Sep 24- Oct 21

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?

Danny Hamrick	Tommy Phillips						
Political Party (for candidates) Republican		Treasurer's Mailing Address (Street, Route or P.O. Box) P.O. Box 4386					
Office Sought (for candidates) House of Delegates	District/Division 48	City, State, Zip C Clarksburg	Jode WV	26301	ytime Phone # (304) 672-6890		
Primary - First Report Due March 31-April 6,2012 General - First Report	porting Period (che Pre-primary Report Due April 23-27, 2012 Pre-general Report Due Oct. 22-26, 2012	Post-prii Due May	m ary Report 21-June 19, 201 n eral Report 19-Dec 19, 2012		Check if Applicable: Amended Report You must also check box of appropriate reporting period Final Report		
Non-Election Cycle Reporting Period:		ort Due In Co turday in March or fter			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.	1305,87				
Total Contributions (from Page 2)	2.	+ 220.00				
Subtotal (lines 1+2)	3.	= 1525.47				
Total Expenditures (from Page 2)	4.	- 754.93				
Ending Balance (lines 3-4)		= 770.94				
*Cannot have a negative ending balance						

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

5,623.38

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

4852,44

CONTRIBUTORS OF:

\$250 or Less More than \$250								
Date	Full Name	Amount	Date	Amount				
10/19	George SHEAL	100.00		Full Name: Address:				
10/17	WY TRUCKING ASSL	100,00	1	Contributor's job: (Individu Where contributor works: Affiliation: (Political comm	ıal) (Individual) ittee)			
10/17	TOM CLARK	20.00		Full Name: Address:				
1,7,7	101 CLITCH			Contributor's job: (Individi Where contributor works: Affiliation: (Political comm	(Individual)			
				Full Name: Address:				
				Contributor's job: (Individu Where contributor works: Affiliation: (Political comm	;			
				Full Name: Address:				
	-		<u> </u>	Contributor's job: (Individent Where contributor works: Affiliation: (Political comm				
	heck if additional pages have			Total Cor	tributions:			
	een atached.			(aaa sot			•	
	ITEMIZED EXPENDITU	RES (Item	ize 3	rd pary expenditure	es/ reimburse	ements)		
Date	Full name, residence address (if person)	; business add	fress (if	firm)	Purpose		Amount	
9/24 Subway Bridgeport WV					Volunteer Lunch		7.65	
9/24 Tractor Supply 210 Enily drive clares busy w 26301					5.1gn 57.	1	1688	
9/24 Lowes Clarksling W wood for 3						37.08		
1/2 victory store, can 5.1975 3						28.50		
9/28 ADEAS PRINTING KS Hyors &					66.98			
	MAKE AS MANY COPIES OF THIS PAGE AS YOU NEED. Total Expenditures:							
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 statement, as required by West Virginia Code §3-8-5a.								
		· · · · · · · · · · · · · · · · · · ·		Signatur	e of Candidate	e, Agent, o	r Treasurer	
Date_					 			
_					Öffice Use	Only		

Received By:_

Page 2	2	CONT	RIBU	TORS OF:				
	\$250 or Less			Mor	e 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:				
			1	Contributor's job: (Individ Where contributor works: Affiliation: (Political comn	ual) (Individual) nittee)			
				Full Name: Address:				
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Portical committee)				
				Full Name. Address.				
				Contributor's job: (Individ Where contributor works: Affiliation: (Political comm	: (Individual)			
	Check if additional pages have			Total Cor	ntributions: h columns)			
	een atached.			(add bot	ii coluiniis)			
	ITEMIZED EXPENDIT	URES (Iter	mize 3	rd pary expenditur	es/ reimbursements)		
Date	Full name, residence address (if perso				Purpose	Amount		
9/28	9/28 Chase BANK				FEE	15.00		
9/28 Chase BANK 10/1 Subway Bridgeport W 10/1 USPS clarksburg WV 10/1 Face book. con CA				Meeting	7.69			
10/1 USPS clarksburg WV			,	postage	4.90			
10/1	Face book. con	1	<u>.</u>	CA	Ads	16.99		
1019	Neo Sounds LLC		DE	£	RADÍOAD	34.95		
	AS MANY COPIES IS PAGE AS YOU NEED.			-	Total Expenditures:			
OATH OR AFFIRMATION								
l, and c stater	orrect, to the best of my knowledg ment, as required by West Virginia	ge, of all fin a Code §3-	ancial 8-5a.	, swear or affirm transactions occurri	that the attached stat ng within the period co	ement is true overed by this		
		·		Signatul	re of Candidate, Agent	, or Treasure		
				_	, 3-			
⊔ate_	, 20				Office Use Only	<u> </u>		

Received By:_

CONTRIBUTORS OF:

Page	2 \$250 or Less	00/4/1		More	e than \$250	/ .		
Date	Full Name	Aprount	Date	Amount		$\overline{}$		
				Full Name: Address:				
				Contributor's job: (Individu Where contributor works: Affiliation: (Political comm	ial) (Individual)			
	/		<u> </u>	Full Name:	indee)			
				Address:				
				Contributor's job: (Individual Where contributor works: Affiliation: (Political comm	(Individual) hittee)			
				Full Name: Address:		·		
				Contributor's job: (Individual Where contributor works: Affiliation: (Political comm	ual) (Individual) nittee)			
				Full Name: Address:				
			/	Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)				
	Check if additional pages have	•	.	· _ · _	ntributions: h columns)			
	been atached.			(444 200	• • • • • • • • • • • • • • • • • •			
	ITEMIZED EXPENDITU	RES (Item	ize 3	rd pary expenditure	es/ reimbursements))		
Date	Full name, residence address (if person)	; business add	lress (if	firm)	Purpose	Amount		
10/9	Staples Clash		OTP. CE Supplies	43.99				
10/9	Facebook. com		ADS	30.97				
1019 Facebook. com 1010 Go to meeting. com					meetings	29.00		
1919	Facebook.com				105	903		
10/19	Facebook. Com				AD5	14,00		
MAKE	AS MANY COPIES IIS PAGE AS YOU NEED.				Total Expenditures:			
		OATH O	R AF	FIRMATION	•			
I, and c	correct, to the best of my knowledge ment, as required by West Virginia	e, of all fina Code §3-8	ncial	, swear or affirm transactions occurri	that the attached stating within the period co	ement is true overed by this		
				Signatur	e of Candidate, Agent	, or Treasure		
Date	, 20							
-					Office Use Only			

Received By:___

CONTRIBUTORS OF:

\$250 or Less			/ More	e than \$250		
Date Full Name	Amount	Date	Amount			
			Full Name: Address:			
			Contributor's job: (Individu Where contributor works: Affiliation: (Political comm	ial) (Individual) ittee)		
			Full Name: Address:			
			Contributor's job: (Individu Where contributor works: Affiliation: (Political comm	(Indixidual)		
			Full Name: Address:	/		
			Contributor's job: (Individu Where contributor works: Affiliation: (Political comm	ıal) (Individual) iittee)		
			Full Name: Address:			
			Contributor's job: (Individu Where contributor works: Affiliation: (Political comm	(Individual)		
Check if additional pages have		•	Total Con	tributions:		
been atached.				, , , , , , , , , , , , , , , , , , , ,		
ITEMIZED EXPENDITU	RES (Item	ize 3	rd pary expenditure	es/ reimburs	ements)	-
Date Full name, residence address (if person)		tress (if	firm)	Purpose	1	Amount
10/15 Nata builder. c	on			website =		78,00
10/15 Naton builder. com 10/15 A.C. MOORE				Sign waving L Supplies		43,32
						-
MAKE AS MANY COPIES	<u> </u>			l Total Expend	dituros:	
OF THIS PAGE AS YOU NEED.	. —	-			Littles.	
	OATH O	R AF	FIRMATION			
1. Tommy Phillips			nues er effirm t	hat the attac	had stata	mont ic truo
and correct, to the best of my knowledge	, of all fina	ncial	, swear or animit transactions occurring	nat the attaching within the	period cov	ered by this
statement, as required by West Virginia	Code §3-8	-5a.				
Juny fills) .		Signatur	e of Candidat	e Agent o	or Treasurer
ALMOHN I					/ FO STATS	
Date <u>Uctober 23</u> , 20 12.				Office Use		
				1 7 • 7 ሀታ ሰ	AOU 710	,
				8 PM 2:21	_ VOU 510	6
			Recei		BEC	f

E PRESS FIRML

PLEASE PRESS FIRMLY

Mailing Envelope י ומניו ומנט 1 במדב זפאם מממז 1225 מפזב

For Domestic and International Use

TED STATES POSTAL SERVICE

Visit us at usps.com

From:/Expéditeur:

envelope is not modified, and the contents are mount of mailable material may be enclosed, as long

ly confined within the envelope with the adhesive

MAIL PRIORITY®

> For Domestic and International Use



UNITED STATES POSTAL SERVICE

From Hamrick

oms forms are required. Consult the

national Mail Manual (IMM) at peusps.gov

k a retail associate for details.

ERNATIONAL APPLIES

JUND WEIGHT LIMIT ON

:RNATIONAL RESTRICTIONS APPLY:

led as the means of closure.

10 Box 4386 26702 Charsburg m 26702 Charsburg m 26702 Charsburg m 26702 1900 Karawha - Blud East Chaloston Wr 25305

Label 228, January 2008



не гесусіе.

U



