## 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? No
- 2. Has your committee held any fundraisers? NO
- 3. Has your committee received any miscellaneous receipts, such as refunds or checking account interest? NO
- Does your committee have any unpaid bills? NO
- 5. Have you or anyone else given an in-kind contribution to your campaign? NO
- 6. Has your committee given or received a transfer of excess campaign funds? NO

Candidate or Committee & John Klay	ton Millar		Candidate or Committee's Trees	urer	
Political Party (for candida Office Sought (for candida State Auditor	ites) Dis	trict/Division	Treasurer's Mailing Address (Str HC 86 Box CI City, State, Zip Code Fort Ashby : WV 26719	Daytim	e Phone #
First Report Due March 31-April 6,2012  General - First Report Due Sept. 24-28, 2012	Pre-geni	18ry Report 23-27, 2012	Post-general Report Due Nov 19-Dec 19, 2012		eck if Applicable: Amended Report You must also check box of appropriate reporting period
Non-Election Cycle Re- porting Period:	Annual Report  Due last Satur  days thereafte		ort Due In Calendar Year urday in March or within 6 fer		Final Report Zero balance required. PAC must also file For

(Fill in totals after you have completed page 2)

## CASH BALANCE SUMMARY

Beginning Balance (ending balance from previous report)	1.		0.0	
Total Contributions (from Page 2) 2	2.	+	0.0	
Subtotal times (42) 3		=	0.0	
Total Expenditures (from Page 2) 4	1.	_	0.0	
Luding Balance GueSV4		<del></del>	0.0	
*Cannot have a negative ending balance				

TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE (Add line 2 from all reports)
0.0
TOTAL EXPENDITURES ELECTION YEAR-TO-DATE (Add line 4 from all reports)
0.0

## CONTRIBUTORS OF:

ays x	\$250 or Less			More than \$250	
rte	Full Name	Amount	Date	Amount	
None		0.0	١.	Full Name: Address:	
		0.0	1	Contributor's job: (Individual) V/here contributor works: (Individual) Affiliation: (Pelitical committee)	0.0
			<del> </del>	Full Name: Address:	
		0.0	1	Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Pulitical committee)	0.0
		0.0	1	Full Name:	<u> </u>
		0.0	-	Address: Contributor's job: (Individual)	(2) (1)
		0.0	╁	Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee) Full Name:	0.0
		0.0	_	Address:	_
		0.0		Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	0.0
~~	ck if additional pages have			Total Contributions: (add both columns)	0.0
				rd pary expenditures/ reimbursemer	
Date	Full name, residence address (i			( )	Amount
		<del></del>			
	$N_{\ell}$	Λα			0.0
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		OATH	OR A	FFIRMATION	
	Ch. An M	ille.		swear or affirm that the attached	statement is true
nd com	ect, to the best of my know	wledge, of all fin	ancia	, swear or affirm that the attached transactions occurring within the perio	d covered by this
stateme	nt, as required by West V	irginia Code §3-	·8-5a.		
	Oche M	liller		Signature of Candidate, Ag	ent, or Treasure
	John M 2 · 14 . 20	13			, <del>,</del>
Date	,20_	<u>; / _</u> .		Office Use Only	VIE OF MEST AUG
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				cc	בנטוף לא אי

Received By:\_