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 Na WW WHLES RERS Political Party (for candidate	MASH WHOLE PAC	Candidate or Committee's Treasurer JOHN R. 140DGES Treasurer's Mailing Address (Street, Route or P.O. Box)			
Office Sought (for candidat	tes) District/Division	2253 MILLER I City, State, Zip Code HUNTINGTON WU 257	Pon Daytime Phone #		
Election Cycle Primary - First Report Due March 26-April 1,2011 General - First Report Due Aug. 22-26, 2011	Pre-general Report Due Sept. 19-23, 2011	ck one): 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 Final Report		
Non-Election Cycle Reporting Period:		rt Due In Calendar Year urday in March or within 6 ter	Zero balance required. PAC must also file Form		
·					

REPORT TOTALS

(Fill in totals after you have completed page 2)

CASH BALANCE SUMMARY

· Beginning Balance (ending balance from previous report)	1.		288.05		
Total Contributions (from Page 2)	2.	+	0		
Subtotal (lines 1+2)	3.	=	288.05		
Total Expenditures (from Page 2)	4.		04		
Ending Balance (lines 3-4)		= .	288.05		
*Cannot have a negative ending balance					

	TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE (Add line 2 from all reports)
	0
	TOTAL EXPENDITURES
	ELECTION YEAR-TO-DATE
	(Add line 4 from all reports)
	0
_	

CONTRIBUTORS OF:

\$250 or Less

More than \$250

Date	Full Name	Amount	Date	Amount			
2410			1	Full Name:			
	A A		ı	Address: Contributor's job: (Individual)		NA	
			7	Where contributor works: (Individual)			
	<			Affiliation: (Political committee)		5	
	7			Full Name: Address:			
			_ `	Contributor's job: (Individual))	
			1	Where contributor works: (Individual)	•	(
			- 	Affiliation: (Political committee) Full Name:		-	-
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	5	'	1	Affiliation: (Political committee)	,)	1
				Full Name:		-	
				Address: Contributor's job: (Individual)			1
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	1			Affiliation: (Political committee)			1
	Check if additional pages have			Total Conf (add both	tributions: columns)	0	
	een atached.			,	,		
	ITEMIZED EXPENDIT	URFS (Ite	mize 3	ard parv expenditure	s/ reimburs	sements)	
Date	Full name, residence address (if perso				Purpose	,	Amount
Date	Tali name, residence address (ii perce			,			
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and c	orrect, to the best of my knowledg	ne of all fir	ancial	transactions occurrin	a within the	period cove	ered by this
	ment, as required by West Virginia			Tanoaonono oodanni	9	P	
	1						
	Who K. How	<u>~</u>		Signature	e of Candida	te. Agent. o	r Treasurer
						-,g, •	-1-15
Date_	John R. Horfu						
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