State of West Virginia Campaign Financial Statement (Long Form) in Relation to the 2010 Election Year

Candidate or Committee Name Mins	ral County		or Committee's Treasurer		
Republican Executions	Committee		Cardy Gords	 	
Political Party (for candidates)		Treasurer's	Mailing Address (Street, R		
Office Sought (for candidates)	District/Division	City, State,		200. 4	Phone #
		17		•	188-5652
Election Cycle Reporting Primary - First Report Due March 27-April 2, 2010 Pre-p			Check if Applicable: Amended Report You must also check box of appropriate reporting period Final Report		
Due Sept. 20-24,2010 Pre-gr	Post-general Report Due Nov 15-Dec 15, 2010				
Non-Election Cycle Reporting Period:	Annual Report Due last Satur days thereafte	rday in Marc	[₫] Calendar Year h or within 6	L 2	ero balance required. AC must also file form F-6 Dissolution
	REPO	RT TOT	ALS	• • •	
RECEIPTS OF FUNDS:	Fill in totals at th	•	of the report. CASH BALAN	ICE S	SUMMARY
Contributions (Page 3)	/			TOD .	
Monetary Contributions from all Fund-Raising Events (Page 4)	+ 1760.00		Beginning Balance (ending balance from previous report)		A219911
Receipt of a Transfer of			Total Monetary		· 01/11/01
Excess Funds (Page 8)	+		Contributions		+ 1820.00
Total Monetary Contributions: In-Kind Contributions (Page 5)	= 1820.0	2	Total Other Income		+
III-RING CONTINUUTONS (Page 5)	+		Subtotal:	a.	= // 10 11
Total Contributions:	= 1820.0	72		a.	= 40/9.61
OtherIncome (Page 5)		 [Total Expenditures (P	age 7)	1726.07
Loans Received (Page 6)	+		Total Disbursements of Excess Funds (Page		+
Total Other Income:	=		Repayment of Loans	(Page 6)	+
OUTSTANDING LOANS 8	DEBTS:		Subtotal:	b.	
Unpaid Bills (Page 9)			Castotai.	δ.	
Outstanding Loans (Page 6)	+		Ending Balance	:	1
Total Debts:	_		(Subtotal a Subto	•	£2293,54
TOTAL CONTRIBUTION YEAR-TO (Add total contributions from	O-DATE	_	TOTAL EXPERIENCE ELECTION YE (Add total expenditure)	AR-T()-DATE

Page 2.	Contributors of \$250 or Less	Check if additional pages have been attached.
DATE	CONTRIBUTOR'S FULL NAME OR COMMITTEE'S NAME	AMOUNT
2/18/2010	hauren Ellifretz	30,00
2/18/2010	Rauren Ellifretz Maried Aypolb	25,00
100		
	ANY COPIES GE AS YOU NEED Subtotal of contributors of \$250 or le	ess: \$\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\

Page 5.
OTHER INCOME: INTEREST, REFUNDS, MISCELLANEOUS RECEIPTS

	Source of Income	Type of Receipt	Amour
			,
		/	/
:			
Check if a	dditional pages	Total Other Income:	-0-
Check if a have been	dditional pages attached.	Total Other Income:	-0-
Check if a have been	dditional pages attached. IN-KIND CONTR		-0-
Check if a have been Date	attached.		
have been	attached. IN-KIND CONTR	IBUTIONS	
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have been	attached. IN-KIND CONTR	IBUTIONS	
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