## State of West Virginia Campaign Financial Statement (Short Form) in Relation to 2010 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?

<ul><li>3. Has your committee received any mis</li><li>4. Does your committee have any unpaid</li><li>5. Have you or anyone else given an in-k</li><li>6. Has your committee given or received</li></ul>	d bills? ind contribution	to your campaign?	ecking account interest?			
Candidate or Committee Name  When His  Political Party (for candidates)  Office Sought (for candidates)  Dis	ASSOC.	Candidate or Committee's Treasurer  D. Todd Murka  Treasurer's Mailing Address (Street, Route or P.O. Box)  PO Box 367  City, State, Zip Code  Daytime Phone #  Chester WV 304-374-8168				
Election Cycle Reporting Period (check one):  Primary - First Report Due March 27-April 2,2010  General - First Report Due Sept. 20-24, 2010  Pre-general Report Due Oct. 18-22, 2010  Pre-general Report Due Nov 15-Dec 15, 2010  Annual Report Due In Calendar Year Due last Saturday in March or within 6 days thereafter  Check if Applicable: Amended Report You must also check box of appropriate reporting period  Final Report Zero balance require PAC must also file Form F-6 Dissolutio  REPORT TOTALS  (Fill in totals after you have completed page 2)						
CASH BALANCE Beginning Balance	•		,			
(ending balance from previous report) 1.  Total Contributions (from Page 2) 2.		9	TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE (Add line 2 from all reports)  TOTAL EXPENDITURES ELECTION YEAR-TO-DATE (Add line 4 from all reports)			
Subtotal (lines 1+2) 3.	_	0				
Total Expenditures (from Page 2) 4	_	0				
Ending Balance		$\wedge$				

(lines 3-4)

\*Cannot have a negative ending balance

## CONTRIBUTORS OF:

\$250 or Less

More than \$250

Date	Full Name	Amount	Date		Amount			
				Full Name: Address:				
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)				
				Full Name: Address:				
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)				
				Full Name: Address:				
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)				
				Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)				
Check if additional pages  Total Contributions:  (add both columns)								
	have been atached.							
	ITEMIZED EXPENDITU	RES (Item	ize 3	rd pary expenditures/ reimbursements)				
Date	Full name, residence address (if perso	n); business a	ddress	(if firm) Purpose	Amount			
		<b>V</b>						
			•					
MAKE AS MANY COPIES  OF THIS PAGE AS YOU NEED.  Total Expenditures:								
OATH OR AFFIRMATION								
l,	DT, dd Murry	f all financ	, S	wear or affirm that the attached statement ansactions occurring within the period cover	is true and			
	ment, as required by West Virginia			arisactions occurring within the period cover	ned by tills			
,	0 12/1)	ŭ						
_	Signature of Candidate, Agent, or Treas							
Date	9/15							
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				\$2.08 APS ABOUT \$2.00 \$2	ANDRA 1994 10 PAIS			
				10 NUM 97 AT	31107			