

State of West Virginia Campaign Financial Statement (Long Form) in Relation to the 2016 Election Year

Candidate or Committee Name Marion County Democrat Committee		Candidate or Committee's Treasurer Ron Pearce - Treasurer	
Political Party (for candidates)		Treasurer's Mailing Address (Street, Route or P.O. Box) PO Box 813	
Office Sought (for candidates)	District/Division	City, State, Zip Code Fairmont W 26555	Daytime Phone # 304 363 1362

Election Cycle Reporting Period (check one):

- | | | |
|--|--|--|
| <input type="checkbox"/> Primary - First Report
Due March 26 - April 1, 2016 | <input type="checkbox"/> Pre-primary Report
Due April 25 - 29, 2016 | <input type="checkbox"/> Post-primary Report
Due May 23 - June 21, 2016 |
| <input type="checkbox"/> General - First Report
Due September 26 - 30, 2016 | <input checked="" type="checkbox"/> Pre-general Report
Due October 24 - 28, 2016 | <input type="checkbox"/> Post-general Report
Due Nov. 21 - Dec. 19, 2016 |

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

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 at the completion of the report.

RECEIPTS OF FUNDS:

Totals for this Period

Contributions (Page 3)	1500.00
Monetary Contributions from all Fund-Raising Events (Page 4)	+
Receipt of a Transfer of Excess Funds (Page 8)	+
Total Monetary Contributions:	=
In-Kind Contributions (Page 5)	+
Total Contributions:	= 1500.00

Other Income (Page 5)	
Loans Received (Page 6)	+
Total Other Income:	=

OUTSTANDING LOANS & DEBTS:

Unpaid Bills (Page 9)	
Outstanding Loans (Page 6)	+
Total Debts:	=

CASH BALANCE SUMMARY

Beginning Balance (ending balance from previous report)	1357.91
Total Monetary Contributions	+ 1500.00
Total Other Income	+
Subtotal:	a. = 2857.91

Total Expenditures (Page 7)	1300.00
Total Disbursements of Excess Funds (Page 8)	+
Repayment of Loans (Page 6)	+
Subtotal:	b. = 1300.00

Ending Balance: (Subtotal a. - Subtotal b.)	= 1557.91
<small>*Cannot be negative balance</small>	

**TOTAL CONTRIBUTIONS
ELECTION YEAR-TO-DATE**
(Add total contributions from all reports)

2857.91

**TOTAL EXPENDITURES
ELECTION YEAR-TO-DATE**
(Add total expenditures from all reports)

1300.00

**Contributors of
More than \$250**

*Check if additional pages
have been attached.*

DATE	INDIVIDUAL CONTRIBUTOR OR COMMITTEE'S NAME	AMOUNT
10-18-16	Full Name: <i>Country Roads PAC</i> Address: (residential and mailing if they are different) <i>101 Washington St E Charleston WV 25301</i> Contributor's job: (individual contributor only) Where contributor works: (individual contributor only) Affiliation: (political committee only) <i>Country Roads PAC</i>	500.00
10-18-16	Full Name: <i>Marion County Democrat Women</i> Address: (residential and mailing if they are different) <i>802 EAST PARK Fairmont WV 26554</i> Contributor's job: (individual contributor only) Where contributor works: (individual contributor only) Affiliation: (political committee only) <i>WOMENS PAC</i>	1000.00
	Full Name: Address: (residential and mailing if they are different) Contributor's job: (individual contributor only) Where contributor works: (individual contributor only) Affiliation: (political committee only)	
	Full Name: Address: (residential and mailing if they are different) Contributor's job: (individual contributor only) Where contributor works: (individual contributor only) Affiliation: (political committee only)	
	Full Name: Address: (residential and mailing if they are different) Contributor's job: (individual contributor only) Where contributor works: (individual contributor only) Affiliation: (political committee only)	
	Full Name: Address: (residential and mailing if they are different) Contributor's job: (individual contributor only) Where contributor works: (individual contributor only) Affiliation: (political committee only)	

**MAKE AS MANY COPIES
OF THIS PAGE AS YOU NEED**

Subtotal of all contributors of more than \$250
 Subtotal of all contributors of \$250 or less (From page 2)

Total Contributions:

+	
=	<i>1500.00</i>

ITEMIZED EXPENDITURES
 (Itemize 3rd party expenditures/ reimbursements)

Check if additional pages have been attached.

Date	Name of Person or Vendor and Address	Purpose	Amount
10/18/16	JAMES TATE 312 Adams St Fairmont WV 26554	Reimbursement HQ supplies, food, cleaning	500.00
10/8/16	WV Democratic Party Po Box 11926 charleston WV	Table sponsor JD dinner	800.00

MAKE AS MANY COPIES OF THIS PAGE AS YOU NEED.

Total Expenditures: 1300.00

UNPAID BILLS

Check if additional pages have been attached.

Date	Owed to Whom	Affiliated with what Company or Group	Purpose	Amount

Total Unpaid Bills:

OATH OR AFFIRMATION

I, Belinda Biafore Chair, swear or affirm that the attached statement is true and correct, to the best of my knowledge, for all financial transactions occurring within the period covered by this statement, as required by West Virginia Code §3-8-5a.

Belinda Biafore Signature of Candidate, Financial Agent or Treasurer

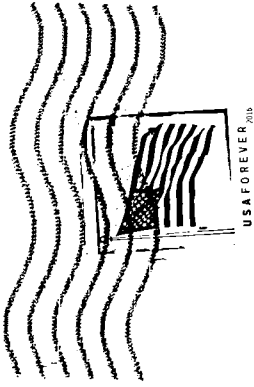
Date 10-24, 2016

Office Use Only
STATE OF WEST VIRGINIA
SECRETARY OF STATE
2016 OCT 26 PM 12:29
RECEIVED
Received By: _____

Marion Democrats
PO Box 813
Fairmont, WV 26555

PITTSBURGH PA 150

24 OCT 2016 PM 1 L



WV Secretary of State Elections Div
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Charleston, WV 25305-0770