

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED
SECRETARY OF THE SENATE
10 AUG 16 PM 2:40

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)

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

08

28

2010

in the
State of

WV

(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

2010

through

08

08

2010

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

08

16

2010

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)

FE5AN018

10020610799

SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Receipts and Disbursements

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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 1 0

To:

M M
0 8

D D
0 8

Y Y Y Y
2 0 1 0

	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)).....	30123.00	64401.87
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	344.61
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	30123.00	64057.26
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	140683.07	281666.58
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	16325.04
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	140683.07	265341.54
8. Cash on Hand at Close of Reporting Period (from Line 27).....	9448.47	
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).....	1019452.53	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-694-1100

FE5AN018

10020610800

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3 (Revised 12/2003)

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Write or Type Committee Name
Raese for Senate

Report Covering the Period:

From:

M M D D Y Y Y Y
0 7 0 1 2 0 1 0

To:

M M D D Y Y Y Y
0 8 0 8 2 0 1 0

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	29498.00	33153.91
(i) Itemized (use Schedule A).....		
(ii) Unitemized.....	625.00	1247.96
(iii) TOTAL of contributions from individuals..... ▶	30123.00	34401.87
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACS).....	0.00	0.00
(d) The Candidate.....	0.00	30000.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	30123.00	64401.87
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
13. LOANS		
(a) Made or Guaranteed by the Candidate.....	120000.00	200000.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	120000.00	200000.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....	0.00	16325.04
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)..... ▶	150123.00	280726.91

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	140683.07	281666.58
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	18927.16
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	18927.16
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	344.61
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	344.61
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	140683.07	300938.35

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	8.54
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	150123.00
25. SUBTOTAL (add Line 23 and Line 24).....	150131.54
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	140683.07
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	9448.47

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

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

FOR LINE NUMBER: PAGE 5 / 44

(check only one)

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

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NAME OF COMMITTEE (In Full)

Raese for Senate

A. Full Name (Last, First, Middle Initial) MS. TAMMY COLE	Date of Receipt MM / DD / YYYY 07 / 27 / 2010
Mailing Address 207 JADE DRIVE	Transaction ID: SA11.4005
City State Zip Code MORGANTOWN WV 26508-4026	Amount of Each Receipt this Period 2400.00
FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer REALITY FITNESS, LLC	Occupation PROPRIETOR
Receipt For: 2010 ☒ Primary ☐ General ☐ Other (specify) ▼	Election Cycle-to-Date ▼ 2400.00
B. Full Name (Last, First, Middle Initial) CHARLES M. DUDA	Date of Receipt MM / DD / YYYY 08 / 03 / 2010
Mailing Address P.O. BOX 1384	Transaction ID: SA11.4031
City State Zip Code CHARLESTON WV 25325-1384	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS
Receipt For: 2010 ☒ Primary ☐ General ☐ Other (specify) ▼	Election Cycle-to-Date ▼ 250.00
C. Full Name (Last, First, Middle Initial) MR. J. ROBERT GWYNNE	Date of Receipt MM / DD / YYYY 07 / 28 / 2010
Mailing Address 337 LAKEVIEW DRIVE	Transaction ID: SA11.4011
City State Zip Code MORGANTOWN WV 26508-8080	Amount of Each Receipt this Period 2400.00
FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer GREER INDUSTRIES, INC.	Occupation EXECUTIVE
Receipt For: 2010 ☒ Primary ☐ General ☐ Other (specify) ▼	Election Cycle-to-Date ▼ 2400.00
SUBTOTAL of Receipts This Page (optional)	5050.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: PAGE 6 / 44

(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) BRUCE MALASKY Mailing Address 2341 TECUMSEH DR City State Zip Code WEST PALM BEACH FL 33409-7436 FEC ID number of contributing federal political committee. C Name of Employer MALASKY COMPANIES Occupation REAL ESTATE DEVELOPERS Receipt For: 2010 ☒ Primary ☐ General ☐ Other (specify) ▼ Election Cycle-to-Date ▼ 500.00	Date of Receipt MM / DD / YYYY 07 / 29 / 2010 Transaction ID: SA11.4026 Amount of Each Receipt this Period 500.00 CONTRIBUTION
B. Full Name (Last, First, Middle Initial) DONALD MALASKY Mailing Address 1300 N. FLORIDA MANGO RD SUITE 15 City State Zip Code WEST PALM BEACH FL 33409-5255 FEC ID number of contributing federal political committee. C Name of Employer MALASKY HOMES, INC. Occupation REAL ESTATE DEVELOPER Receipt For: 2010 ☒ Primary ☐ General ☐ Other (specify) ▼ Election Cycle-to-Date ▼ 500.00	Date of Receipt MM / DD / YYYY 07 / 29 / 2010 Transaction ID: SA11.4025 Amount of Each Receipt this Period 500.00 CONTRIBUTION
C. Full Name (Last, First, Middle Initial) STEPHEN MALASKY Mailing Address 720 WATERWAY CIRCLE City State Zip Code NORTH PALM BEACH FL 33408-4221 FEC ID number of contributing federal political committee. C Name of Employer MALASKY COMPANIES Occupation REAL ESTATE DEVELOPER Receipt For: 2010 ☒ Primary ☐ General ☐ Other (specify) ▼ Election Cycle-to-Date ▼ 500.00	Date of Receipt MM / DD / YYYY 07 / 29 / 2010 Transaction ID: SA11.4024 Amount of Each Receipt this Period 500.00 CONTRIBUTION
SUBTOTAL of Receipts This Page (optional) ► 1500.00 TOTAL This Period (last page this line number only) ►	

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 44

(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. DALE B. MILLER

Mailing Address 207 JADE DRIVE

City

MORGANTOWN

State

WV

Zip Code

26508-4026

FEC ID number of contributing
federal political committee.

C

Name of Employer
WV RADIO CORPORATION

Occupation

EXECUTIVE

Receipt For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2400.00

Date of Receipt

MM / DD / YYYY
07 / 27 / 2010

Transaction ID: SA11.4006

Amount of Each Receipt this Period

2400.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. ROCCO F. MURIALE

Mailing Address 6 PLEASANT VIEW DRIVE

City

FAIRMONT

State

WV

Zip Code

26554-3453

FEC ID number of contributing
federal political committee.

C

Name of Employer
MURIALES RESTAURANT

Occupation

RESTAURATEUR

Receipt For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

MM / DD / YYYY
07 / 27 / 2010

Transaction ID: SA11.4007

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. FREDERICK W. PARSONS

Mailing Address R.R. 1 BOX 181A

City

EVANS

State

WV

Zip Code

25241-9764

FEC ID number of contributing
federal political committee.

C

Name of Employer
WEST VIRGINIA RADIO CORPO-
RATION

Occupation

EXECUTIVE

Receipt For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2400.00

Date of Receipt

MM / DD / YYYY
07 / 30 / 2010

Transaction ID: SA11.4012

Amount of Each Receipt this Period

2400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5800.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 8 / 44	
(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. DAVID A. RAESE Mailing Address 200 PRAIRIE AVENUE City State Zip Code MORGANTOWN WV 26501-5950 FEC ID number of contributing federal political committee. ☐ C Name of Employer GREER INDUSTRIES, INC. Occupation EXECUTIVE Receipt For: 2010 ☒ Primary ☐ General ☐ Other (specify) ▼ Election Cycle-to-Date ▼ 2400.00	Date of Receipt MM / DD / YYYY 08 / 02 / 2010 Transaction ID: SA11.4013 Amount of Each Receipt this Period 2400.00 CONTRIBUTION
B. Full Name (Last, First, Middle Initial) MRS. ELIZABETH S. RAESE Mailing Address P.O. BOX 872 City State Zip Code MORGANTOWN WV 26507-0872 FEC ID number of contributing federal political committee. ☐ C Name of Employer GREER INDUSTRIES, INC. Occupation MANAGER Receipt For: 2010 ☒ Primary ☐ General ☐ Other (specify) ▼ Election Cycle-to-Date ▼ 2400.00	Date of Receipt MM / DD / YYYY 07 / 27 / 2010 Transaction ID: SA11.4008 Amount of Each Receipt this Period 2400.00 CONTRIBUTION
C. Full Name (Last, First, Middle Initial) MRS. KATHLEEN A. RAESE Mailing Address P.O. BOX 107 City State Zip Code MORGANTOWN WV 26507-0107 FEC ID number of contributing federal political committee. ☐ C Name of Employer WEST VIRGINIA NEWSPAPER PUBLISHING COM Occupation ASSOCIATE PUBLISHER Receipt For: 2010 ☒ Primary ☐ General ☐ Other (specify) ▼ Election Cycle-to-Date ▼ 2400.00	Date of Receipt MM / DD / YYYY 08 / 02 / 2010 Transaction ID: SA11.4014 Amount of Each Receipt this Period 2400.00 CONTRIBUTION
SUBTOTAL of Receipts This Page (optional) ▶ 7200.00 TOTAL This Period (last page this line number only) ▶	

10020610806

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 44

(check only one)

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

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NAME OF COMMITTEE (In Full)

Raese for Senate

A.

Full Name (Last, First, Middle Initial)

MS. STEPHANIE A. SOLOMON

Mailing Address 214 SHERIDAN LANE

City

MORGANTOWN

State

WV

Zip Code

26508-4228

FEC ID number of contributing
federal political committee.

C

Name of Employer
ST. FRANCIS SCHOOL

Occupation
TEACHER

Receipt For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2400.00

Date of Receipt

08 / 04 / 2010

Transaction ID: SA11.4016

Amount of Each Receipt this Period

2400.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)

MR. STEVEN B. SOLOMON

Mailing Address 1758 MILEGROUND ROAD

City

MORGANTOWN

State

WV

Zip Code

26505-3753

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMERICAN HOMES

Occupation
EXECUTIVE

Receipt For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2400.00

Date of Receipt

08 / 04 / 2010

Transaction ID: SA11.4017

Amount of Each Receipt this Period

2400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)

MR. JAMES M. TROY

Mailing Address 804 CASSVILLE-MT. MORRIS ROAD

City

MORGANTOWN

State

WV

Zip Code

26501-2126

FEC ID number of contributing
federal political committee.

C

Name of Employer
GREER INDUSTRIES, INC.

Occupation
ACCOUNTANT

Receipt For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2400.00

Date of Receipt

07 / 28 / 2010

Transaction ID: SA11.4010

Amount of Each Receipt this Period

2400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

7200.00

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

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 10 / 44	
(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. MARK A. WILSON Mailing Address 312 OAKLAND STREET City MORGANTOWN State WV Zip Code 26505-4626 FEC ID number of contributing federal political committee. C Name of Employer GREER INDUSTRIES, INC. Occupation EXECUTIVE Receipt For: 2010 ☒ Primary ☐ General ☐ Other (specify) ▼ Election Cycle-to-Date ▼ 2400.00		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 05 / 2010 Transaction ID: SA11.4015 Amount of Each Receipt this Period 2400.00 CONTRIBUTION
B. Full Name (Last, First, Middle Initial) MORGANTOWN'S DOT COM & SIGN CO. LLC Mailing Address 1780 MILEGROUND ROAD City MORGANTOWN State WV Zip Code 26505 FEC ID number of contributing federal political committee. C Name of Employer Occupation Receipt For: 2010 ☒ Primary ☐ General ☐ Other (specify) ▼ Election Cycle-to-Date ▼ 348.00		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 07 / 2010 Transaction ID: SA11.4038 Amount of Each Receipt this Period 348.00 CONTRIBUTION IN-KIND: SIGNS; SEE ATTRI- BUTION BELOW
C. Full Name (Last, First, Middle Initial) MR. ROB GATIAN Mailing Address 1780 MILEGROUND ROAD City MORGANTOWN State WV Zip Code 26505 FEC ID number of contributing federal political committee. C Name of Employer MORGANTOWN'S DOT COM & SIGN CO. LLC Occupation OWNER Receipt For: 2010 ☒ Primary ☐ General ☐ Other (specify) ▼ Election Cycle-to-Date ▼ 348.00		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 07 / 2010 Transaction ID: SA11.4039 Amount of Each Receipt this Period 348.00 CONTRIBUTION [MEMO ITEM] IN-KIND: SIGNS; PARTNERSH- IP ATTRIBUTION
SUBTOTAL of Receipts This Page (optional)		2748.00
TOTAL This Period (last page this line number only)		29498.00

10020610808

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 11 / 44	
(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) JOHN RAESE Mailing Address P.O. BOX 262 City MORGANTOWN State WV Zip Code 26507 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Y 0 8 / 0 5 / 2 0 1 0 Transaction ID: SA13A.001 Amount of Each Receipt this Period 110000.00 CANDIDATE LOAN PERSONAL FUNDS
Name of Employer GREER INDUSTRIES, INC. Occupation CEO Receipt For: 2010 ☒ Primary ☐ General ☐ Other (specify) ▼ Election Cycle-to-Date ▼ 120000.00		
B. Full Name (Last, First, Middle Initial) JOHN RAESE Mailing Address P.O. BOX 262 City MORGANTOWN State WV Zip Code 26507 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y Y 0 7 / 2 7 / 2 0 1 0 Transaction ID: SA13A.002 Amount of Each Receipt this Period 10000.00 CANDIDATE LOAN PERSONAL FUNDS
Name of Employer GREER INDUSTRIES, INC. Occupation CEO Receipt For: 2010 ☒ Primary ☐ General ☐ Other (specify) ▼ Election Cycle-to-Date ▼ 120000.00		

SUBTOTAL of Receipts This Page (optional)

120000.00

TOTAL This Period (last page this line number only)

120000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Raese for Senate

A.

Full Name (Last, First, Middle Initial)

TERRANCE P. RINEHART

Mailing Address 672 EASTON AVENUE

City
MORGANTOWN

State
WV

Zip Code
26501

Purpose of Disbursement
REIMBURSE FOR EQUIPMENT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB.10

Date of Disbursement

08 / 04 / 2010

Amount of Each Disbursement this Period

429.26

B.

Full Name (Last, First, Middle Initial)

NORMAN M. VALZ

Mailing Address 3422 HAMILTON STREET

City
PHILADELPHIA

State
PA

Zip Code
19104

Purpose of Disbursement
TRAVEL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB.9

Date of Disbursement

08 / 04 / 2010

Amount of Each Disbursement this Period

654.49

C.

Full Name (Last, First, Middle Initial)

CAMPAIGN SOLUTIONS

Mailing Address 117 N ST ASAPH ST

City
ALEXANDRIA

State
VA

Zip Code

Purpose of Disbursement
CREDIT CARD PROCESSING FEES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: SB17.001B

Date of Disbursement

08 / 04 / 2010

Amount of Each Disbursement this Period

130.67

SUBTOTAL of Disbursements This Page (optional) ▶

1214.42

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

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

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

FOR LINE NUMBER:
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b
20a 20b 20c 21

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NAME OF COMMITTEE (In Full)

Raese for Senate

A. Full Name (Last, First, Middle Initial) CONNOISSEUR MEDIA, LLC	Transaction ID: SB.2 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 1 0
Mailing Address 919 5TH AVE. SUITE 210	
City HUNTINGTON State WV Zip Code 25701	Amount of Each Disbursement this Period 180.00
Purpose of Disbursement RADIO	
Candidate Name	Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President State: District:	Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
B. Full Name (Last, First, Middle Initial) METRONEWS	Transaction ID: SB.1 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 7 / 2 0 1 0
Mailing Address 1111 VIRGINIA STREET	
City CHARLESTON State WV Zip Code 25301	Amount of Each Disbursement this Period 5487.80
Purpose of Disbursement RADIO	
Candidate Name	Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President State: District:	Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
C. Full Name (Last, First, Middle Initial) METRONEWS	Transaction ID: SB.6 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 1 0
Mailing Address 1111 VIRGINIA STREET	
City CHARLESTON State WV Zip Code 25301	Amount of Each Disbursement this Period 5487.80
Purpose of Disbursement RADIO	
Candidate Name	Category/ Type
Office Sought: ☐ House ☐ Senate ☐ President State: District:	Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
SUBTOTAL of Disbursements This Page (optional)	11155.60
TOTAL This Period (last page this line number only)	

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

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

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(check only one)

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NAME OF COMMITTEE (In Full)

Raese for Senate

A. Full Name (Last, First, Middle Initial) MONONGALIA COUNTY FAIR	Transaction ID: SB.7 Date of Disbursement																				
Mailing Address WVU-MON CTY EXTENSION OFFICE 26 COMMERCE DRIVE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	3		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	3		2	0	1	0												
City MORGANTOWN State WV Zip Code 26501	Amount of Each Disbursement this Period																				
Purpose of Disbursement PROMOTIONAL	<table border="1"> <tr> <td>50.00</td> </tr> </table>	50.00																			
50.00																					
Candidate Name	Category/Type																				
Office Sought: ☐ House ☐ Senate ☐ President State: District:	Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) MORGANTOWN'S DOT COM & SIGN CO. LLC	Transaction ID: SB17.4038 Date of Disbursement																				
Mailing Address 1780 MILEGROUND ROAD	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	7		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	7		2	0	1	0												
City MORGANTOWN State WV Zip Code 26505	Amount of Each Disbursement this Period																				
Purpose of Disbursement CONTRIBUTION	<table border="1"> <tr> <td>348.00</td> </tr> </table>	348.00																			
348.00																					
Candidate Name	Category/Type																				
Office Sought: ☐ House ☐ Senate ☐ President State: District:	Disbursement For: 2010 ☒ Primary ☐ General ☐ Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) PARKERSBURG HOMECOMING COMMITTEE	Transaction ID: SB.11 Date of Disbursement																				
Mailing Address C/O CLEAR CHANNEL RADIO 6006 GRAND CENTRAL AVENUE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	4		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	4		2	0	1	0												
City VIENNA State WV Zip Code 26105	Amount of Each Disbursement this Period																				
Purpose of Disbursement PROMOTIONAL	<table border="1"> <tr> <td>25.00</td> </tr> </table>	25.00																			
25.00																					
Candidate Name	Category/Type																				
Office Sought: ☐ House ☐ Senate ☐ President State: District:	Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼																				
SUBTOTAL of Disbursements This Page (optional) ▶ 423.00																					
TOTAL This Period (last page this line number only) ▶																					

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2009)

10020610812

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

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

Raese for Senate

A. Full Name (Last, First, Middle Initial) SANDLER-INNOZENZI, INC.	Transaction ID: SB.5 Date of Disbursement
Mailing Address 705 PRINCE STREET	M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 1 0
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period
Purpose of Disbursement TELEVISION	7090.00
Candidate Name	Category/Type
Office Sought: ☐ House ☐ Senate ☐ President State: District:	Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
B. Full Name (Last, First, Middle Initial) SANDLER-INNOZENZI, INC.	Transaction ID: SB.8 Date of Disbursement
Mailing Address 705 PRINCE STREET	M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 1 0
City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period
Purpose of Disbursement TELEVISION	105562.00
Candidate Name	Category/Type
Office Sought: ☐ House ☐ Senate ☐ President State: District:	Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
C. Full Name (Last, First, Middle Initial) WBGs CRUZ'N AM 1030	Transaction ID: SB.3 Date of Disbursement
Mailing Address 303 8TH STREET	M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 1 0
City POINT PLEASANT State WV Zip Code 25550	Amount of Each Disbursement this Period
Purpose of Disbursement RADIO	100.00
Candidate Name	Category/Type
Office Sought: ☐ House ☐ Senate ☐ President State: District:	Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼
SUBTOTAL of Disbursements This Page (optional)	
TOTAL This Period (last page this line number only)	

112752.00

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FEC Schedule B (Form 3) (Revised 02/2009)

10020610813

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

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

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NAME OF COMMITTEE (In Full)
Raese for Senate

A. Full Name (Last, First, Middle Initial) WBYG BIG COUNTRY 99 Mailing Address 303 8TH STREET City POINT PLEASANT State WV Zip Code 25550 Purpose of Disbursement RADIO Candidate Name Office Sought: ☐ House ☐ Senate ☐ President Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼ State: District:	Transaction ID: SB.4 Date of Disbursement MM / DD / YYYY 07 / 28 / 2010 Amount of Each Disbursement this Period 140.00
B. Full Name (Last, First, Middle Initial) WCHS Mailing Address 1111 VIRGINIA STREET City CHARLESTON State WV Zip Code 26301 Purpose of Disbursement RADIO Candidate Name Office Sought: ☐ House ☐ Senate ☐ President Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼ State: District:	Transaction ID: SB.23 Date of Disbursement MM / DD / YYYY 08 / 05 / 2010 Amount of Each Disbursement this Period 654.50
C. Full Name (Last, First, Middle Initial) WCIR Mailing Address 306 SOUTH KANAWHA STREET City BECKLEY State WV Zip Code 25801 Purpose of Disbursement RADIO Candidate Name Office Sought: ☐ House ☐ Senate ☐ President Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼ State: District:	Transaction ID: SB.27 Date of Disbursement MM / DD / YYYY 08 / 05 / 2010 Amount of Each Disbursement this Period 700.00
SUBTOTAL of Disbursements This Page (optional) ▶ 1494.50	
TOTAL This Period (last page this line number only) ▶	

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FEC Schedule B (Form 3) (Revised 02/2009)

10020610814

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

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

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NAME OF COMMITTEE (In Full)

Raese for Senate

A. Full Name (Last, First, Middle Initial) WEPM Mailing Address 1606 WEST KING STREET City MARTINSBURG State WV Zip Code 25401 Purpose of Disbursement RADIO Candidate Name Office Sought: ☐ House ☐ Senate ☐ President State: District: Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼	Transaction ID: SB.18 Date of Disbursement 08 / 05 / 2010 Amount of Each Disbursement this Period 320.00
B. Full Name (Last, First, Middle Initial) WGGE Mailing Address #5 ROSEMAR CIRCLE City PARKERSBURG State WV Zip Code 26104 Purpose of Disbursement RADIO Candidate Name Office Sought: ☐ House ☐ Senate ☐ President State: District: Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼	Transaction ID: SB.16 Date of Disbursement 08 / 05 / 2010 Amount of Each Disbursement this Period 816.00
C. Full Name (Last, First, Middle Initial) WHAJ Mailing Address 900 BLUEFIELD AVENUE City BLUEFIELD State WV Zip Code 24701 Purpose of Disbursement RADIO Candidate Name Office Sought: ☐ House ☐ Senate ☐ President State: District: Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼	Transaction ID: SB.25 Date of Disbursement 08 / 05 / 2010 Amount of Each Disbursement this Period 665.00

SUBTOTAL of Disbursements This Page (optional)

1801.00

TOTAL This Period (last page this line number only)

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

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

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NAME OF COMMITTEE (In Full)

Raese for Senate

A. Full Name (Last, First, Middle Initial) WHDC Mailing Address 440 RADIO STATION LANE City BERKELEY SPRINGS State WV Zip Code 25411 Purpose of Disbursement RADIO Candidate Name Office Sought: ☐ House ☐ Senate ☐ President Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼ State: District:	Transaction ID: SB.26 Date of Disbursement 08 / 05 / 2010 Amount of Each Disbursement this Period 380.00
B. Full Name (Last, First, Middle Initial) WJLS Mailing Address 102 NORTH KANAWHA STREET City BECKLEY State WV Zip Code 26801 Purpose of Disbursement RADIO Candidate Name Office Sought: ☐ House ☐ Senate ☐ President Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼ State: District:	Transaction ID: SB.28 Date of Disbursement 08 / 05 / 2010 Amount of Each Disbursement this Period 785.00
C. Full Name (Last, First, Middle Initial) WKEE Mailing Address 134 FOURTH AVENUE City HUNTINGTON State WV Zip Code 25701 Purpose of Disbursement RADIO Candidate Name Office Sought: ☐ House ☐ Senate ☐ President Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼ State: District:	Transaction ID: SB.20 Date of Disbursement 08 / 05 / 2010 Amount of Each Disbursement this Period 338.00
SUBTOTAL of Disbursements This Page (optional) ►	
TOTAL This Period (last page this line number only) ►	

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

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

Raese for Senate

A. Full Name (Last, First, Middle Initial) WKWK Mailing Address 1015 MAIN STREET CAPITOL MUSIC HALL City WHEELING State WV Zip Code 26003 Purpose of Disbursement RADIO Candidate Name Office Sought: ☐ House ☐ Senate ☐ President State: District: Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼	Transaction ID: SB.13 Date of Disbursement 08 / 05 / 2010 Amount of Each Disbursement this Period 367.00
B. Full Name (Last, First, Middle Initial) WLTF Mailing Address 1606 WEST KING STREET City MARTINSBURG State WV Zip Code 25401 Purpose of Disbursement RADIO Candidate Name Office Sought: ☐ House ☐ Senate ☐ President State: District: Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼	Transaction ID: SB.19 Date of Disbursement 08 / 05 / 2010 Amount of Each Disbursement this Period 680.00
C. Full Name (Last, First, Middle Initial) WNUS Mailing Address 6006 GRAND CENTRAL AVENUE City PARKERSBURG State WV Zip Code 26105 Purpose of Disbursement RADIO Candidate Name Office Sought: ☐ House ☐ Senate ☐ President State: District: Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼	Transaction ID: SB.15 Date of Disbursement 08 / 05 / 2010 Amount of Each Disbursement this Period 560.00

SUBTOTAL of Disbursements This Page (optional)

1607.00

TOTAL This Period (last page this line number only)

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

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

A.		Full Name (Last, First, Middle Initial) WOVK		Transaction ID: SB.14 Date of Disbursement MM / DD / YYYY 08 / 05 / 2010	
Mailing Address		1015 MAIN STREET CAPITOL MUSIC HALL		Amount of Each Disbursement this Period 520.00	
City		State		Zip Code	
WHEELING		WV		26003	
Purpose of Disbursement RADIO		Category/ Type			
Candidate Name					
Office Sought:		Disbursement For:			
☐ House ☐ Senate ☐ President		☐ Primary ☐ General ☐ Other (specify) ▼			
State:		District:			
B.		Full Name (Last, First, Middle Initial) WRNR		Transaction ID: SB.17 Date of Disbursement MM / DD / YYYY 08 / 05 / 2010	
Mailing Address		1762 EAGLE SCHOOL ROAD		Amount of Each Disbursement this Period 590.00	
City		State		Zip Code	
MARTINSBURG		WV		25404	
Purpose of Disbursement RADIO		Category/ Type			
Candidate Name					
Office Sought:		Disbursement For:			
☐ House ☐ Senate ☐ President		☐ Primary ☐ General ☐ Other (specify) ▼			
State:		District:			
C.		Full Name (Last, First, Middle Initial) WTCR		Transaction ID: SB.21 Date of Disbursement MM / DD / YYYY 08 / 05 / 2010	
Mailing Address		134 FOURTH AVENUE		Amount of Each Disbursement this Period 720.00	
City		State		Zip Code	
HUNTINGTON		WV		25701	
Purpose of Disbursement RADIO		Category/ Type			
Candidate Name					
Office Sought:		Disbursement For:			
☐ House ☐ Senate ☐ President		☐ Primary ☐ General ☐ Other (specify) ▼			
State:		District:			
SUBTOTAL of Disbursements This Page (optional)				1830.00	
TOTAL This Period (last page this line number only)					

FE5AN018

FEC Schedule B (Form 3) (Revised 02/2009)

10020610818

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

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

Raese for Senate

A. Full Name (Last, First, Middle Initial) WV RADIO CORPORATION Mailing Address 1251 EARL L CORE ROAD City MORGANTOWN State WV Zip Code 26505 Purpose of Disbursement RADIO Candidate Name Office Sought: ☐ House ☐ Senate ☐ President State: District: Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼	Transaction ID: SB.29 Date of Disbursement 08 / 05 / 2010 Amount of Each Disbursement this Period 4615.55
B. Full Name (Last, First, Middle Initial) WVAF Mailing Address 1111 VIRGINIA STREET, E City CHARLESTON State WV Zip Code 26301 Purpose of Disbursement RADIO Candidate Name Office Sought: ☐ House ☐ Senate ☐ President State: District: Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼	Transaction ID: SB.22 Date of Disbursement 08 / 05 / 2010 Amount of Each Disbursement this Period 1047.00
C. Full Name (Last, First, Middle Initial) WVTS AM & FM Mailing Address 817 SUNCREST PLACE City CHARLESTON State WV Zip Code 25303 Purpose of Disbursement RADIO Candidate Name Office Sought: ☐ House ☐ Senate ☐ President State: District: Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▼	Transaction ID: SB.24 Date of Disbursement 08 / 05 / 2010 Amount of Each Disbursement this Period 900.00
SUBTOTAL of Disbursements This Page (optional) ► 6562.55 TOTAL This Period (last page this line number only) ►	

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FEC Schedule B (Form 3) (Revised 02/2009)

10020610819

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

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

Raese for Senate

A.

Full Name (Last, First, Middle Initial)

WWVA

Transaction ID: SB.12

Date of Disbursement

08 / 05 / 2010

Mailing Address 1015 MAIN STREET
CAPITOL MUSIC HALL

City State Zip Code
WHEELING WV 26003

Amount of Each Disbursement this Period

340.00

Purpose of Disbursement
RADIO

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

340.00

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

140683.07

SCHEDULE C (FEC Form 3)

LOANS

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

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FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Raese for Senate

Transaction ID: SC9.001

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

MR. JOHN R. RAESE - [PERSONAL FUNDS]

Election:

☐ Primary

☐ General

☒ Other (specify) ▼

PRIMARY - 1984

Mailing Address P.O. BOX 262

City 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

Date Due

Interest Rate

Secured:

M M
0 4

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) ▶

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

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FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID: SC9.002

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

Election:

☐ Primary
☐ General
☒ Other (specify) ▼

PRIMARY - 1984

Mailing Address P.O. 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

Date Due

Interest Rate

Secured:

M M
0 5

D D
0 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) ▶

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

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FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID: SC9.003

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

Election:

☐ Primary
☐ General
☒ Other (specify) ▼

PRIMARY - 1984

Mailing Address P.O. 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

PAGE 26 / 44

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID: SC9.004

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

Election:

☐ Primary

☐ General

☒ Other (specify) ▼

PRIMARY - 1984

Mailing Address P.O. BOX 262

City 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

PAGE 27 / 44

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID: SC9.005

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

Election:

☐ Primary

☐ General

☒ Other (specify) ▼

PRIMARY - 1984

Mailing Address P.O. BOX 262

City MORGANTOWN

State WV

ZIP Code 26507

Original Amount of Loan

4700.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

4700.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

MM
106

DD
04

YYYYYY
1984

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) ▶

4700.00

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

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

SCHEDULE C (FEC Form 3)

LOANS

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

PAGE 28 / 44

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID: SC9.006

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

Election:

☐ Primary

☐ General

☒ Other (specify) ▼

PRIMARY - 1984

Mailing Address P.O. 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

Date Due

Interest Rate

Secured:

MM
06

DD
29

YYYY
1984

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

PAGE 29 / 44

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID: SC9.007

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

Election:

☐ Primary

☐ General

☒ Other (specify) ▼

PRIMARY - 1984

Mailing Address P.O. BOX 262

City MORGANTOWN

State WV

ZIP Code 26507

Original Amount of Loan

120000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

120000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
0 7

D D
1 8

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) ▶

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 30 / 44

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Raese for Senate

Transaction ID: SC9.008

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

Election:

☐ Primary

☐ General

☒ Other (specify) ▼

PRIMARY - 1984

Mailing Address P.O. BOX 262

City MORGANTOWN

State WV

ZIP Code

26507

Original Amount of Loan

30000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

30000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

MM
07

DD
18

YYYY
1984

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) ▶

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.

10020610828

SCHEDULE C (FEC Form 3)

LOANS

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

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FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID: SC9.009

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

Election:

☐ Primary

☐ General

☒ Other (specify) ▼

PRIMARY - 1984

Mailing Address P.O. BOX 262

City 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

Date Due

Interest Rate

Secured:

M M
0 9

D D
0 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) ▶

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 32 / 44

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID: SC9.010

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

Election:

☐ Primary

☐ General

☒ Other (specify) ▼

PRIMARY - 1984

Mailing Address P.O. 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

09

24

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.

10020610830

SCHEDULE C (FEC Form 3)

LOANS

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

PAGE 33 / 44

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID: SC9.011

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

Election:

☐ Primary

☐ General

☒ Other (specify) ▼

PRIMARY - 1984

Mailing Address P.O. BOX 262

City MORGANTOWN

State WV

ZIP Code

26507

Original Amount of Loan

100000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

100000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
1 0

D D
0 5

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) ▶

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 34 / 44

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Raese for Senate

Transaction ID: SC9.012

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

Election:

☐ Primary

☐ General

☒ Other (specify) ▼

PRIMARY - 1984

Mailing Address P.O. BOX 262

City MORGANTOWN

State WV

ZIP Code 26507

Original Amount of Loan

4500.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

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 35 / 44

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID: SC9.013

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

Election:

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

Mailing Address P.O. BOX 262

City MORGANTOWN State WV ZIP Code 26507

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
10000.00	0.00	10000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
MM DD YYYY 11 08 1984	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) ▶

10000.00

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

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

SCHEDULE C (FEC Form 3)

LOANS

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

PAGE 36 / 44

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID: SC9.014

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

Election:

☐ Primary
☐ General
☒ Other (specify) ▼

PRIMARY - 1984

Mailing Address P.O. BOX 262

City 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

Date Due

Interest Rate

Secured:

☐ M ☐ D ☐ Y ☐ M ☐ D ☐ Y ☐ M ☐ D ☐ Y
 12 27 1985 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

PAGE 37 / 44

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Raese for Senate

Transaction ID: SC9.015

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

Election:

☐ Primary

☐ General

☒ Other (specify) ▼

PRIMARY - 2006

Mailing Address P.O. BOX 262

City MORGANTOWN State WV ZIP Code 26507

Original Amount of Loan

70000.00

Cumulative Payment To Date

13827.16

Balance Outstanding at Close of This Period

56172.84

TERMS

Date Incurred

M M
0 4

D D
1 9

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)

56172.84

TOTALS This Period (last page in this line only)

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

SCHEDULE C (FEC Form 3)

LOANS

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

PAGE 38 / 44

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Raese for Senate

Transaction ID: SC9.016

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

Election:

☐ Primary
☐ General
☒ Other (specify) ▼

PRIMARY - 2006

Mailing Address P.O. 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 Y Y 04 27 2006	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)

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 39 / 44

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)

Raese for Senate

Transaction ID: SC9.017

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

Election:

☐ Primary
☐ General
☒ Other (specify) ▼

PRIMARY - 2006

Mailing Address P.O. BOX 262

City 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:

MM DD YYYY 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

PAGE 40 / 44

FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID: SC9.019

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

Election:

☐ Primary
☐ General
☒ Other (specify) ▼
GENERAL - 2006

Mailing Address P.O. BOX 262

City MORGANTOWN State WV ZIP Code 26507

Original Amount of Loan

50000.00

Cumulative Payment To Date

0.00

Balance Outstanding at Close of This Period

50000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

M M
1 0

D D
0 2

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)

50000.00

TOTALS This Period (last page in this line only)

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

SCHEDULE C (FEC Form 3)

LOANS

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

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FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID: SC9.020

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

Election:

☐ Primary
☐ General
☒ Other (specify) ▼

GENERAL - 2006

Mailing Address P.O. BOX 262

City MORGANTOWN State WV ZIP Code 26507

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

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

☐ M ☐ D ☐ Y ☐ M ☐ D ☐ Y ☐ M ☐ D ☐ Y
 10 20 2006 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) ▶

188240.00

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

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

LOANS

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X	13a
	13b

Raese for Senate

Transaction ID: SC9.021

	Other (specify) ☒
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City	MORGANTOWN	State	WV	ZIP Code	26507
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Balance Outstanding at Close of This Period

10000.00

0.00

10000.00

Secured:

M M
07

D D
27

2010

NONE

0.0000	% (apr)
--------	---------

☐ Yes ☒ No

Name of Employer

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.

110820610848

SCHEDULE C (FEC Form 3)

LOANS

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

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FOR LINE NUMBER:
(check only one)

☒ 13a
☐ 13b

NAME OF COMMITTEE (In Full)
Raese for Senate

Transaction ID: SC9.001b

LOAN SOURCE Full Name (Last, First, Middle Initial)
JOHN RAESE - PERSONAL FUNDS - [PERSONAL FUNDS]

Election:

☒ Primary
☐ General
☐ Other (specify) ▼

Mailing Address P.O. BOX 262

City MORGANTOWN State WV ZIP Code 26507

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
110000.00	0.00	110000.00

TERMS

Date Incurred

Date Due

Interest Rate

Secured:

MM DD YYYY 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) ▶

110000.00

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

1011096.40

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

SCHEDULE D (FEC Form 3)

DEBTS AND OBLIGATIONS

Excluding Loans

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

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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
PAMELA BOSSIO

Nature of Debt (Purpose):
CELL PHONE

Mailing Address 2233 LAKESIDE ESTATE

City MORGANTOWN **State** WV **ZIP Code** 26508

Outstanding Balance Beginning This Period
0.00

Transaction ID: SD.1

Amount Incurred This Period
445.13

Payment This Period

0.00

Outstanding Balance at Close of This Period

445.13

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

Nature of Debt (Purpose):
FUEL

Mailing Address 672 EASTON AVENUE

City MORGANTOWN **State** WV **ZIP Code** 26501

Outstanding Balance Beginning This Period
0.00

Transaction ID: SD.4

Amount Incurred This Period
71.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

71.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
SANDLER-INNOZENZI, INC.

Nature of Debt (Purpose):
TELEVISION

Mailing Address 705 PRINCE STREET

City ALEXANDRIA **State** VA **ZIP Code** 22314

Outstanding Balance Beginning This Period
0.00

Transaction ID: SD.2

Amount Incurred This Period
7840.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

7840.00

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

8356.13

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

8356.13

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

1011096.40

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

1019452.53

NANCY ERICKSON
SECRETARY

DANA K. MCCALLUM
SUPERINTENDENT

HART SENATE OFFICE BUILDING
SUITE 232
WASHINGTON, DC 20510-7116
PHONE: (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

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08-16-10

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Postmark

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USPS EXPRESS MAIL

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OVERNIGHT DELIVERY SERVICE:

SHIPPING DATE

NEXT BUSINESS DAY DELIVERY

FEDERAL EXPRESS

☐

UPS

☐

DHL

☐

AIRBORNE EXPRESS

☐

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Date of Receipt

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NO POSTMARK ☐

FAX

Date of Receipt

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Date of Receipt or Postmark

PREPARER

RD

DATE PREPARED

08-16-10

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