State of West Virginia
INDEPENDENT EXPENDITURE FORM
In Relation to _2026__ Election Year

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

RECEIVED
Elections Division
OCT 16 2026
West Virginia
Secretary of State

Person Making Expenditure: ____WV FREE Action Fund_____

Person(s) Sharing or Exercising Direction or Control: Margaret Chapman Pomponio_____

"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: **Margaret Chapman Pomponio**___ **Email:** margaret@wvfree.org___ **Phone:** 304.342.9188_____

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

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

Custodian of the Books: Margaret Chapman Pomponio_____

Principal Place of Business and Address: **(only required if not an individual) WV FREE P.O. Box 11042 Charleston 25339**

Type of Filing: (please choose one)

☒ **Quarterly Independent Expenditure Report:** $1,000 or more single time independent expenditure or aggregate of all independent expenditures made within a calendar year to report all previously unreported independent expenditures to be filed with the proper jurisdiction at the beginning of each quarter for all entities that are not registered as political committees.

☐ **Last Minute Independent Expenditure Report:** $5,000 or more independent expenditure for any statewide, legislative, or multi-county judicial candidate or $500 or more independent expenditure for any county, municipal office or a single-county judicial candidate within 15 days and before 12 hours of an election to be filed with the proper jurisdiction within 24 hours.

☐ **Anytime Independent Expenditure Report:** $10,000 or more independent expenditure made anytime up to, and including the 15th day preceding an election, to be filed with the Secretary of State within 48 hours.

Independent Expenditures

Refers to: (candidate name) _Lucia Valentine_____ **Election Year:** __2026_____

☒ **In Support of Candidate** ☐ **In Opposition of Candidate**

Paid to: _____Kindred Digital, Huntington, WV _____

Amount of Expenditure: _$9,000.00_____ **Date of Expenditure:** _October 10, 2026 _____

Election Cycle: ☐ **Primary** ☒ **General** ☐ **Special**

Refers to: (candidate name) _____ **Election Year:** _____

☐ **In Support of Candidate** ☐ **In Opposition of Candidate**

Paid to: _____

Amount of Expenditure: _____ **Date of Expenditure:** _____

Election Cycle: ☐ **Primary** ☐ **General** ☐ **Special**

Refers to: (candidate name) _____ **Election Year:** _____

☐ **In Support of Candidate** ☐ **In Opposition of Candidate**

Paid to: _____

Amount of Expenditure: _____ **Date of Expenditure:** _____

Election Cycle: ☐ **Primary** ☐ **General** ☐ **Special**

Contributors exceeding $1,000 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

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Name of Contributor: _____ **Date Contributor Exceeded $1,000:** ____/____/____

Address: _____

Occupation and Employer of Contributor: (if applicable) _____

PAC Name and Address: (if applicable) _____

Name of Contributor: _____ **Date Contributor Exceeded $1,000:** ____/____/____

Address: _____

Occupation and Employer of Contributor: (if applicable) _____

PAC Name and Address: (if applicable) _____

Name of Contributor: _____ **Date Contributor Exceeded $1,000:** ____/____/____

Address: _____

Occupation and Employer of Contributor: (if applicable) _____

PAC Name and Address: (if applicable) _____

Add additional pages as necessary

OATH OR AFFIRMATION

I, __Margaret Chapman Pomponio_____, 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: ___Margaret Chapman Pomponio_____ **Date:** __10/16/2026_____

This form must be received in the Secretary of State's Office prior to the close of business to be accepted on that date. You may email to campaignfinance@wvsos.gov.

Office Use Only

Revised 4/26/2024