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 Putual Candidates Political Party (for candidates) Office Sought (for candidates) District/Division	Treasurer's Mailing Address (Street, Ro	ute of P.O. Box) ANC Sytime Phone # 6(0 - 2 7 7/				
	Post-Primary Report Due May 23 - June 21, 2016 Post-General Report Due Nov. 21 - Dec. 19, 2016 rt Due In Calendar Year urday in March or within 6	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				

REPORT TOTALS

(Fill in totals after you have completed page 2)

CASH BALANCE SUMMARY

Beginning Balance (ending balance from previous report)	1.	2711.13			
Total Contributions (from Page 2)	2.	+ 50.00			
Subtotal (lines 1+2)	3.	= 2761.			
Total Expenditures (from Page 2)	4.	- 147.40			
Ending Balance (lines 3-4)		= 2613, 73			
*Cannot have a negative ending balance					

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

2.054 00

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

2,401.83

Official Form F-7A

Issued by the WV State Election Commission

RECEIVED

CONTRIBUTORS OF:

\$250 or Less

More than \$250

	\$250 or Less			IVI	ore than \$250			
Date	Full Name	Amount	Date			Amount		
19/10	JACK DAVIS	50 00		Full Name: Address: Contributor's job: (Individual) Where contributor work:	dual) s: (Individual)			
-				Affiliation: (Political comr				
				Address:				
		i :		Contributor's job: (Individent Where contributor work Affiliation: (Political comments)				
				Full Name: Address:				
				Contributor's job: (Individual Where contributor work: Affiliation: (Political com				
				Full Name: Address:				
				Contributor's job: (Individual Where contributor works Affiliation: (Political communication)				
Total Contributions: \$0 000 (add both columns)								
	ITEMIZED EXPENDITUR	RES (Itemi	ze 3r	d party expenditu	res/reimbursements)			
Date	Full name, residence address (if person); business ad	ldress (if firm)	Purpose	Amount		
10/10	o Shuley Searls, HUIVICALE WV			PARADE	147,40			
					,			
AAKE /	AS MANY COPIES							
	S PAGE AS YOU NEED.			-	Total Expenditures:	147,40		
		OATH OR	AFF	IRMATION				
, correct	t, to the best of my knowledge, of ent, as required by West Virginia Co	all financia	al trar	ear or affirm that t sactions occurring	he attached statemen within the period cov	t is true and vered by this		
	JA 10	<u> </u>		Signature	e of Candidate, Agent, 생자 요즘 것이 된정동	or Treasurer		
Date	ate /0/24 20 6 Office Use Only							
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