

# State of West Virginia Campaign Financial Statement (Short Form) in Relation to \_\_\_\_\_ 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<br><b>WATZEL Democrat Exec. Comm</b> |                   | Candidate or Committee's Treasurer<br><b>RALPH K. STRIPPEL</b>                          |  |
| Political Party (for candidates)<br><b>DEMOCRAT</b>              |                   | Treasurer's Mailing Address (Street, Route or P.O. Box)<br><b>828 CLEARVIEW TERRACE</b> |  |
| Office Sought (for candidates)<br><b>DEMOCRAT</b>                | District/Division | City, State, Zip Code<br><b>NEW MARTINSVILLE WV</b>                                     | Daytime Phone #<br><b>304-455-6068</b> |

|   |  |   |  |
|---|--|---|--|
| <b>Election Cycle Reporting Period (check one):</b> <b>2005</b>   |  |   | <b>Check if Applicable:</b><br><input type="checkbox"/> <b>Amended Report</b><br>You must also check box of appropriate reporting period<br><br><input type="checkbox"/> <b>Final Report</b><br>Zero balance required. PAC must also file Form F-6 Dissolution |
| <input type="checkbox"/> <b>Primary - First Report</b><br>(Due last Saturday in March or within 6 days thereafter)              | <input checked="" type="checkbox"/> <b>Pre-primary Report</b><br>(Due 15 days before Primary election or within 4 business days) | <input type="checkbox"/> <b>Post-primary Report</b><br>(Due 13 days after Primary election or within 4 business days) |  |
| <input type="checkbox"/> <b>General - First Report</b><br>(Due 43 days prior to the General election or within 4 business days) | <input type="checkbox"/> <b>Pre-general Report</b><br>(Due 15 days before General election or within 4 business days)            | <input type="checkbox"/> <b>Post-general Report</b><br>(Due 13 days after Primary election or within 4 business days) |  |
| <b>Non-Election Cycle Reporting Period:</b>   |  |   | <input type="checkbox"/> <b>Annual Report Due In _____ Calendar Year</b><br>Due last Saturday in March or within 6 days thereafter   |

## REPORT TOTALS

(Fill in totals after you have completed page 2)

### CASH BALANCE SUMMARY

|   |                  |
|---|------------------|
| Beginning Balance<br>(ending balance from previous report) 1. | 7723.24          |
| Total Contributions<br>(from Page 2) 2.                       | + 0              |
| <b>Subtotal<br/>(lines 1+2) 3.</b>                            | <b>= 7723.24</b> |
| Total Expenditures<br>(from Page 2) 4.                        | - 0              |
| <b>Ending Balance<br/>(lines 3-4)</b>                         | <b>= 7723.24</b> |
| <i>*Cannot have a negative ending balance</i>                 |                  |

**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 | Full Name:<br>Address:<br>Contributor's job: (Individual)<br>Where contributor works: (Individual)<br>Affiliation: (Political committee) | Amount |
|------|-----------|--------|------|--|--------|
|      |           |        |      |  |        |
|      |           |        |      |  |        |
|      |           |        |      |  |        |
|      |           |        |      |  |        |
|      |           |        |      |  |        |
|      |           |        |      |  |        |
|      |           |        |      |  |        |
|      |           |        |      |  |        |

☐ Check if additional pages  
have been attached.

Total Contributions:  
(add both columns)

0

## ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/ reimbursements)

| Date | Full name, residence address (if person); business address (if firm) | Purpose | Amount |
|------|--|---------|--------|
|      |  |         |        |
|      |  |         |        |
|      |  |         |        |
|      |  |         |        |
|      |  |         |        |

MAKE AS MANY COPIES  
OF THIS PAGE AS YOU NEED.

Total Expenditures:

0

## OATH OR AFFIRMATION

I, Ralph K. Strippel, 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.

Ralph K. Strippel Signature of Candidate, Agent, or Treasurer

Date April 23, 2012

Office Use Only

2012 APR 24 AM 10:13

Received By: \_\_\_\_\_



Mr. Ralph Shippel  
828 Clearview Terrace  
N. Martinsville, WV 26155-2725

2530530003

23 APR 2012 PM 2:1

Liberty  
FOREVER



WV Dept. of State

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Charleston, WV

25305

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