, Middle Initial) MR. BERNARD G. WESTFALL Mailing Address 1800 HALLECK ROAD City State Zip Code MORGANTOWN WV 26508-2388 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 19 / 2006 Transaction ID: SA11.2942 Amount of Each Receipt this Period 1000.00 CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)		2250.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 168 / 305
(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)
A. MR. GLEN WILLIE
Mailing Address 2807 DEER MEADOW

City State Zip Code
DENISON TX 75020-7348

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

Name of Employer Occupation
Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼ Election Cycle-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 05 / 2006

Transaction ID: SA11.2886
Amount of Each Receipt this Period
250.00

CONTRIBUTION
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)
B. MR. RANDALL L. WILLIAMS
Mailing Address 1845 HALLECK ROAD

City State Zip Code
MORGANTOWN WV 26508-2389

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

Name of Employer Occupation
CENTRA BANK VICE PRESIDENT
Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼ Election Cycle-to-Date ▼
3000.00

Date of Receipt
MM / DD / YYYY
09 / 19 / 2006

Transaction ID: SA11.2960
Amount of Each Receipt this Period
2000.00

CONTRIBUTION
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

REATTRIBUTION REQUESTED

Full Name (Last, First, Middle Initial)
C. MR. MARK A. WILSON
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 Occupation
GREER INDUSTRIES, INC. EXECUTIVE
Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼ Election Cycle-to-Date ▼
4200.00

Date of Receipt
MM / DD / YYYY
07 / 19 / 2006

Transaction ID: SA11.2264
Amount of Each Receipt this Period
2100.00

CONTRIBUTION
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

4350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 169 / 305

(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)

A. MS. MARY E. WILSON

Mailing Address 131 WAITMAN STREET

City State Zip Code
MORGANTOWN WV 26501-7529

FEC ID number of contributing
federal political committee.

C

Name of Employer
WVU

Occupation
VIOLIN INSTRUCTOR

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
250.00

Date of Receipt

MM / DD / YYYY
09 / 21 / 2006

Transaction ID: SA11.3061

Amount of Each Receipt this Period

250.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. MRS. SANDRA KAY WILSON

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
LAWYER

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
4200.00

Date of Receipt

MM / DD / YYYY
07 / 19 / 2006

Transaction ID: SA11.2265

Amount of Each Receipt this Period

2100.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. MR. TOM S. WODZIEN

Mailing Address 14 BARCLAY DRIVE

City State Zip Code
MORGANTOWN WV 26508-5626

FEC ID number of contributing
federal political committee.

C

Name of Employer
GREER INDUSTRIES, INC.

Occupation
SALES REPRESENTATIVE

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
750.00

Date of Receipt

MM / DD / YYYY
08 / 08 / 2006

Transaction ID: SA11.2708

Amount of Each Receipt this Period

500.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

2850.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 170 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Raese for Senate

<p>Full Name (Last, First, Middle Initial) A. MR. TOM S. WODZIEN</p> <p>Mailing Address 14 BARCLAY DRIVE</p> <p>City MORGANTOWN State WV Zip Code 26508-5626</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer GREER INDUSTRIES, INC. Occupation SALES REPRESENTATIVE</p> <p>Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 750.00</p>		<p>Date of Receipt MM / DD / YYYY 09 / 29 / 2006</p> <p>Transaction ID: SA11.3239</p> <p>Amount of Each Receipt this Period 250.00</p> <p>CONTRIBUTION</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>Full Name (Last, First, Middle Initial) B. MR. TIMOTHY B. WOLFE</p> <p>Mailing Address 410 JEROME STREET</p> <p>City MORGANTOWN State WV Zip Code 26505-5320</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer GREER INDUSTRIES, INC. Occupation MANAGER</p> <p>Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 375.00</p>		<p>Date of Receipt MM / DD / YYYY 09 / 26 / 2006</p> <p>Transaction ID: SA11.3086</p> <p>Amount of Each Receipt this Period 225.00</p> <p>CONTRIBUTION</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>Full Name (Last, First, Middle Initial) C. MR. LUTHER E. WOODS</p> <p>Mailing Address BOX 1330</p> <p>City HUNTINGTON State WV Zip Code 25714-1330</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation RETIRED</p> <p>Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Election Cycle-to-Date ▼ 700.00</p>		<p>Date of Receipt MM / DD / YYYY 09 / 26 / 2006</p> <p>Transaction ID: SA11.3122</p> <p>Amount of Each Receipt this Period 500.00</p> <p>CONTRIBUTION</p> <p><input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)</p>
<p>SUBTOTAL of Receipts This Page (optional)</p>		<p>975.00</p>
<p>TOTAL This Period (last page this line number only)</p>		

27020192571

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 171 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
 Raese for Senate

Full Name (Last, First, Middle Initial) A. MR. DEAN WRIGHT		Date of Receipt MM / DD / YYYY 07 / 25 / 2006	
Mailing Address 5303 W. 80TH TERRACE		Transaction ID: SA11.2480	
City PRAIRIE VILLAGE	State KS	Amount of Each Receipt this Period 100.00	
Zip Code 66208-4916		CONTRIBUTION	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation RETIRED Election Cycle-to-Date ▼ 250.00		
Full Name (Last, First, Middle Initial) B. MR. DEAN WRIGHT		Date of Receipt MM / DD / YYYY 09 / 30 / 2006	
Mailing Address 5303 W. 80TH TERRACE		Transaction ID: SA11.3332	
City PRAIRIE VILLAGE	State KS	Amount of Each Receipt this Period 150.00	
Zip Code 66208-4916		CONTRIBUTION	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation RETIRED Election Cycle-to-Date ▼ 250.00		
Full Name (Last, First, Middle Initial) C. MR. RAYMOND KARL YAGLE		Date of Receipt MM / DD / YYYY 09 / 30 / 2006	
Mailing Address 933 VANDALIA ROAD		Transaction ID: SA11.3275	
City MORGANTOWN	State WV	Amount of Each Receipt this Period 200.00	
Zip Code 26501-6249		CONTRIBUTION	
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer ROBERT A. YAGLE JEWELERS Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation OWNER Election Cycle-to-Date ▼ 375.00		
SUBTOTAL of Receipts This Page (optional)		450.00	
TOTAL This Period (last page this line number only)			

27020192572

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 172 / 305
 (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)
 MR. JOHN M. ZANNONI
 Mailing Address 704 BRIDGEPORT DRIVE
 City State Zip Code
 KNOXVILLE TN 37934-4783
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
 ALCOA PRIMARY METALS HUMAN RESOURCE MANAGER
 Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼
 Election Cycle-to-Date ▼
 1150.00
 Date of Receipt
 MM / DD / YYYY
 09 / 30 / 2006
 Transaction ID: SA11.3376
 Amount of Each Receipt this Period
 750.00
 CONTRIBUTION
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
 DIEFFENBAUCH & HRITZ, L.L.C.
 Mailing Address 827 FAIRMONT ROAD
 SUITE 203
 City State Zip Code
 MORGANTOWN WV 26501-3857
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
 Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼
 Election Cycle-to-Date ▼
 1000.00
 Date of Receipt
 MM / DD / YYYY
 08 / 30 / 2006
 Transaction ID: SA11.2862
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
 ATTRIBUTION TO PARTNERS REQUESTED

C. Full Name (Last, First, Middle Initial)
 JEAN O. BUGAY & ASSOCIATES
 Mailing Address 1023 GREENTREE ROAD
 City State Zip Code
 PITTSBURGH PA 15220-3117
 FEC ID number of contributing federal political committee. C
 Name of Employer Occupation
 Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼
 Election Cycle-to-Date ▼
 500.00
 Date of Receipt
 MM / DD / YYYY
 09 / 21 / 2006
 Transaction ID: SA11.3038
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION
☐ Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
 ATTRIBUTION TO PARTNERS REQUESTED

SUBTOTAL of Receipts This Page (optional) ▶ 2000.00
 TOTAL This Period (last page this line number only) ▶

27020192573

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 173 / 305
 (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) A. NICO HAIR, L.L.C.		Date of Receipt MM / DD / YYYY 09 / 30 / 2006	
Mailing Address 80 S. PIERPONT ROAD		Transaction ID: SA11.3466	
City MORGANTOWN	State WV	Zip Code 26508-4142	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 250.00		
Full Name (Last, First, Middle Initial) B. RICHARD HURSEY, LTD		Date of Receipt MM / DD / YYYY 07 / 27 / 2006	
Mailing Address P.O. BOX 9		Transaction ID: SA11.3475	
City SHINNSTON	State WV	Zip Code 26431-0009	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Election Cycle-to-Date ▼ 2000.00		
Full Name (Last, First, Middle Initial) C. MR. ANDY HURSEY		Date of Receipt MM / DD / YYYY 07 / 27 / 2006	
Mailing Address P.O. BOX 9		Transaction ID: SA11.3478	
City SHINNSTON	State WV	Zip Code 26431-0009	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer RICHARD HURSEY LTD COMPANY Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation MANAGER Election Cycle-to-Date ▼ 2000.00		
SUBTOTAL of Receipts This Page (optional)		500.00	
TOTAL This Period (last page this line number only)			

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 174 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full) Raese for Senate

Full Name (Last, First, Middle Initial) A. RICHARD HURSEY, LTD		Date of Receipt MM / DD / YYYY 08 / 27 / 2006
Mailing Address P.O. BOX 9		Transaction ID: SA111.3476
City SHINNSTON	State WV	Zip Code 26431-0009
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	
		IN-KIND- OFFICE USE; SEE ATTRIBUTION BELOW

Full Name (Last, First, Middle Initial) B. MR. ANDY HURSEY		Date of Receipt MM / DD / YYYY 08 / 27 / 2006
Mailing Address P.O. BOX 9		Transaction ID: SA111.3479
City SHINNSTON	State WV	Zip Code 26431-0009
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer RICHARD HURSEY LTD COMPANY	Occupation MANAGER	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM]
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	
		IN-KIND- OFFICE USE

Full Name (Last, First, Middle Initial) C. RICHARD HURSEY, LTD		Date of Receipt MM / DD / YYYY 09 / 27 / 2006
Mailing Address P.O. BOX 9		Transaction ID: SA111.3477
City SHINNSTON	State WV	Zip Code 26431-0009
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation	CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	
		IN-KIND- OFFICE USE; SEE ATTRIBUTION BELOW

SUBTOTAL of Receipts This Page (optional)	500.00
TOTAL This Period (last page this line number only)	

27020192575

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 175 / 305	
(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Raese for Senate

A. Full Name (Last, First, Middle Initial) MR. ANDY HURSEY Mailing Address P.O. BOX 9 City SHINNSTON State WV Zip Code 26431-0009 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 27 / 2006 Transaction ID: SA111.3480 Amount of Each Receipt this Period 250.00
Name of Employer RICHARD HURSEY LTD COMPANY Occupation MANAGER Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2000.00		CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) [MEMO ITEM] IN-KIND- OFFICE USE
B. Full Name (Last, First, Middle Initial) SANS L.L.C. Mailing Address 951 POINT MARION ROAD City MORGANTOWN State WV Zip Code 26508-1510 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 19 / 2006 Transaction ID: SA11.2984 Amount of Each Receipt this Period 500.00
Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 500.00		CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) ATtribution TO PARTNERS REQUESTED
C. Full Name (Last, First, Middle Initial) ZIP L.L.C.. Mailing Address 90 CHATEAU ROYALE COURT City MORGANTOWN State WV Zip Code 26505-1870 FEC ID number of contributing federal political committee. C		Date of Receipt MM / DD / YYYY 09 / 30 / 2006 Transaction ID: SA11.3465 Amount of Each Receipt this Period 2100.00
Name of Employer Occupation Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 2100.00		CONTRIBUTION <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1) ATtribution TO PARTNERS REQUESTED
SUBTOTAL of Receipts This Page (optional)		2600.00
TOTAL This Period (last page this line number only)		264410.93

27020192576

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 176 / 305
(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)

A. SANTORUM 2006

Mailing Address ONE TOWER BRIDGE
SUITE 1440

City State Zip Code
WEST CONSHOHOCKEN PA 19426-2874

FEC ID number of contributing
federal political committee.

C C00365106

Name of Employer

Occupation

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1084.98

Date of Receipt

MM / DD / YYYY
08 / 19 / 2006

Transaction ID: SA11.3133

Amount of Each Receipt this Period

1084.98

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

IN-KIND - EVENT CATERING
AND ROOM RENTAL

Full Name (Last, First, Middle Initial)

B. DODDRIDGE CO. REPUBLICAN EXECUTIVE COMMITTEE

Mailing Address INFORMATION REQUESTED

City State Zip Code
WEST UNION WV 26456

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1000.00

Date of Receipt

MM / DD / YYYY
09 / 30 / 2006

Transaction ID: SA11.3364

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. ROANE COUNTY REPUBLICAN WOMEN'S CLUB

Mailing Address 810 JOHN BOGGS ROAD

City State Zip Code
SPENCER WV 25276-8036

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
500.00

Date of Receipt

MM / DD / YYYY
09 / 29 / 2006

Transaction ID: SA11.3210

Amount of Each Receipt this Period

500.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

2584.98

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

27020192577

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 177 / 305	
(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)
 Raese for Senate

Full Name (Last, First, Middle Initial) A. ASSOCIATED BUILDERS & CONTRACTORS PAC		Date of Receipt MM / DD / YYYY 08 / 08 / 2006
Mailing Address 4250 N. FAIRFAX DRIVE 9TH FLOOR		Transaction ID: SA11.2683
City ARLINGTON	State VA	Zip Code 22203-1665
FEC ID number of contributing federal political committee. C C00010421	Amount of Each Receipt this Period 5000.00	
Name of Employer	Occupation	CONTRIBUTION
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial) B. AUSTIN POWDER COMPANY PAC		Date of Receipt MM / DD / YYYY 09 / 19 / 2006
Mailing Address 25800 SCIENCE PARK DRIVE		Transaction ID: SA11.2983
City CLEVELAND	State OH	Zip Code 44122-7311
FEC ID number of contributing federal political committee. C C00191478	Amount of Each Receipt this Period 5000.00	
Name of Employer	Occupation	CONTRIBUTION
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 5000.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial) C. GOOD GOVERNMENT FOR AMERICA COMMITTEE		Date of Receipt MM / DD / YYYY 07 / 12 / 2006
Mailing Address P.O. BOX 87		Transaction ID: SA11.2599
City ALEXANDRIA	State VA	Zip Code 22313-0087
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2000.00	
Name of Employer	Occupation	CONTRIBUTION
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 2000.00	<input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)	12000.00
TOTAL This Period (last page this line number only)	

27020192578

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 178 / 305	
(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial)

A. MURRAY ENERGY PAC

Mailing Address 29325 CHAGRIN BLVD.
SUITE 300

City State Zip Code
PEPPER PIKE OH 44122-4600

FEC ID number of contributing
federal political committee. C C00410985

Name of Employer

Occupation

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
1500.00

Date of Receipt

MM / DD / YYYY
09 / 21 / 2006

Transaction ID: SA11.3039

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. NORTHERN LIGHTS PAC, INC.

Mailing Address 1537 SHIPSVIEW ROAD

City State Zip Code
ANNAPOLIS MD 21409-5726

FEC ID number of contributing
federal political committee. C C00331827

Name of Employer

Occupation

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
5000.00

Date of Receipt

MM / DD / YYYY
07 / 19 / 2006

Transaction ID: SA11.2328

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

C. SENATE MAJORITY FUND

Mailing Address P.O. BOX 32025

City State Zip Code
PHOENIX AZ 85064-2025

FEC ID number of contributing
federal political committee. C C00368431

Name of Employer

Occupation

Receipt For: 2006
☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼
2500.00

Date of Receipt

MM / DD / YYYY
08 / 25 / 2006

Transaction ID: SA11.2837

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) ▶

9000.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 179 / 305	
(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial)

A. SOLUTIONS AMERICA

Mailing Address 575 8TH AVENUE
FLOOR 24

City State Zip Code
NEW YORK NY 10018-3011

FEC ID number of contributing
federal political committee.

C C00335448

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

MM / DD / YYYY
07 / 25 / 2006

Transaction ID: SA11.2445

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

B. THE COMMONWEALTH PAC

Mailing Address P.O. BOX 151

City State Zip Code
BOSTON MA 02117-0151

FEC ID number of contributing
federal political committee.

C C00403022

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

MM / DD / YYYY
07 / 19 / 2006

Transaction ID: SA11.2327

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

4000.00

TOTAL This Period (last page this line number only)

27584.98

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 180 / 305	
(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Raese for Senate

A. Full Name (Last, First, Middle Initial) MR. JOHN R. RAESE Mailing Address PO BOX 262 City MORGANTOWN State WV Zip Code 26505 FEC ID number of contributing federal political committee. C Name of Employer GREER INDUSTRIES, INC. Occupation CEO Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1790000.00		Date of Receipt MM / DD / YYYY 08 / 07 / 2006 Transaction ID: SA13.01 Amount of Each Receipt this Period 40000.00 LOAN RECEIVED FROM THE CANDIDATE <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
B. Full Name (Last, First, Middle Initial) MR. JOHN R. RAESE Mailing Address PO BOX 262 City MORGANTOWN State WV Zip Code 26505 FEC ID number of contributing federal political committee. C Name of Employer GREER INDUSTRIES, INC. Occupation CEO Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1790000.00		Date of Receipt MM / DD / YYYY 08 / 10 / 2006 Transaction ID: SA13.02 Amount of Each Receipt this Period 250000.00 LOAN RECEIVED FROM THE CANDIDATE <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
C. Full Name (Last, First, Middle Initial) MR. JOHN R. RAESE Mailing Address PO BOX 262 City MORGANTOWN State WV Zip Code 26505 FEC ID number of contributing federal political committee. C Name of Employer GREER INDUSTRIES, INC. Occupation CEO Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Election Cycle-to-Date ▼ 1790000.00		Date of Receipt MM / DD / YYYY 08 / 11 / 2006 Transaction ID: SA13.03 Amount of Each Receipt this Period 75000.00 LOAN RECEIVED FROM THE CANDIDATE <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)
SUBTOTAL of Receipts This Page (optional)		365000.00
TOTAL This Period (last page this line number only)		

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 181 / 305	
(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial)

A. MR. JOHN R. RAESE

Mailing Address PO BOX 262

City

MORGANTOWN

State

WV

Zip Code

26505

FEC ID number of contributing
 federal political committee.

C

Name of Employer
 GREER INDUSTRIES, INC.

Occupation
 CEO

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1790000.00

Date of Receipt

MM / DD / YYYY
 08 / 18 / 2006

Transaction ID: SA13.04

Amount of Each Receipt this Period

75000.00

LOAN RECEIVED FROM THE CA-
 NDIDATE

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

B. MR. JOHN R. RAESE

Mailing Address PO BOX 262

City

MORGANTOWN

State

WV

Zip Code

26505

FEC ID number of contributing
 federal political committee.

C

Name of Employer
 GREER INDUSTRIES, INC.

Occupation
 CEO

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1790000.00

Date of Receipt

MM / DD / YYYY
 08 / 30 / 2006

Transaction ID: SA13.05

Amount of Each Receipt this Period

75000.00

LOAN RECEIVED FROM THE CA-
 NDIDATE

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

C. MR. JOHN R. RAESE

Mailing Address PO BOX 262

City

MORGANTOWN

State

WV

Zip Code

26505

FEC ID number of contributing
 federal political committee.

C

Name of Employer
 GREER INDUSTRIES, INC.

Occupation
 CEO

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1790000.00

Date of Receipt

MM / DD / YYYY
 09 / 08 / 2006

Transaction ID: SA13.06

Amount of Each Receipt this Period

100000.00

LOAN RECEIVED FROM THE CA-
 NDIDATE

☐ Limit Increased Due to Opponent's
 Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

250000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 182 / 305	
(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Raese for Senate

Full Name (Last, First, Middle Initial) A. MR. JOHN R. RAESE		Date of Receipt MM / DD / YYYY 09 / 08 / 2006	
Mailing Address PO BOX 262		Transaction ID: SA13.07	
City MORGANTOWN	State WV	Zip Code 26505	Amount of Each Receipt this Period 179240.00
FEC ID number of contributing federal political committee. C		LOAN RECEIVED FROM THE CANDIDATE <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer GREER INDUSTRIES, INC.	Occupation CEO		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1790000.00		
Full Name (Last, First, Middle Initial) B. MR. JOHN R. RAESE		Date of Receipt MM / DD / YYYY 09 / 29 / 2006	
Mailing Address PO BOX 262		Transaction ID: SA13.08	
City MORGANTOWN	State WV	Zip Code 26505	Amount of Each Receipt this Period 95760.00
FEC ID number of contributing federal political committee. C		LOAN RECEIVED FROM THE CANDIDATE <input type="checkbox"/> Limit Increased Due to Opponent's Spending (2 U.S.C. 441a(i)/441a-1)	
Name of Employer GREER INDUSTRIES, INC.	Occupation CEO		
Receipt For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Election Cycle-to-Date ▼ 1790000.00		

SUBTOTAL of Receipts This Page (optional) ▶

275000.00

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

890000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 183 / 305

(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)
CONRAD DIRECT, INC.

Mailing Address 300 KNICKERBOCKER ROAD

City State Zip Code
CRESSKILL NJ 07626

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

MM / DD / YYYY
09 / 01 / 2006

Transaction ID: SA14.02

Amount of Each Receipt this Period

5887.53

REFUND - FUND RAISING -
DIRECT MAIL

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

B. Full Name (Last, First, Middle Initial)
SOUTHWEST PUBLISHING AND MAILING CORPORATION

Mailing Address 2600 NW TOPEKA AVE

City State Zip Code
TOPEKA KS 66617

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2006

☐ Primary ☒ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

MM / DD / YYYY
07 / 25 / 2006

Transaction ID: SA14.01

Amount of Each Receipt this Period

3885.86

REFUND - POSTAGE

☐ Limit Increased Due to Opponent's
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional)

9773.39

TOTAL This Period (last page this line number only)

9773.39

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AV

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OFFICE OF SECRETARY OF SENATE
232 U S SENATE
WASHINGTON DC 20510-0001

P:2

226-RDL

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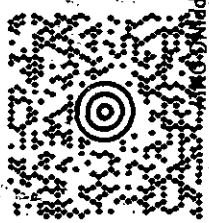


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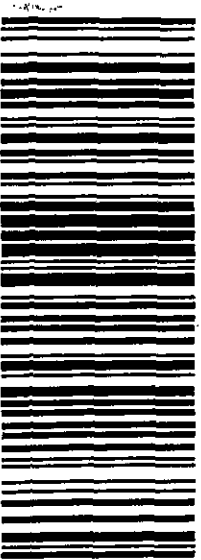
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