## State of West Virginia Campaign Financial Statement (Short Form) in Relation to 2014 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 N	ame	Candidate or Committee's Treasurer			
North Central WV	Democracy for America	Wayne Worth			
Political Party (for candida		Treasurer's Mailing Address (Street, Route or P.O. Box)			
		163 W. Pike St. Apl. K			
Office Sought (for candida	tes) District/Division		Daytime Phone #		
		Clarksburg, WV 26301	1 (304) 709-2646		
Election Cycl	e Reporting Period (che	Post-Primary Report	Check if Applicable:		
Due March 29-April 4, 2014  General - First Report Due September 22-26, 2014	Due April 28-May 2, 2014  Pre-General Report Due October 20-24, 2014	Due May 26-June 23, 2014  Post-General Report Due Nov. 17-Dec. 15, 2014	Amended Report You must also check box of appropriate reporting period		
		rt Due In Calendar Year	Final Report Zero balance required.		
Non-Election Cycle Reporting Period:		urday in March or within 6	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.		\$ 602.81			
Total Contributions (from Page 2)		+			
Subtotal (lines 1+2)	3.	\$GDQ.81			
Total Expenditures (from Page 2)					
Ending Balance (lines 3-4)		= \$ 602.81			
*Cannot have a negative ending balance					

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

\$ 150.00

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

\$ 153.26

## CONTRIBUTORS OF:

\$250 or Less

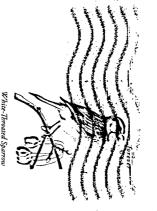
More than \$250

Date	Full Name	Amount	Date			Amount			
				Full Name: Address:					
				Contributor's job: (Individu Where contributor works: Affiliation: (Political comm					
				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)					
Check if additional pages (add both columns)									
ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/reimbursements)									
Date	Full name, residence address (if pers				Purpose	Amount			
						-			
	AS MANY COPIES S PAGE AS YOU NEED.		-	•	Total Expenditures:				
OATH OR AFFIRMATION  I,									
Date_	November 3, 20, 14.				e of Candidate, Agent,	or Treasurer			
				87:1 Hd L-	· AON 4107 ) ] } ; ved By:				

Mayne Worth Central WU DFA Theasurer North Central WU DFA (163 W. D. Ke St. Apt. K Clarksburg, WV 26 30)

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WN Secretary of State Building 1, Suite 157-K 1900 Kanawa Blud, East Charleston, WN 25305

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