

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 John Caudill IV | | Candidate or Committee's Treasurer John Caudill IV | |
| Political Party (for candidates) Democrat | | Treasurer's Mailing Address (Street, Route or P.O. Box) 2014 Adams Ave | |
| Office Sought (for candidates) House of Delegates | District/Division 35 | City, State, Zip Code St. Albans WV 25177 | Daytime Phone # (304) 415-4617 |

Election Cycle Reporting Period (check one):

- | | | |
|--|---|---|
| <input type="checkbox"/> Primary - First Report Due March 31-April 6, 2012 | <input type="checkbox"/> Pre-primary Report Due April 23-27, 2012 | <input type="checkbox"/> Post-primary Report Due May 21-June 19, 2012 |
| <input checked="" type="checkbox"/> General - First Report Due Sept. 24-28, 2012 | <input type="checkbox"/> Pre-general Report Due Oct. 22-26, 2012 | <input type="checkbox"/> 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**
Zero balance required.
PAC must also file Form

Non-Election Cycle Reporting Period:

- ☐ **Annual Report Due In _____ Calendar Year**
Due last Saturday in March or within 6 days thereafter

REPORT TOTALS

(Fill in totals after you have completed page 2)

CASH BALANCE SUMMARY

| | |
|--|---------------|
| Beginning Balance (ending balance from previous report) 1. | \$ 1,142.37 |
| Total Contributions (from Page 2) 2. | \$ 0.00 + |
| Subtotal (lines 1+2) 3. | = \$ 1,142.37 |
| Total Expenditures (from Page 2) 4. | \$ 0.00 - |
| Ending Balance (lines 3-4) | = \$ 1,142.37 |
| <i>*Cannot have a negative ending balance</i> | |

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

54.10.00

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

4982.50

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) |

Total Contributions: \$ 0.00
(add both columns)

☐ Check if additional pages have
been attached.

ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/ reimbursements)

| Date | Full name, residence address (if person); business address (if firm) | Purpose | Amount |
|------|--|---------|--------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

MAKE AS MANY COPIES
OF THIS PAGE AS YOU NEED.

Total Expenditures: \$ 0.00

OATH OR AFFIRMATION

I, John Casper, 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.

John Casper
Date 2-1, 20 13.

Signature of Candidate, Agent, or Treasurer

Office Use Only

2013 FEB -8 PM 3:03

RECEIVED

Received By: _____