## State of West Virginia Campaign Financial Statement (Long Form) in Relation to the 2016 Election Year

Candidate of Committee Name  Candidate or Committee's Treasurer  Kuth Kyan hem m			
Political Party (for candidates)	Treasurer's Mailing Address (Street, Route or P.O. Box)		
Office Sought (for candidates) District/Division		ytime Phone # 304 343-4158	
Election Cycle Reporting	Period (check one):	Check if Applicables	
Due March 26 - April 1, 2016 Due April 25 - 29, 2016 Due May 23 - June 21, 2016 Amende		Check if Applicable:  Amended Report You must also check	
General - First Report  Due September 26 - 30, 2016  Due October 24 - 28, 2016			
Non-Election Cycle  Reporting Period:  Annual Report Due In Calendar Year  Due last Saturday in March or within 6  days thereafter		Final Report Zero balance required. PAC must also file Form F-6 Dissolution	
	ORT TOTALS		
RECEIPTS OF FUNDS: Totals for this F	he completion of the report.  Period CASH BALA	NCE SUMMARY	
Contributions (Page 3)	Beginning Balance (ending balance from		
Monetary Contributions from all Fund-Raising Events (Page 4) +	previous report)	10,250.00	
Receipt of a Transfer of Excess Funds (Page 8) +	Total Monetary Contributions	+ <b>ø</b>	
Total Monetary Contributions: =	Total Other Income	+ 0	
In-Kind Contributions (Page 5) +	Subtotal:	a. = $10.250^{\circ 0}$	
Total Contributions:		101001	
OtherIncome (Page 5)	Total Expenditures (Pa	age 7) /, 000. 00	
Loans Received (Page 6) +	Total Disbursements of Excess Funds (Page		
Total Other Income:	Repayment of Loans		
OUTSTANDING LOANS & DEBTS:	Subtotal:	b. = 9,230.00	
Unpaid Bills (Page 9)		110017	
Outstanding Loans (Page 6) +	Ending Balance		
Total Debts: = U	(Subtotal a Subtotal *Cannot be negative bala	1 - 1 - 2 / 2 / 2 / 2	
TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE (Add total contributions from all reports)	TOTAL EXPE ELECTION YEA (Add total expenditure	AR-TO-DATE	
83.050·	83,050.		

Page 7.	
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## ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/ reimbursements)

Checkifadditionalpag			
 have been attached.			

Date	Name of Person or Vendor and Address	Purpose	Amount
11/14/2016	MORRISEY FOR AG		1,000.00
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	······································		
		,	a)
MAKEAS MANY OF THIS PAGE		Total Expenditures:	1,000.

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## UNPAID BILLS

7	Checkifadditional pages have been attached.
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have been a		illacried.		
Date	Owed to Whom	Affiliated with what Company or Group	Purpose	Amount
		Total Unpa	id Bills:	

OATH OR AFFIRMATION
1. PUTH HYAN LEMMON
statement is true and correct, to the best of my knowledge, for all fine points, swear or affirm that the attached
covered by this statement, as required by West Virginia Code §3-8-5a.
Liela Aug Longon
Signature of Candidate, Financial
Agent or Treasurer
Date
• (

Office Use Only	
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