State of West Virginia Campaign Financial Statement (Short Form) in Relation to 2016 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?

Candidate or Committee Name MARSHAU - WILL AYLLER CLC PAC Political Party (for candidates)			Candidate or Committee's Treasurer CHARLES TAS ILMINES Treasurer's Mailing Address (Street, Route or P.O. Box) 1501 81 ST MONDSMUE 26041		
Election Cycle Primary - First Report Due March 26 - April 1, 2016 General - First Report Due September 26 - 30, 2016	Pre-Primary Due April 25 - 2 Pre-General Due October 2:	Report 29, 2016 Report	Post-General Report Due Nov. 21 - Dec. 19, 2016	Cho	Amended Report You must also check box of appropriate reporting period
Non-Election Cycle Reporting Period:	Di	_	rt Due In Calendar Year urday in March or within 6 er		Final Report Zero balance require PAC must also file Form F-6 Dissolution

REPORT TOTALS

(Fill in totals after you have completed page 2)

CASH BALANCE SUMMARY

Beginning Balance (ending balance from previous report) 1.	768.90	TOTAL CONTRIBUTIONS
Total Contributions (from Page 2) 2.	+ 1112.00	ELECTION YEAR-TO-DATE (Add line 2 from all reports)
Subtotal (lines 1+2) 3.	= 1880,90	1212.00
Total Expenditures (from Page 2) 4.	- 0	TOTAL EXPENDITURES ELECTION YEAR-TO-DATE (Add line 4 from all reports)
Ending Balance (lines 3-4)	= 1880.90	125,
*Cannot have a neg		

CONTRIBUTORS OF:

\$250 or Less

More than \$250

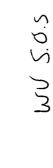
Date	Full Name	Amount	Date		Amount
4/2	CASH PLPUST 50/50	12.00	4/8	Full Name: TRANSFEN FNO M Address: GENERAL KUND	1,000.0
4121	TRANSFER FRIM GENERAL PUND	100	1 "	Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
				Full Name: Address:	
				Contributor's 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)	
L			<u> </u>		12.60
				,	
	ITEMIZED EXPENDIT	URES (Item	ize 3ı	d party expenditures/reimbursements)	
Date	Full name, residence address (if per	son); business a	ddress	(if firm) Purpose	Amount
					
MAKE	AS MANY COPIES			Total Expenditures:	0
	S PAGE AS YOU NEED.			Total Expenditures:	O
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	0.11				
l,	CHARUES TASKALNES	ef all finance	, S\	wear or affirm that the attached statement	is true and
	nent, as required by West Virginia			insactions occurring within the period cover	neu by ans
		_			
	Ci l av			Signature of Candidate, Agent, o	r Treasurer
Date	4-25, 20/6.		•		
טמוכ_	, 20/6 .			VINUSUL NECIVIA	
				SECRETARY OF STATE	
		"		2016 APR 27 PM I2: 08	
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Marshall - Wetzel - Tyler Central Labor Council A.F.L. - C.I.O.



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