

# State of West Virginia Campaign Financial Statement (Long Form) in Relation to the 2014 Election Year

Candidate or Committee Name National Federation of Independent Business/ West Virginia Save Americas Free Enterprise Trust		Candidate or Committee's Treasurer Michael Maloney	
Political Party (for candidates)		Treasurer's Mailing Address (Street, Route or P.O. Box) 1201 F Street, NW Suite 200	
Office Sought (for candidates)	District/Division	City, State, Zip Code Washington, DC 20004	Daytime Phone # (202) 314-2058

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

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> <b>Primary - First Report</b><br>Due March 29-April 4, 2014 | <input type="checkbox"/> <b>Pre-primary Report</b><br>Due April 28-May 2, 2014        | <input type="checkbox"/> <b>Post-primary Report</b><br>Due May 26-Jun 23, 2014 |
| <input type="checkbox"/> <b>General - First Report</b><br>Due Sep. 22-26, 2014       | <input checked="" type="checkbox"/> <b>Pre-general Report</b><br>Due Oct. 20-24, 2014 | <input type="checkbox"/> <b>Post-general Report</b><br>Due Nov 17-Dec 15, 2014 |

**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** \_\_\_\_\_ **Calendar Year**  
Due last Saturday in March or within 6 days thereafter

## REPORT TOTALS

*Fill in totals at the completion of the report.*

**RECEIPTS OF FUNDS:**

Totals for this period

Contributions (Page 3)	0.00
Monetary Contributions from all Fund-Raising Events (Page 4)	+ 0.00
Receipt of a Transfer of Excess Funds (Page 8)	+ 0.00
<b>Total Monetary Contributions:</b>	<b>= 0.00</b>
In-Kind Contributions (Page 5)	+ 0.00
<b>Total Contributions:</b>	<b>= 0.00</b>

Other Income (Page 5)	0.00
Loans Received (Page 6)	+ 0.00
<b>Total Other Income:</b>	<b>= 0.00</b>

**OUTSTANDING LOANS & DEBTS:**

Unpaid Bills (Page 9)	0.00
Outstanding Loans (Page 6)	+ 0.00
<b>Total Debts:</b>	<b>= 0.00</b>

**CASH BALANCE SUMMARY**

Beginning Balance (ending balance from previous report)	2,218.32
Total Monetary Contributions	+ 0.00
Total Other Income	+ 0.00
<b>Subtotal: a.</b>	<b>= 2,218.32</b>

Total Expenditures (Page 7)	0.00
Total Disbursements of Excess Funds (Page 8)	+ 0.00
Repayment of Loans (Page 6)	+ 0.00
<b>Subtotal: b.</b>	<b>= 0.00</b>

<b>Ending Balance:</b> (Subtotal a. - Subtotal b.)	= 2,218.32
<i>*Cannot be negative balance</i>	


**TOTAL CONTRIBUTIONS  
ELECTION YEAR-TO-DATE**  
(Add total contributions from all reports)

500.00

**TOTAL EXPENDITURES  
ELECTION YEAR-TO-DATE**  
(Add total expenditures from all reports)

0.00

**OATH OR AFFIRMATION**

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

\_\_\_\_\_  
Signature of Candidate, Financial Agent or Treasurer

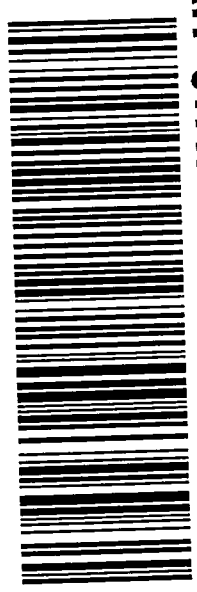
Date 10/22/14, 20  .

Office Use Only  
RECEIVED  
2014 OCT 23 AM 11:01  
SECRETARY OF STATE  
STATE OF WEST VIRGINIA  
Received By: \_\_\_\_\_

FedEx  
TRK# 8060 4575 5777  
0215

XH CRWA  
25305  
UN-US  
HTS

IFU - 25 OCT AM  
STANDARD OVERNIGHT



FID 5822376 220CT14 BWA 522C1/0F64/6500

Extremely Urgent

10/23/14 NO \$

fedex.com 1.800.GoFedEx 1.800.463.3339

004001 FedEx Package  
Express US Airbill  
Tracking Number 8060 4575 5777

1 From Date 10/22/14  
Sender Name BARKER  
Company NPI B  
Address 92 CENTURY BLVD STE 250  
City NASHVILLE  
State TN ZIP 37214-4518  
Phone 615 872-5800

2 Your Internal Billing Reference 01-79-011-033-5502  
3 To Recipients Name Elections Div  
Company Secretary of State  
Address 1980 Knoxville Blvd EST  
City Charleston  
State WV ZIP 25305-0770

B  
571  
1023



0116166982

Form ID No. 0215

4 Express Package Service

Next Business Day

FedEx First Overnight

FedEx Priority Overnight

FedEx Standard Overnight

5 Packaging

Special Handling and Delivery Signature Options

SATURDAY Delivery

7 Payment Bill to:

Sender: [Redacted] Recipient: [Redacted]  
Total Packages: [Redacted] Total Weight: [Redacted]  
Origin Recip: [Redacted] Cash/Check: [Redacted]

Insert shipping document here.