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

Candidate or Committee Name	Candidate or Committee's Treasurer	
Political Party (for candidates)  Republican  Office Sought (for candidates)  Delegate to RNC	Treasurer's Mailing Address (Street, R  28 Gauth ~ Fork R  City, State, Zip Code D  HAVES, WW 25524	aytime Phone #
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	Post-general Report Due Nov 19-Dec 19, 2012	Check if Applicable:  Amended Report You must also check box of appropriate reporting period  Final Report
Non-Election Cycle Re- Due last S days there	port Due In Calendar Year Saturday in March or within 6 eafter	Zero balance required.  PAC must also file Form

(Fill in totals after you have completed page 2)

## **CASH BALANCE SUMMARY**

Beginning Balance (ending balance from previous report)	1.		0		
Total Contributions (from Page 2)	2.	+	20.00		
Subtotal (lines 1+2)	3.	=	Õ		
Total Expenditures (from Page 2)	4.	_	20.00		
Ending Balance (lines 3-4)		=	O		
*Cannot have a negative ending balance					

TOTAL CONTRIBUTIONS **ELECTION YEAR-TO-DATE** (Add line 2 from all reports)

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TOTAL EXPENDITURES **ELECTION YEAR-TO-DATE** (Add line 4 from all reports)

20.00

## CONTRIBUTORS OF:

More than \$250

<b>.</b>	\$250 or Less			More than \$250	
ate	Full Name	Amount	Date	Amount	
			1	Full Name: Address:	
	<u> </u>		1	Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
				Full Name: Address:	
			1	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:	
			1_	Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
				Total Contributions: (add both columns)	0
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		NDITUDES (Ita	miza '	3rd pary expenditures/ reimburs	ements)
	Full name, residence address				Amount
Date	Full name, residence address	(ii person), business		`	
				Total Expen	ditures: ()
MAKE AS OF THIS I	MANY COPIES PAGE AS YOU NEED.			Total Expen	ditures.
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and com	rect, to the best of my kn ent, as required by West	owledge, ot all t Virginia Code &	rinancia 3-8-5a	al transactions occurring within the	
stateme	int, as required by vvcst				
. (	Lisa C. 5/25_2	Karney		Signature of Candida	ite, Agent, or Treasu
	5/25	. 12		· -	. 1 1 1 4 
Date		U <u>/</u> .		Office Us	
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				Deseived By	



Greg Luttson Sitati's OFFice Secretary on Sitati's OFFice Building 1 Swite 157-K 1960 Kamewha Blud East (Meleston, WU 25305