

# 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 <i>WV Society of CPAs PAC</i>		Candidate or Committee's Treasurer <i>Robert G. Astorg</i>	
Political Party (for candidates) <i>N/A</i>		Treasurer's Mailing Address (Street/Route or P.O. Box) <i>501 Avery St., Suite 9000</i>	
Office Sought (for candidates) <i>N/A</i>	District/Division	City, State, Zip Code <i>Parkersburg, WV 26101</i>	Daytime Phone # <i>304-420-1042</i>

**Election Cycle Reporting Period (check one):**

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Primary - First Report<br>Due March 26 - April 1, 2016 | <input type="checkbox"/> Pre-Primary Report<br>Due April 25 - 29, 2016              | <input type="checkbox"/> Post-Primary Report<br>Due May 23 - June 21, 2016  |
| <input type="checkbox"/> General - First Report<br>Due September 26 - 30, 2016  | <input checked="" type="checkbox"/> Pre-General Report<br>Due October 24 - 28, 2016 | <input type="checkbox"/> Post-General Report<br>Due Nov. 21 - Dec. 19, 2016 |

**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

**Non-Election Cycle Reporting Period:**

- Annual Report Due In \_\_\_\_\_ Calendar Year  
Due last Saturday in March or within 6 days thereafter

## REPORT TOTALS

(Fill in totals after you have completed page 2)

### CASH BALANCE SUMMARY

<b>Beginning Balance</b> (ending balance from previous report) 1.			<i>6159.00</i>
<b>Total Contributions</b> (from Page 2) 2.	+		<i>—</i>
<b>Subtotal</b> (lines 1+2) 3.	=		<i>6159.00</i>
<b>Total Expenditures</b> (from Page 2) 4.	-		<i>3479.61</i>
<b>Ending Balance</b> (lines 3-4)	=		<i>2679.39</i>
<b>*Cannot have a negative ending balance</b>			

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

—

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

\$ 3479.61

CONTRIBUTORS OF:

\$250 or Less

More than \$250

Date	Full Name	Amount	Date	Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	Amount
				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)	
				Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	

Total Contributions:  
(add both columns)

--

ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/reimbursements)

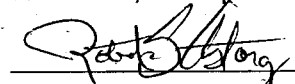
Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount
10/11	Andrew Robinson, 18 California Ave, Charleston, WV 25311	Contribution	50.00
10/11	Barbara Evans-Fleischauer, 851 Bakers Ridge Rd, Morgantown, WV <sup>26508</sup>	Contribution	50.00
10/11	Ben Adams, P.O. Box 11591, Charleston, WV 25339	Contribution	50.00
11/11	Ben Queen, 713 Brightbridge Dr., Bridgeport, WV 26330	Contribution	50.00
11/11	Bill Anderson, 1011 Highland Ave, Williamstown, WV 26187	Contribution	50.00

MAKE AS MANY COPIES  
OF THIS PAGE AS YOU NEED.

Total Expenditures: 250.00

OATH OR AFFIRMATION

I, Robert G. Astorg, swear or affirm that the attached statement is true and correct, to the best of my knowledge, of all financial transactions occurring within the period covered by this statement, as required by West Virginia Code §3-8-5a.



Signature of Candidate, Agent, or Treasurer

Date October 26, 2016, 2016

Office Use Only
Received By: _____

CONTRIBUTORS OF:

\$250 or Less

More than \$250

Date	Full Name	Amount	Date	Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	Amount
				Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
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				Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	

Total Contributions:  
(add both columns)

--

ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/reimbursements)

Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount
10/11	Bill Hamilton, P.O. Box 1192, Buckhannon, WV 26010	Contribution	50.00
10/11	Bill Merriman, 625 Market Street, Parkersburg, WV 26101	Contributions	50.00
10/11	Bob Williams, P.O. Box 562, Grafton, WV 26354	Contributions	50.00
10/11	BRAD NOIL, 340 HEAVENLY DRIVE, HEDGECVILLE, WV 25427	Contribution	50.00
10/11	Brad White, 4905 STAUNTON AVE SE, CHARLESTON, WV 25304	Contribution	50.00

MAKE AS MANY COPIES OF THIS PAGE AS YOU NEED.

Total Expenditures:

250.00
--------

OATH OR AFFIRMATION

I, ROBERT G. ASTORGA, swear or affirm that the attached statement is true and correct, to the best of my knowledge, of all financial transactions occurring within the period covered by this statement, as required by West Virginia Code §3-8-5a.

Robert G. Astorga

Signature of Candidate, Agent, or Treasurer

Date October 26, 2016, 20  

Office Use Only
Received By: _____

CONTRIBUTORS OF:

\$250 or Less

More than \$250

Date	Full Name	Amount	Date	Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	Amount
				Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
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				Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	

Total Contributions:  
(add both columns)

--

ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/reimbursements)

Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount
10/11	C.E. Chuck Romine, 151 Woodland Drive, Huntington, WV <sup>25705</sup>	Contribution	50.00
10/11	Cat Webster, 268 Rumbling Buck Road, Hedgesville, WV <sup>25427</sup>	Contribution	50.00
10/11	Charlotte R. Lane, 311 Shawnee Cir, Charleston, WV <sup>25304</sup>	Contribution	50.00
10/11	Corey Palumbo, 1206 Williamsburg Way, Charleston, WV <sup>25314</sup>	Contribution	100.00
10/11	D. Michael Goode, P.O. Box 816, Pineville, WV <sup>24874</sup>	Contribution	50.00

MAKE AS MANY COPIES  
OF THIS PAGE AS YOU NEED.

Total Expenditures: **350.00**

OATH OR AFFIRMATION

I, ROBERT G. ASTORG, swear or affirm that the attached statement is true and correct, to the best of my knowledge, of all financial transactions occurring within the period covered by this statement, as required by West Virginia Code §3-8-5a.

Robert Astorg

Signature of Candidate, Agent, or Treasurer

Date October 26, 2010

Office Use Only
Received By: _____

CONTRIBUTORS OF:

\$250 or Less

More than \$250

Date	Full Name	Amount	Date	Full Name: Address:	Amount
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
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				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	

Total Contributions:  
(add both columns)

ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/reimbursements)

Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount
10/11	DANA L. LYNCH, 176 Woodplant Rd, Webster Springs WV <sup>26288</sup>	Contribution	50.00
10/11	Dave Perry, 330 East Martin Ave, Oak Hill, WV 25901	Contribution	50.00
10/11	Denise Campbell, Route 1, Box 330-36, Elkins, WV 26241	Contribution	100.00
10/11	Donna J. Baley, 2332 Greens Run Rd, St Marys, WV 26170	Contribution	50.00
10/11	Doug Facey, 255 Hillcrest Dr, P.O. Box 215, Sutton, WV <sup>26001</sup>	Contribution	100.00

MAKE AS MANY COPIES  
OF THIS PAGE AS YOU NEED.

Total Expenditures:

350.00

OATH OR AFFIRMATION

I, ROBERT G. ASTORG, swear or affirm that the attached statement is true and correct, to the best of my knowledge, of all financial transactions occurring within the period covered by this statement, as required by West Virginia Code §3-8-5a.

Robert G. Astorg

Signature of Candidate, Agent, or Treasurer

Date October 26, 2016

Office Use Only

Received By: \_\_\_\_\_

CONTRIBUTORS OF:

\$250 or Less

More than \$250

Date	Full Name	Amount	Date	Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	Amount
				Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
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Total Contributions:  
(add both columns)

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ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/reimbursements)

Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount
10/11	ERIKKA Storch, 5 Edgewood St., Wheeling, WV 26003	Contribution	50.00
10/11	FRANK Deem, 5518 2nd Ave, VIENNA, WV 26105	Contribution	50.00
10/11	Gregory K. Smith, P.O. Box 5369, VIENNA, WV 26105	Contribution	50.00
10/11	ISAAC Sponaugle, P.O. Box 578, FRANKLIN, WV 26037	Contribution	50.00
10/11	JACK GOST, 1413 Pleasant Ave, Willsburg, WV 26070	Contribution	50.00

MAKE AS MANY COPIES OF THIS PAGE AS YOU NEED.

Total Expenditures: 250.00

OATH OR AFFIRMATION

I, ROBERT G. ASTONG, swear or affirm that the attached statement is true and correct, to the best of my knowledge, of all financial transactions occurring within the period covered by this statement, as required by West Virginia Code §3-8-5a.

Robert G. Astong

Signature of Candidate, Agent, or Treasurer

Date OCTOBER 24, 2016, 20

Office Use Only
Received By: _____

CONTRIBUTORS OF:

\$250 or Less

More than \$250

Date	Full Name	Amount	Date	Full Name: Address:	Amount
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
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				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	

Total Contributions:  
(add both columns)

ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/reimbursements)

Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount
10/11	Joe Stutler, 97 Long Drains Rd, Carl, WV 26054	Contribution	50.00
10/11	John David D'Neal IV, B O'role Place, Beckley, WV 25801	Contribution	50.00
10/11	John H. Shott, 422 Oakhurst Ave, Bluefield, WV 24701	Contribution	100.00
10/11	John P. No, 300 Dyler Ave, Oak Hill, WV 25901	Contribution	100.00
10/11	John R. Kelly, 2802 Brookview St Parkersburg, WV 26104	Contribution	50.00

MAKE AS MANY COPIES OF THIS PAGE AS YOU NEED.

Total Expenditures: 250.00

OATH OR AFFIRMATION

I, Robert G. Astorg, swear or affirm that the attached statement is true and correct, to the best of my knowledge, of all financial transactions occurring within the period covered by this statement, as required by West Virginia Code §3-8-5a.

*Robert G. Astorg*

Signature of Candidate, Agent, or Treasurer

Date OCTOBER 26, 2016, 20

Office Use Only
Received By: _____

CONTRIBUTORS OF:

\$250 or Less

More than \$250

Date	Full Name	Amount	Date	Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	Amount
				Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
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Total Contributions:  
(add both columns)

--

ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/reimbursements)

Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount
10/11	Jordan Hill, 1301 Webster Rd, Suite 200, Summersville, WV 26051	Contributions	50.00
10/11	Justin J. Marcum, P.O. Box 2531, Williamstown, WV 25001	Contributions	50.00
10/11	Larry L. Rowe, 202 Wayne Isaac Lane, Malden, WV 25301	Contribution	50.00
10/11	Matthew Rohrbach, 25 Kensington Lane, Huntington, WV 25705	Contribution	50.00
10/11	Mike Caputo, P.O. Box 585, Rivesville, WV 26588	Contribution	50.00

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Total Expenditures: 250.00

OATH OR AFFIRMATION

I, Robert G. Astorg, swear or affirm that the attached statement is true and correct, to the best of my knowledge, of all financial transactions occurring within the period covered by this statement, as required by West Virginia Code §3-8-5a.

Robert G. Astorg

Signature of Candidate, Agent, or Treasurer

Date October 26, 2016

Office Use Only
Received By: _____



CONTRIBUTORS OF:

\$250 or Less

More than \$250

Date	Full Name	Amount	Date	Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	Amount
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				Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	

Total Contributions:  
(add both columns)

--

ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/reimbursements)

Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount
10/11	MIKE FERRO, 32 NINTH STREET, McMECHEN, WV 26040	Contributions	50.00
10/11	MIKE PUSKIN, 411 B RANDOLPH ST, CHARLESTON, WV 25302	Contributions	50.00
10/11	MOORE CAPITO, P.O. Box 2788, CHARLESTON, WV 25330	CONTRIBUTION	50.00
10/11	MR. Shirley LOVE, P.O. Box 1173 DAK HILL, WV 25901	Contributions	100.00
10/11	PAUL A. ESPINOSA, 107 HANCOCK CT, CHARLESTON, WV 25414	Contributions	50.00

MAKE AS MANY COPIES  
OF THIS PAGE AS YOU NEED.

Total Expenditures: 350.00

OATH OR AFFIRMATION

I, ROBERT G. ASTORC, swear or affirm that the attached statement is true and correct, to the best of my knowledge, of all financial transactions occurring within the period covered by this statement, as required by West Virginia Code §3-8-5a.

*Robert G. Astorc*

Signature of Candidate, Agent, or Treasurer

Date OCTOBER 26, 2016

Office Use Only
Received By: _____

CONTRIBUTORS OF:

\$250 or Less

More than \$250

Date	Full Name	Amount	Date	Full Name: Address:	Amount
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	

Total Contributions:  
(add both columns)

ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/reimbursements)

Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount
10/11	Peggy Donaldson Smith 518 Center Ave, Weston, WV 26045	Contribution	50.00
10/11	Phillip W Diserio 623 Wabash Dr, Fallsburg, WV 26037	Contribution	50.00
10/11	Ralph Rodighiero 142 Sayer Circle, Logan, WV 25601	Contribution	50.00
10/11	Roy Hollen 262 Hales Landing, Elizabeth, WV 26043	Contribution	50.00
10/11	Richard J. Jaquinta 139 Vermont Ave, Clarksburg, WV 26031	Contribution	50.00
Total Expenditures:			250.00

MAKE AS MANY COPIES  
OF THIS PAGE AS YOU NEED.

OATH OR AFFIRMATION

I, Robert G. Astorg, swear or affirm that the attached statement is true and correct, to the best of my knowledge, of all financial transactions occurring within the period covered by this statement, as required by West Virginia Code §3-8-5a.

Robert G. Astorg Signature of Candidate, Agent, or Treasurer

Date October 26, 2016

Office Use Only

Received By: \_\_\_\_\_

CONTRIBUTORS OF:

\$250 or Less

More than \$250

Date	Full Name	Amount	Date	Full Name: Address:	Amount
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
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				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	

Total Contributions:  
(add both columns)

--

ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/reimbursements)

Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount
10/11	Robert H. "Bob" Plymale, 206 Cliffview Dr, Huntington, WV 25704	Contributions	100.00
10/11	Rodney A. Miller, 325 1st Street W, Madison, WV 25130	Contributions	50.00
10/11	Roman Prezioso, JR., 1806 Dogwood Dr, Fairmont, WV 26554	Contributions	50.00
10/11	Bonnie Walters, P.O. Box 3665, Charleston, WV 25336	Contributions	100.00
10/11	Scott Brewer, P.O. Box 981, New Haven, WV 25265	Contribution	50.00

MAKE AS MANY COPIES  
OF THIS PAGE AS YOU NEED.

Total Expenditures: 350.00

OATH OR AFFIRMATION

I, Robert G. Astorg, swear or affirm that the attached statement is true and correct, to the best of my knowledge, of all financial transactions occurring within the period covered by this statement, as required by West Virginia Code §3-8-5a.

*Robert G. Astorg*

Signature of Candidate, Agent, or Treasurer

Date October 26, 2016

Office Use Only
Received By: _____

CONTRIBUTORS OF:

\$250 or Less

More than \$250

Date	Full Name	Amount	Date	Full Name: Address:	Amount
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
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				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	

Total Contributions:  
(add both columns)

ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/reimbursements)

Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount
10/11	Stephen Baldwin, Jr. 237 Locust St, Bonceverte, WV 24970	Contribution	50.00
10/11	Stephen Skinner, P.O. Box 366, Shepherdstown, WV 25443	Contribution	50.00
10/11	Tim Manchin, 1543 Fairmont Ave, Fairmont, WV 26554	Contribution	50.00
10/11	Tim Miley, 229 West Main Street, Ste 400, <sup>26301</sup> MARKSBURG, WV	Contribution	50.00
10/11	Tom East, P.O. Box 332, Fayetteville, WV 25840	Contribution	50.00

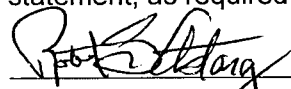
MAKE AS MANY COPIES  
OF THIS PAGE AS YOU NEED.

Total Expenditures:

250.00

OATH OR AFFIRMATION

I, Robert G. Astorg, swear or affirm that the attached statement is true and correct, to the best of my knowledge, of all financial transactions occurring within the period covered by this statement, as required by West Virginia Code §3-8-5a.



Signature of Candidate, Agent, or Treasurer

Date October 26, 2016

Office Use Only

Received By: \_\_\_\_\_

CONTRIBUTORS OF:

\$250 or Less

More than \$250

Date	Full Name	Amount	Date	Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	Amount
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				Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	

Total Contributions:  
(add both columns)

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ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/reimbursements)

Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount
10/11	Bill Hartman, 222 Harper town Rd, Elkins, WV 26241	Contribution	50.00
10/11	Kelli Sobonyg, 9 Toll House Way, Barboursville, WV 25504	Contribution	50.00
10/11	Tim Armstead, 20 Pine Cone Dr., Elkins, WV 25071	Contribution	100.00
10/11	Kristen E. Ross, 316 Prudential Dr, Beckley, WV 25801	Contribution	100.00
10/11	WV Society of CPAs, 900 West East St. 1201, Charleston, WV 25301	Postage	29.61

MAKE AS MANY COPIES  
OF THIS PAGE AS YOU NEED.

Total Expenditures:

279.61

OATH OR AFFIRMATION

I, Robert G. Astorg, swear or affirm that the attached statement is true and correct, to the best of my knowledge, of all financial transactions occurring within the period covered by this statement, as required by West Virginia Code §3-8-5a.

Robert G. Astorg

Signature of Candidate, Agent, or Treasurer

Date October 26, 2016

Office Use Only
Received By: _____

CONTRIBUTORS OF:

\$250 or Less

More than \$250

Date	Full Name	Amount	Date	Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	Amount
				Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
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				Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	

Total Contributions:  
(add both columns)

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ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/reimbursements)

Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount
10/11	Tim Miley, 229 W. Main Street, Ste. 400, Clarksburg, WV 26301	Contributions	50.00

MAKE AS MANY COPIES OF THIS PAGE AS YOU NEED.

Total Expenditures:

50.00
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OATH OR AFFIRMATION

I, Robert G. Astorg, swear or affirm that the attached statement is true and correct, to the best of my knowledge, of all financial transactions occurring within the period covered by this statement, as required by West Virginia Code §3-8-5a.

Robert G. Astorg

Signature of Candidate, Agent, or Treasurer

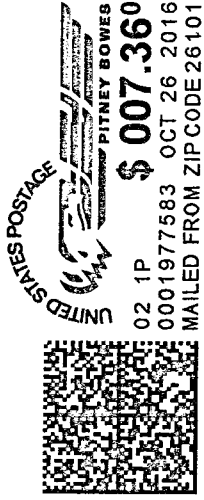
Date October 26, 2016

OFFICE USE ONLY 2016 OCT 31 PM 3:34 RECEIVED Received By: _____
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**Astorg & Jones**  
Certified Public Accountants

101 Avery Street, Suite 9000  
Martinsburg, WV 26101

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE



West Virginia Secretary of State  
Building 1, Suite 157-K  
1900 Kanawha Blvd, East  
Charleston, WV 25305

