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?

*Cannot have a negative ending balance

6. Has your committee given or received a transfer of excess campaign funds?

6. Has your committee given or receive			toolo Toologuan		
Candidate or Committee Name	Candidate or Committee's Treasurer				
Political Party (for candidates)	2017				
	Treasurer's Mailing Address (Street, Route or P.O. Box)				
Republican	5357 Kanawhat Stake Forest Dy				
Office Sought (for candidates) D	City, State, Zip Code Daytime Phone #				
12NC Delega	1	Churleston	-1000 523	14 304-412-58	
Primary - First Report Due March 31-April 6,2012 General - First Report Due Sept. 24-28, 2012 Pre-port Due Pre-port Due Octobre Pre-p	Check if Applicable: Amended Report You must also check box of appropriate reporting period Final Report				
Non-Election Cycle Reporting Period:		rt Due In Calend urday in March or with ter	Zero balance required. PAC must also file Form		
Beginning Balance (ending balance from previous report)			TOTAL	A CONTRIBUTIONS	
(ending balance from previous report)	'			TOTAL CONTRIBUTIONS	
Total Contributions (from Page 2)	2. + (3	ELECTION YEAR-TO-DATE (Add line 2 from all reports)		
			1	\mathcal{O}	
Subtotal (lines 1+2)	. = (3	тот	AL EVDENINTIIDES	
Total Expenditures (from Page 2)	4 (\bigcirc	TOTAL EXPENDITURES ELECTION YEAR-TO-DATE (Add line 4 from all reports)		
Ending Balance (lines 3-4)	=	\bigcirc		8	

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)				
-				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)				
				Full Name: Address:				
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)				
Check if additional pages have Total Contributions: (add both columns)								
	en atached.			` <u> </u>				
	ITEMIZED EXPENDITURES (Itemize 3rd pary expenditures/ reimbursements)							
Date	Full name, residence address (if per	son); business add	dress (if	firm) Purpose	Amount			
		<u> </u>	,					
				1				
\vdash								
MAKEA	S MANY COPIES			7.15	$\overline{}$			
	PAGE AS YOU NEED.			Total Expenditures:	1)			
OATH OR AFFIRMATION								
I, 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								
	ent, as required by West Virgin			and decided coounting water the period cov	cred by and			
-	T00G	- h						
Signature of Candidate, Agent, or Treasurer								
Date 6 21 . 20 \\								
				Office Use Only				
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