State of West Virginia Campaign Financial Statement (Short Form) in Relation to the 2013 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?

Charlene Mansha	Candidate or Committee's Treasurer His G. Cox, Jr. Treasurer's Mailing Address (Street, Route or P.O. Box) 3716 Swallowfail Drive					
Political Party (for candidates) Democrat						
Office Sought (for candidates) Newber of House	District/Division	City, State, Zip Code Daytime Phone # Morgan foun, WI2678 (304) 322-0680				
Election Cycle Report Primary - First Report Due last Saturday in March or within 6 days thereafter. General - First Report Due last Saturday in September or within 6 days thereafter. Ion-Election Cycle Re- porting Period:	Report g primary election or ays thereafter. Report ing general election ss days thereafter. If Year	Check if Applicable: Amended Report You must also check box of appropriate reporting period Final Report Zero balance required PAC must also file Form F-6 Dissolution				
CASH BALAN Beginning Balance (ending balance from previous report)	CE SUMMAR	-		AL CONTRIBUTIONS		
Total Contributions (from Page 2)	2. +	J. 00	ELECTION YEAR-TO-DATE (Add line 2 from all reports) [1,199.04 TOTAL EXPENDITURES ELECTION YEAR-TO-DATE (Add line 4 from all reports) 454.00			
Subtotal (lines 1+2)	3. = 11,19	9.01				
Total Expenditures (from Page 2)	4 454	. 00				
Ending Balance (lines 3-4)	= 10,5	745,01				
+C	egative ending ba	lance				

CONTRIBUTORS OF:

\$250 or Less

More than \$250

Date	Fuli 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:							
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Tota				Total Cor	ntributions:	0	. &				
Check if additional pages have (add both columns)											
ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/ reimbursements)											
Date					Purpose	2	Amount				
My Danielle Blosser, 323 Mountain Road Mir Magantown, WV 26505 Mil House Committee Diner, Democrat					Time of		125.00				
1/2/12	House Committee D	Pay for	anty	194.00							
1/1/3	Delta Sorority, wvc worgantoun, wv 26	Fund Ra Far Mon b	tospital	35.01							
1/14/	Margantour Than	26501	Donatio	2	100.00						
	AS MANY COPIES IS PAGE AS YOU NEED.				Total Expen	ditures:	454.00				
OF IN	O FROE AS TOO REED.	OATH C	R AF	FIRMATION			<u></u> -				
, 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.											
_4	4/4/2013 m 13			Signatur	e of Candida	te Agent	, or Treasurer				
Office Use Only											
SECRETARY OF STATE ANNORM TO STATE											
2013 APR -8 PH4 Peripes											



Morgantown, WN 26508 For House Of Delegates Charlene J. Marshall 1010 Ashion Drice

CLANCOBURG WV 263 ES APRILATE BAR LET

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