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		Candidate or Committee's Treasurer			
Political Party (for candida		Treasurer's Mailing Address (Street, Route or P.O. Box)			
Office Sought (for candida	tes) District/Division	City, State, Zip Code	Daytime Phone # 30 4 4 1 1 2 3 3 つ 入		
Election Cycle Primary - First Report Due March 29-April 4, 2014 General - First Report Due September 22-26, 2014	Pre-Primary Report Due April 28-May 2, 2014 Pre-General Report Due October 20-24, 2014	Post-General Report Due Nov. 17-Dec. 15, 2014	Check if Applicable: Amended Report You must also check box of appropriate reporting period Final Report		
Non-Election Cycle Reporting Period:		ort Due In Calendar Year turday in March or within 6 fter	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.	6,136,65	τ	
Total Contributions (from Page 2)	2.	+ D	(A	
Subtotal (lines 1+2)	3.	=6,136,65		
Total Expenditures (from Page 2)	4.	- D	El (A	
Ending Balance (lines 3-4)		= 6,136,65		
*Cannot have a negative ending balance				

TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE (Add line 2 from all reports)			
1,423,50			
TOTAL EXPENDITURES ELECTION YEAR-TO-DATE (Add line 4 from all reports)			

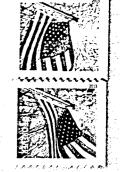
CONTRIBUTORS OF:

\$250 or Less

More than \$250

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	ITEMIZED EXPENDIT	URES (Item	ize 3r	rd party expenditure	es/reimburs	ements)		
Date	Full name, residence address (if per				Purpose	,	Amount	
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staten	nent, as required by West Virginia	a Code §3-8-	-5a.					
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Pulman Co. APT COPE 410 Lawson St. Hurricane WV 25526



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