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Elections Division
OCT 09 2026
West Virginia
Secretary of State

State of West Virginia
INDEPENDENT EXPENDITURE FORM
In Relation to 2026 Election Year

Amended

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

Person Making Expenditure: West Virginians for Life State PAC Fund

Person(s) Sharing or Exercising Direction or Control: Mary Anne Buchanan

"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: Sherri Stevens

Principal Place of Business and Address: (only required if not an individual) West Virginians for Life State PAC Fund 25 Canyon Rd, Morgantown, WV 26505

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) Please see attached spreadsheet **Election Year:** 2026

☐ **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**

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**

Election Year: 2026
Paid to: West Virginians for Life, 25 Canyon Rd., Morgantown, WV 26505
Date of Expenditure: 10/7/2026 Amend
Election Cycle: General

Refers To		Amount of Expenditure
In Support of Candidate		
Toby Heane	**SD2**	0.35
Mike Oliver	**SD13**	0.34
Joe Statler	**HD77**	0.23
Geno Chiar	**HD78**	0.23
Frank Sturr	**HD73**	0.11
Guy Ward	**HD74**	0.11
Phil Mallow	**HD75**	0.11
Jon Dodds	**HD76**	0.11
Against		
Chris Clayp	**SD2**	0.34
John Williai	**SD13**	0.34
Evan Hanse	**HD79**	0.22
Olivia Mille	**HD80**	0.22
Anitra Ham	**HD81**	0.22
Frankie Del	**HD74**	0.12
Linda Long:	**HD75**	0.12

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

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, Sherri Stevens, 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: Sherri Stevens **Date:** 10-9-2026

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Office Use Only

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.

Revised 4/26/2024