## State of West Virginia Campaign Financial Statement (Short Form) in Relation to 2012 Election Year

IF YOUR ANSWER TO ANY OF THE FOLLOWING QUESTIONS IS "YES," YOU CANNOT USE THIS FORM. YOU MUST USE THE LONG FORM (FORM F-7) TO FILE YOUR CAMPAIGN FINANCE REPORT.

- 1. Has your committee received any loans?
- 2. Has your committee held any fundraisers?
- 3. Has your committee received any miscellaneous receipts, such as refunds or checking account interest?
- 4. Does your committee have any unpaid bills?
- 5. Have you or anyone else given an in-kind contribution to your campaign?

Beginning Balance (ending balance from previous report) 1.	D Control of the cont	TOTAL CONTRIBUTIONS
	EPORT TOTALS after you have completed pa	age 2)
Non-Election Cycle Reporting Period:  Annual Reporting Period:  Annual Reporting Period:		
Primary - First Report Due March 31-April 6,2012  General - First Report Due Sept. 24-28, 2012  Pre-general Report Due Oct. 22-26, 2012	heck one):  Post-primary Due May 21-Jun Post-general Due Nov 19-Dec	Amended Report You must also check box of appropriate reporting period
Office Sought (for candidates) District/Division	City, State, Zip Code	h W 26143 474.
Political Party (for candidates)	Treasure's Mailing Ad	ddress (Street, Route or P.O. Box)
Have you or anyone else given an in-kind contribution     Has your committee given or received a transfer or	f excess campaign funds	

Beginning Balance (ending balance from previous report)	1.	0				
Total Contributions (from Page 2)	2.	+				
Subtotal (lines 1+2)	3.	=				
Total Expenditures (from Page 2)	4.	-				
Ending Balance (lines 3-4)		=				
*Cannot have a negative ending bylance						

TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE (Add line 2 from all reports)				
$\mathcal{G}$				
TOTAL EXPENDITURES				
<b>ELECTION YEAR-TO-DATE</b>				
(Add line 4 from all reports)				
0				

## CONTRIBUTORS OF:

\$250 or Less

More than \$250

Date	Full Name	Amount	Date	Amount							
				Full Name: Address:							
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)							
			1	Full Name: Address:							
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)							
				Full Name: Address:							
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)							
			j	Full Name: Address:							
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)							
Check if additional pages have (add both columns)  been atached.											
ITEMIZED EXPENDITURES (Itemize 3rd pary expenditures/ reimbursements)											
Date	Full name, residence address (if person	); business ad	dress (if	firm)	Purpose		Amount				
					-						
		· · · · · · · · · · · · · · · · · · ·									
	AS MANY COPIES IS PAGE AS YOU NEED.			T	Total Expenditure	s:					
<del></del>	<u> </u>	OATH C	OR AF	FIRMATION							
I, High a Adams, swear or affirm that the attached statement is true											
and correct, to the best of my knowledge, of all financial transactions occurring within the period covered by this statement, as required by West Virginia Code §3-8-5a.											
Signature of Candidate, Agent, or Treasurer											
Date Way + 20 12											
7	Office Use Only										
	Selection 7- Williams										
	Received By:										

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