

State of West Virginia
INDEPENDENT EXPENDITURE FORM
In Relation to _____ Election Year

*Required in addition to regular campaign finance reports under W. Va. Code §3-8-2(b)(1)

Person Making Expenditure: _____

Person(s) Sharing or Exercising Direction or Control: _____

"Persons sharing or exercising direction or control" means officers, directors, executive directors or their equivalent, partners, and in the case of unincorporated organizations, owners, of the entity or person making the disbursement for the electioneering communication.

Name: _____ **Email:** _____ **Phone:** _____

Name: _____ **Email:** _____ **Phone:** _____

Name: _____ **Email:** _____ **Phone:** _____

Custodian of the Books: _____

Principal Place of Business and Address: (only required if not an individual) _____

Type of Filing: (please choose one)

- \$1,000 single time/aggregate expenditure made within a calendar year
- \$500 or more expenditure for any county office or single-county judicial candidate within 15 days and before 12 hours of an election
- \$1,000 or more expenditure for any statewide, legislative or multi-county judicial candidate within 15 days and before 12 hours of an election
- \$10,000 or more anytime expenditure

Independent Expenditures

<p>Refers to: (candidate name) _____ Election Year: _____</p> <p style="text-align: center;"><input type="checkbox"/> In Support of Candidate <input type="checkbox"/> In Opposition of Candidate</p> <p>Paid to: _____</p> <p>Amount of Expenditure: _____ Date of Expenditure: _____</p> <p>Election Cycle: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special</p>
<p>Refers to: (candidate name) _____ Election Year: _____</p> <p style="text-align: center;"><input type="checkbox"/> In Support of Candidate <input type="checkbox"/> In Opposition of Candidate</p> <p>Paid to: _____</p> <p>Amount of Expenditure: _____ Date of Expenditure: _____</p> <p>Election Cycle: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special</p>
<p>Refers to: (candidate name) _____ Election Year: _____</p> <p style="text-align: center;"><input type="checkbox"/> In Support of Candidate <input type="checkbox"/> In Opposition of Candidate</p> <p>Paid to: _____</p> <p>Amount of Expenditure: _____ Date of Expenditure: _____</p> <p>Election Cycle: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Special</p>

**Contributors exceeding \$250 from the previous calendar year to date
whose contributions were made for the purpose of furthering the expenditure**

*Required by W. Va. Code §3-8-2(b)(1)(E)

Name of Contributor: _____ Date Contributor Exceeded \$250: ____/____/____
Address: _____
Occupation and Employer of Contributor: (if applicable) _____
PAC Name and Address: (if applicable) _____
Value of Contribution: _____ Description of Contribution: (if other than money) _____
Name of Contributor: _____ Date Contributor Exceeded \$250: ____/____/____
Address: _____
Occupation and Employer of Contributor: (if applicable) _____
PAC Name and Address: (if applicable) _____
Value of Contribution: _____ Description of Contribution: (if other than money) _____
Name of Contributor: _____ Date Contributor Exceeded \$250: ____/____/____
Address: _____
Occupation and Employer of Contributor: (if applicable) _____
PAC Name and Address: (if applicable) _____
Value of Contribution: _____ Description of Contribution: (if other than money) _____

Add additional pages as necessary

OATH OR AFFIRMATION

I, _____, swear or affirm that the attached statement is true and correct, to the best of my knowledge, for all financial transactions occurring within the period covered by this statement. I also swear or affirm that all expenditures listed were not made in cooperation, consultation, or concert, with, or at the request or suggestion of, any candidate or any authorized committee or agent of such candidate.

Signature: _____ **Date:** _____

This form must be received in the Secretary of State's Office prior to the close of business to be accepted on that date.

Office Use Only
