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?

Nancy Sartor, Treasurer Treasurer's Mailing Address (Street PO Box 745 City, State, Zip Code	et, Route or P.O. Box) Daytime Phone #		
City, State, Zip Code	Daytime Phone #		
Lewisburg 24901 WV	(304) 646-1443		
Post-primary Report Due May 21-June 19, 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 Zero balance required. PAC must also file For		
t Due In Calendar Year rday in March or within 6 er			
	Post-primary Report Due May 21-June 19, 2012 Post-general Report Due Nov 19-Dec 19, 2012 Due In Calendar Year rday in March or within 6		

REPORT TOTALS

(Fill in totals after you have completed page 2)

CASH BALANCE SUMMARY

Beginning Balance ending balance from previous report) 1.		S 2,816.27		
Total Contributions (from Page 2)	2.	\$ 0.00		
Subtotal (lines 1+2)	3.	= \$ 2,816.27		
Total Expenditures (from Page 2)	4.	-\$ 540.00 -		
Ending Balance (lines 3-4)		= S 2,276.27		
*Cannot have a negative ending balance				

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

\$ 1,922.00	

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

\$ 2,076.25	

CONTRIBUTORS OF:

\$250 or Less

More than \$250

	\$250 or Less			Mor	e than \$250		
Date	Full Name	Amount	Date	Amount			
				Full Name: Address:			
	-			Contributor's job: (Individu Where contributor works: Affiliation: (Political comm	ual) (Individual) iittee)		
				Full Name: Address:			
				Contributor's job: (Individent Where contributor works: Affiliation: (Political communication)	ual) (Individual) iittee)		
				Full Name: Address:			
				Contributor's job: (Individent Where contributor works: Affiliation: (Political communication)	(Individual)		
				Full Name: Address:			
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)			
	Check if additional pages have				ntributions: \$1,92	2.00	
b	een atached.						
	ITEMIZED EXPENDI	TURES (Iter	nize 3	rd pary expenditure	es/ reimbursement	s)	
Date	Full name, residence address (if per	son); business a	ddress (if	firm)	Purpose	\Box	Amount
4/12/12	State I	Fair of V	WV		Booth, Insurance	340.00	
4/14/12	Dama Nestor				Resource Co-ordinato	-\$	150.00
4/14/12	Dan	na Nesto	or		supplies	-\$	50.00
							
	AS MANY COPIES S PAGE AS YOU NEED.			-	Total Expenditures	: [-\$:	540.00
		OATH (OR AF	FIRMATION	· · · · · · · · · · · · · · · · · · ·		
" 1 <u></u>	cy Sartor	<u>.</u>			hat the attached sta		
	orrect, to the best of my knowled nent, as required by West Virgin			transactions occurrir	ng within the period o	covere	ed by this
	Mana S	artr	/	Signature	e of Candidate, Ager	nt, or ⁻	Freasurer
Date ²	27-Apr , 20 12	•		•			
		<u> </u>			Office Use Only		
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Received By:_

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