## State of West Virginia Campaign Financial Statement (Short Form) in Relation to the 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	Preston County	Candidate or Committee's Treasurer				
	Candidate or Committee Name]  Democratic Execut	ive Committee	Nancy Reckart				
Political Party (for candidates)			Treasurer's Mailing Address (Street, Route or P.O. Box)				
			376 Centenary Rd.				
-	Office Sought (for candidates)	District/Division	City, State, Zip Code	aytime	Phone #		
			Bruceton Mills, WV 26525	304	-379-7291		
Election Cycle Reporting Period (check one):  Primary - First Report  Pre-primary Report  Pre-primary Report  Pre-primary Report  Pre-primary Report  Pre-primary Report  Pre-primary Report							
Ame	Due last Saturday in March or within 6 days thereafter.	Due 15 days preceding prime election or within 4 days the	nary Due 13 days following primary election or		Amended Report You must also check		
	Due last Saturday in September	Pre-general Report Due 15 days preceding general	21.001		box of appropriate reporting period		
-	or within 6 days thereafter.	election or within 4 days thereal	1 18 18	Final Report			
Non-Election Cycle Reporting Period:		Annual Report Due In Calendar Year  Due last Saturday in March or within 6  days thereafter			Zero balance required. PAC must also file Form F-6 Dissolution		
PERAPTRA							

## REPORT TOTALS

(Fill in totals after you have completed page 2)

## CASH BALANCE SUMMARY

Beginning Balance (ending balance from previous report)	1.		594.77		
Total Contributions (from Page 2)		+	-0-		
Subtotal (lines 1+2)	3.		594.77		
Total Expenditures (from Page 2)	4.		N-mandama Dmandama		
Ending Balance (lines 3-4)			594.77		
*Cannot have a negative ending balance					

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

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

## **CONTRIBUTORS OF:**

\$250 or Less

More than \$250

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Address:  Contributors job: (Individual) Vinese contributor worker (Individual) Vinese contributors	Date	Full Name	Amount	Date	Amount			
Address. Contributors job: (Individual) Where contributor works: (Individual) Affliation. (Political committee)  Full Name Address. Contributors job: (Individual) Affliation. (Political committee)  Full Name Address. Contributors job: (Individual) Affliation. (Political committee)  Full Name Address.  Total Contributions: (add both collumns)  Full Name Address.  Total Contributions: (add both collumns)  Full name, residence address (if person); business address (if firm)  Purpose  Amount  NONE  OATH OR AFFIRMATION  Nancy Reckart  Swear or affirm that the attached statement is true and correct, to the best of my knowledge, of all financial transactions occurring within the period covered by this tatement, as required by West Virginia Code §3-8-5a.  TAWY Reckart  Signature of Candidate, Agent, or Treasurer  Office Use Only  Offic					Full Name: Address:			
Address: Contributor's job: (individual) Where contributor's job: (individual) Where contributor works: (individual) Affiliation: (Political committee)  Full Name: Address: Contributor's job: (individual) Affiliation: (Political committee)  Full Name: Address: Contributor's job: (individual) Affiliation: (Political committee)  Full Name: Address: Contributor's job: (individual) Where contributors  Full Name: Address: Contributor's job: (individual) Where contributions (add both columns)  Full Name: Address: Contributor's job: (individual) Where contributions (add both columns)  Full Name: Address: Contributor's job: (individual) Where contributions (add both columns)  Full Name: Address: Contributor's job: (individual) Where contributions (add both columns)  Full Name: Address: Contributor's job: (individual) Where contributions (add both columns)  Full Name: Address: Contributor's job: (individual) Affiliation: (Political committee)  Full Name: Address: Contributor's job: (individual) Affiliation: (Political committee)  Full Name: Address: Contributor's job: (individual) Affiliation: (Political committee)  Full Name: Address: Contributor's job: (individual) Affiliation: (Political committee)  Full Name: Address: Contributor's job: (individual) Affiliation: (Political committee)  Full Name: Address: Contributor's job: (individual) Affiliation: (Political committee)  Full Name: Address: Contributor's job: (individual) Affiliation: (Political committee)  Full Name: Address: Contributor's job: (individual) Affiliation: (Political committee)  Full Name: Address: Contributor's job: (individual) Affiliation: (Political committee)  Full Name: Address: Contributor's job: (individual) Affiliation: (Individual) Aff		NONE			Contributor's job: (Individu Where contributor works: Affiliation: (Political comm	ıal) (Individual) ittee)		
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Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)  Check if additional pages have Check if additional pages have  Total Contributions: (add both columns)  Check if additional pages have  Total Contributions: (add both columns)  Date Full name, residence address (if person); business address (if firm)  Purpose  Amount  NONE  OATH OR AFFIRMATION  Nancy Reckart  Swear or affirm that the attached statement is true and correct, to the best of my knowledge, of all financial transactions occurring within the period covered by this statement, as required by West Virginia Code §3-8-5a.  Total Expenditures:  Signature of Candidate, Agent, or Treasurer  Oate  Office Use Only  Coffice Use Only								
Address:    Full Name: Address:								
Address:    Contributor's job: (Individual)   Check if additional pages have   Total Contributor works: (Individual)   Check if additional pages have   Total Contributions: (add both columns)					Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)			
Check if additional pages have been attached.  ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/ reimbursements)  Date Full name, residence address (If person); business address (If firm) Purpose Amount  NONE  MAKE AS MANY COPIES TOTAL Expenditures:  OATH OR AFFIRMATION  VANCY Reckart swear or affirm that the attached statement is true and correct, to the best of my knowledge, of all financial transactions occurring within the period covered by this statement, as required by West Virginia Code §3-8-5a.  The page of Candidate, Agent, or Treasurer Date Det. 25 .2011  Office Use Only								some dispersion of the second
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Ms. Nancy L. Reckart

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