

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?
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?

Candidate or Committee Name MONROE CO EXEC COMMITTEE		Candidate or Committee's Treasurer JEFF BUMGARD JR	
Political Party (for candidates) REPUBLICAN		Treasurer's Mailing Address (Street, Route or P.O. Box) HC 77 Box 417	
Office Sought (for candidates)	District/Division	City, State, Zip Code BALEARD, WV 24910	Daytime Phone # 304 753 4910

Election Cycle Reporting Period (check one):

<input checked="" 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 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 after you have completed page 2)

CASH BALANCE SUMMARY

Beginning Balance (ending balance from previous report) 1.	\$352.27
Total Contributions (from Page 2) 2.	+ 2550.00
Subtotal (lines 1+2) 3.	= 2902.27
Total Expenditures (from Page 2) 4.	- 1892.69
Ending Balance (lines 3-4)	= 1009.58
*Cannot have a negative ending balance	

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

2550.00

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

1892.69

CONTRIBUTORS OF:

\$250 or Less

More than \$250

Date	Full Name	Amount	Date	Full Name: Address:	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:	
				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)	

Total Contributions:
(add both columns)

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ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/reimbursements)

Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount
4/11/15	KATHY'S FLOWERS / A. ATKINS FUNERAL 42 MAIN ST, UNION, WV	FUNERAL	53 ⁰⁰
4/15/15	SUSAN BUMGARDNER HC 77, Box 417 BALLARD, WV	Reimburse Reagan Day Ticket PRINTING	255⁰⁰ 435 ⁹
5/1/15	KALLO KIRCHNER MAIN ST, UNION, WV	Reagan Day Dinner Food REIMBURSE	1260 ⁰⁰
	MONROE C. REPUBLICAN CLUB	SHAKE UP REAGAN DAY DINNER PARTY	325 ⁰⁰
4/1/15	MONROE WATCHMAN 401 MAIN ST / UNION WV	Reagan Day Dinner Party	84 ⁰⁰

MAKE AS MANY COPIES
OF THIS PAGE AS YOU NEED.

Total Expenditures:

1765 ⁵⁹

OATH OR AFFIRMATION

SUB-TOTAL
1765 59

I, _____, 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.

Signature of Candidate, Agent, or Treasurer

Date _____, 20____.

Office Use Only
SECRETARY OF STATE STATE OF WEST VIRGINIA
RECEIVED 2016 APR -7 AM 11:31
Received By: _____

CONTRIBUTORS OF:

\$250 or Less

More than \$250

Date	Full Name	Amount	Date	Full Name: Address:	Amount
5/4	REAGAN AUCTION DAY DINNER		5/4	Reagan Day Dinner Auction	650 ⁰⁰
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
				Reagan Day Dinner Ticket SALES	1900 ⁰⁰
				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)	

Total Contributions: (add both columns) 2550⁰⁰

ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/reimbursements)

Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount
11/19 15	SWE SPICES GREEN BAY CO REPUBLICAN EXEC COMMITTEE	1/2 Room Rental	37.50
1/12 15	KARNDY FLOWERS 42 MAIN ST, UNION, WV	VIA FUNERAL	63.60
2/16 15	MONITOR WATCHMAN 400 MAIN ST, UNION, WV	ADVERTISMENT	26.00

MAKE AS MANY COPIES OF THIS PAGE AS YOU NEED. Total Expenditures: 129.24

OATH OR AFFIRMATION

I, Julie Bumgardner, 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.

[Signature] Signature of Candidate, Agent, or Treasurer

Date 4/2, 2016.

Office Use Only
SECRETARY OF STATE
2016 APR -7 AM 11:32
Received By: _____

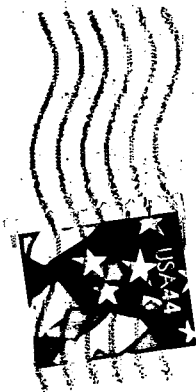
ORTHO-MCNEIL

Ortho-McNeil Pharmaceutical, Inc.
HC 77 Box 417
Ballard, WV 24918

WV Secretary of State
Bldg 1, Suite 157-K
1900 Kanawha Blvd E
CHARLESTON, WV 25305

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