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 Name Rodleton County Republican Exec. Code			Candidate or Committee's Treasurer				
Renaleton Country	Republi	can Exec. (M.					
Political Party (for candidates)			Treasurer's Mailing Address (Street, Route or P.O. Box) H 5Kyview Lane				
Office Sought (for candidates) District/Division		City, State, Zip Code Daytime Phone #					
			Franklin, W.V.	26807 30	4-358-2843		
Election Cycle Reporting Period (chec			ck one):		Check if Applicable:		
Due March 29-April 4, 2014	Due Apri	il 28-May 2, 2014	Due May 26-June 23, 20		Amended Report You must also check		
General - First Report Due September 22-26, 2014		neral Report ober 20-24, 2014	Due Nov. 17-Dec. 15, 20		box of appropriate reporting period		
I TO I LICOLIO I O TO IC		t Due In Calendar Year rday in March or within 6 er		Final Report Zero balance required 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	. \$2,186,04		TOTAL CONTRIBUTIONS
Total Contributions (from Page 2) 2	2. +	O	ELECTION YEAR-TO-DATE (Add line 2 from all reports)
		<u>_</u>	0
Subtotal (lines 1+2) 3	=	\$ 2,186.04	TOTAL EXPENDITURES
Total Expenditures (from Page 2) 4	i	0	ELECTION YEAR-TO-DATE (Add line 4 from all reports)
Ending Balance (lines 3-4)	=	# 2,186.04	0
*Cannot have a negative ending balance			

CONTRIBUTORS OF:

\$250 or Less

More than \$250

Date	Full Name	Amount	Date	· · · · · · · · · · · · · · · · · · ·			Amount		
				Full Name: Address:					
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)					
				Full Name: Address:					
				Contributor's job: (Individ Where contributor works Affiliation: (Political comm	Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)				
				Full Name: Address:					
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				Full Name: Address:					
	The street and the			Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)					
	Check if additional pages			Total Cor (add botl	ntributions:	(<u> </u>		
have been atached.									
	ITEMIZED EXPENDITU	IRES (Item	ize 3	rd pary expenditur	es/reimburs	ements)			
Date	Full name, residence address (if perso	on); business a	ddress	(if firm)	Purpose		Amount		
		· • ·							
									
	AS MANY COPIES IS PAGE AS YOU NEED.			· · · · · · · · · · · · · · · · · · ·	Total Expen	ditures:	0		
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l,	Pamela m. Dahm.	er	, S\	wear or affirm that t	he attached	statement i	s true and		
correc	ct, to the best of my knowledge, on ment, as required by West Virginia	t all tinanc	ial tra	ansactions occurring	y within the p	eriod cover	ed by this		
	Pamela M. Dahmen April 28 2014.			Signature	e of Candidat	e, Agent, or	Treasurer		
Date_	April 28, 20 14.			<u></u>	OL MEDI MUON	JANG			
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