## State of West Virginia Campaign Financial Statement (Short Form) in Relation to 2011 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		Candidate or Committee's Treasurer			
Lincoln Cou	inty Republican	Anita Logan			
Political Party (for candidate		Treasurer's Mailing Address (Street, Route or P.O. Box) P.O. BOX 24 Stored Control of the Contro			
Office Sought (for candidat	es) District/Division	City, State, Zip Code		Phone # 304 -	
Election Cycle Primary - First Report Due March 26-April 1,2011	Reporting Period (che Pre-primary Report Due April 29-May 3, 2011	ck one): Post-primary Report Due May 27-June 28, 20	·	eck if Applicable: Amended Report	
General - First Report Due Aug. 22-26, 2011	Pre-general Report Due Sept. 19-23, 2011	Post-general Report Due Oct.17- Nov.15, 20		You must also check box of appropriate reporting period	
Non-Election Cycle Reporting Period:		rt Due In Calendar Year urday in March or within 6 ter		Final Report Zero balance required. PAC must also file Form	
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## **REPORT TOTALS**

(Fill in totals after you have completed page 2)

## **CASH BALANCE SUMMARY**

Beginning Balance (ending balance from previous report)		486,56			
Total Contributions (from Page 2)		+160.00			
Subtotal (lines 1+2)	3.	=646.56			
Total Expenditures (from Page 2)	4.	- 196,56			
Ending Balance (lines 3-4)		=450.00			
*Cannot have a negative ending balance					

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

4160,00

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

91/96,5b

## **CONTRIBUTORS OF:**

\$250 or Less

More than \$250

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44	Malady Daylor	inn a		Full Name: Address:			
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<b> </b>				Affiliation: (Political committee) Full Name:			
3011				Address:			
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				Address:			
				Contributor's job: (Individual)			
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	ITEMIZED EXPENDITU	RES (Itemi	ize 3ı	d pary expenditur	es/ reimburs	ements)	
Date	Full name, residence address (if person)	; business add	ress (if	firm)	Purpose		Amount
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