## **State of West Virginia**

## **ELECTIONEERING COMMUNICATIONS FORM**

In Relation to	Election	Year
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Must be filed when \$5,000 or more is spent on Electioneering Communications as detailed in W. Va. Code §3-8-2b. A Last Minute report will be due when \$1,000 is spent on Electioneering Communications within 15 days of an election.

·	·	ng Communications within 15 days of an election.
		one:
		one:
	and Address: (only if not an indiv	
Principal riace of business c	ina Address. Joiny it not an mare	iduaij
Electioneering Comm	unication expenditures of mor	re than \$1,000 (as required by W. Va. Code §3-8-2b)
Refers to: (candidate name)		Election Year:
□ II	n Support of Candidate	Opposition of Candidate
Paid to:		
Amount of Expenditure:	Date of Ex	xpenditure:
Expenditure Made Within:	30 days prior to Primary Electi	ion
Refers to: (candidate name)		Election Year:
□ Ir	n Support of Candidate	Opposition of Candidate
Paid to:		
Amount of Expenditure:	Date of E	xpenditure:
Expenditure Made Within:	30 days prior to Primary Electio	n 60 days prior to General Election
Refers to: (candidate name)		Election Year:
II	n Support of Candidate	Opposition of Candidate
Paid to:		
Amount of Expenditure:	Date of E	xpenditure:
Expenditure Made Within:	30 days prior to Primary Electio	on 60 days prior to General Election
Refers to: (candidate name)		Election Year:
□ Ir	n Support of Candidate 🔲 II	n Opposition of Candidate
Paid to:		
Amount of Expenditure:	Date of F	Expenditure:
Expenditure Made Within:	30 days prior to Primary Electio	on 60 days prior to General Election

## Contributors totaling more than \$1,000 from the previous calendar year to date

(as required by W. Va. Code §3-8-2b)

Name of Contributor:	Occupation (if applicable):
Address:	
Value of Contribution: Description of Contribution	ribution:
Date Contributor Exceeded \$250:	_
Name of Contributor:	Occupation (if applicable):
Address:	
Value of Contribution: Description of Contribution	ribution:
Date Contributor Exceeded \$250:	_
Name of Contributor:	Occupation (if applicable):
Address:	
Value of Contribution: Description of Contribution	
Date Contributor Exceeded \$250:	
Name of Contributor:	Occupation (if applicable):
Address:	
Value of Contribution: Description of Contribution	
Date Contributor Exceeded \$250:	_
OATH OR AFFIRMATION	ON
,, swear o correct, to the best of my knowledge, for all financial transactions oc	
gnature:	Date:
form must be received in the Secretary of State's	
ce <u>prior</u> to the close of business to be accepted on that	