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?

	RFP	ORT TOTALS	
Non-Election Cycle Reporting Period:		rt Due In Calendar Year urday in March or within 6 er	Final Report Zero balance required. PAC must also file Form
Due March 26-April 1,2011 General - First Report Due Aug. 22-26, 2011	Pre-primary Report Due April 29-May 3, 2011 Pre-general Report Due Sept. 19-23, 2011	Post-primary Report Due May 27-June 28, 2011 Post-general Report Due Oct.17- Nov.15, 2011	Check if Applicable: Amended Report You must also check box of appropriate reporting period
Election Cycle Primary - First Report	Reporting Period (che	•	Charlest III
Office Sought (for candidate	es) District/Division	City, State, Zip Code Fayetteville WV	Daytime Phone # 25840 304 - 237-5608
Polifical Party (for candidate	es)	Treasurer's Mailing Address (Stree 2558 Maple Ave	t, Route of P.O. Box)
Candidate or Committee Na		Candidate or Committee's Treasure	er

(Fill in totals after you have completed page 2)

CASH BALANCE SUMMARY

Beginning Balance (ending balance from previous report)	1.	400	6,95		
Total Contributions (from Page 2)		+	0		
Subtotal (lines 1+2)	3.	= 40	6.95		
Total Expenditures (from Page 2)	4.	-	Ø		
Ending Balance (lines 3-4)		= 40	06.95		
*Cannot have a negative ending balance					

ELECTION	ONTRIBUTIONS YEAR-TO-DATE from all reports)
	0
ELECTION	XPENDITURES YEAR-TO-DATE from all reports)
	0

CONTRIBUTORS OF:

\$250 or Less

More than \$250

Date	Full Name	Amount	Date	Amount		
			 	Full Name:		
			-	Address:		
			-	Contributor's job: (Individual)		
			1	Where contributor works: (Individu	al)	
				Affiliation: (Political committee)		
				Full Name:		
			1	Address:		1
			7	Contributor's job: (Individual)		
		1	1	Where contributor works: (Individual Affiliation: (Political committee)	al)	ļ
	-		†	Full Name:		
		-		Address:		
			-	Contributor's job: (Individual)		1
			1	Where contributor works: (Individua	al)	
			 	Affiliation: (Political committee)		
				Full Name: Address:		
			4	Contributor's job: (Individual)		
				Where contributor works: (Individual)	1)	l
				Affiliation: (Political committee)		
Check	t if additional pages have			Total Con	tributions:	
been (ntached.			(add both	columns)	
5-1	ITEMIZED EXPEND	ITURES (Item	ize 3r	d pary expenditure	s/ reimbursements	5)
Date	Full name, residence address (if pe	erson); business add	ress (if f	irm)	Purpose	Amount
1						-
				1		
KE AS MA	NY COPIES					
THIS PAG	E AS YOU NEED.		_	To	otal Expenditures:	
		OATH OR	AFFI	RMATION		
1	· · · · · ·					
Cale	ntha Queser to the best of my knowled as required by West Virgin	heren				
d correct	to the heat of much and			swear or affirm tha	at the attached state	ement is true
tomont o	to the best of my knowled	ge, of all financ	cial tra	insactions occurring	within the period co	vered by this
nement, a	as required by West Virgin	ıa Code §3-8 <i>-</i> 5	a.	J	F 00	. cred by tills
1.	\sim 7					
Jale	nikal Kin	sention.				
		- vec	7/	Signature of	of Candidate, Agent,	or Tracques
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