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-k 6. Has your committee given or received	ind contributio		?					
Candidate or Committee Name (1) MM' +1E +0 HEC+ Rub Political Party (for candidates)	Candidate or Committee's Treasurer Candidate or Candidate or Committee's Treasurer Candidate or Comm							
Dem	205 A exander Place City, State, Zip Code Daytime Phone #							
WV State House of Del 17 th Harricane WV 304 562 7397								
Primary - First Report Due March 31-April 6,2012 Pre-prim Due April 2	Post-primary Report Due May 21-June 19, 2012		Check if Applicable: Amended Report You must also check					
General - First Report Due Sept. 24-28, 2012 Pre-gene Due Oct. 2	Post-general Due Nov 19-Dec	-	box of appropriate reporting period					
Non-Election Cycle Reporting Period:	rt Due In Calend urday in March or withi ter		Zero balance required. PAC must also file Form					
REPORT TOTALS (Fill in totals after you have completed page 2) CASH BALANCE SUMMARY								
Beginning Balance (ending balance from previous report) 1.		0.	TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE (Add line 2 from all reports)					
Total Contributions (from Page 2) 2.	+	0						
Subtotal (lines 1+2) 3.	=	0	ТОТ	AL EXPENDITURES				
Total Expenditures (from Page 2) 4.	_	0	ELECTION YEAR-TO-DATE (Add line 4 from all reports)					
Ending Balance (lines 3-4)	=	()	<u> </u>	155-100				
*Cannot have a negativ								

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)			
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			Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)				
			Full Name: Address:				
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				Full Name: Address:			
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	heck if additional pages have	. J		Total Contribution (add both column	ns: ns)		
	een atached.	<u> </u>					
				rd pary expenditures/ reim	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Date	Full name, residence address (if per	son); business a	address (i	firm) Purp	oose	Amount	
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MAKE	AS MANY COPIES			T-4-L Co			
	S PAGE AS YOU NEED.			Iotal Ex	penditures:		
		OATH	OR AF	FIRMATION			
l,			_	_, swear or affirm that the	attached state	ment is true	
and co	prrect, to the best of my knowled	dge, of all fi	nancial	transactions occurring within	the period cov	rered by this	
staten	nent, as required by West Virgir	lial Code 83	-0-5a.]				
La	conclus M/1	wan	W	☑ Signature of Can	didate Agent	or Treasure	
700	7 06	10	<u> </u>	Signature or Carr	aldato, Agent,	or mododici	
Date_	<u></u>			Office	e Use Only		
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