## State of West Virginia Campaign Financial Statement (Short Form) in Relation to 2006 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 Na	Ex. Comm	Candidate or Committee's Treasure	)r	
	Political Party (for candidate	s)	Treasurer's Mailing Address (Street, Route or P.O. Box)  5396 Howards Cick #4.		
	Office Sought (for candidate	es) District/Division	City, State, Zip Code  Ma Thias W.	Daytim 20	e Phone #
Election Cycle Reporting Period (chec			ck one): Check if /		eck if Applicable:
	<b>Primary - First Report</b> Due March 25- 31, 2006	Pre-primary Report Due April 22- 29, 200	Post-primary Report Due June 3- 9, 2006		Amended Report You must also check
	General - First Report Due Sept. 2- 8, 2006  Pre-general Report Due Oct. 21- 28, 200		Post-general Report Due Dec 2- 8, 2006		box of appropriate reporting period  Final Report
Non-Election Cycle Reporting Period:  Annual Repor Due last Satu within 6 days		rday in March or		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.	1/28.45	TOTAL CONTRIBUTIONS
Total Contributions (from Page 2) 2.	+	ELECTIONYEAR-TO-DATE (Add line 2 from all reports)
Subtotal (lines 1+2) 3.	= //28.45	TOTAL EXPENDITURES
Total Expenditures (from Page 2) 4.	_	ELECTION YEAR-TO-DATE (Add line 4 from all reports)
Ending Balance (lines 3-4)	= 1/28.45	
*Cannot have a negativ		

Less than \$250

\$250 or more

Date	Full Name	Amount	Date			21 2 44 44 44 44 44 44 44 44 44 44 44 44 4	Amount	
				Full Name: Address:				
				Contributor's job: (Individu Where works: (Individual) Affiliation: (Political comm	ial) ittee)			
				Full Name: Address:				
				Contributor's job: (Individual) Where works: (Individual) Affiliation: (Political committee)				
				Full Name: Address:				
				Contributor's job: (Individual) Where works: (Individual) Affiliation: (Political committee)				
				Full Name: Address:				
				Contributor's job: (Individual Where works: (Individual Affiliation: (Political comm	al) ittee)			
Check if additional pages  Total Contributions: (add both columns)							THE TENTH OF	
ITEMIZED EXPENDITURES								
Date	Full name, residence address (if person	n); business ac	idress (	if firm)	Purpose		Amount	
				į				
		<del></del>						
	AS MANY COPIES S PAGE AS YOU NEED.			To	otal Expend	itures:	is that wells	
OATH OR AFFIRMATION  , 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								
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