State of West Virginia Campaign Financial Statement (Short Form) in Relation to 2012 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 bilis?
- 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	1	Candidate or Committee's Treasurer	' l		
GRANT Co. DEKOC.	EXECTORY_	Treasurer's Mailing Address (Street,	Route or P.O. Box)		
Political Party (for candidates)	<u>. </u>	1850 PUNGKIN CON	TOP PU Daytime Phone #		
Office Sought (for candidates	District/Division	City, State, Zip Code	- 1		
Election Cycle R Primary - First Report Due March 31-April 6,2012	Reporting Period (che Pre-primary Report Due April 23-27, 2012	Due May 21-June 19, 2012	Check if Applicable: Amended Report You must also check		
General - First Report Due Sept. 24-28, 2012	Pre-general Report Due Oct. 22-26, 2012	Post-general Report Due Nov 19-Dec 19, 2012	box of appropriate reporting period Final Report		
Non-Election Cycle Reporting Period:	Annual Rep Due last Sa days therea	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.		ろしんなと	TOTAL ELECTI
Total Contributions (from Page 2)		+	0	(Add lir
Subtotal (lines 1+2)	3.	=	3 (レ.KV	TOTA
Total Expenditures (from Page 2)	4.	_	0	ELECTI (Add lir
Ending Balance (lines 3-4)		s	312.42	
*Cannot have a ne	egati	ve end	ing balance	

CONTRIBUTIONS ON YEAR-TO-DATE e 2 from all reports)

113.67

L EXPENDITURES ON YEAR-TO-DATE ie 4 from all reports)

27150

CONTRIBUTORS OF:

\$250 or Less

More than \$250

	\$250 of Less						
ate	Full Name	Amount	Date	Amount		1	
				Full Name: Address:			
			1	Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)			
		1		Full Name:			
-		 	1	Contributor's job: (Individual) Vihere contributor works: (Individual) Affiliation: (Political committee)			
			1	Full Name:			
			1	Address: Contributor's job: (Individual) Where contributor works: (Individual)			
			1	Full Name:			
				Address: Contributor's job: (Individual)			
				Affiliation: (Political committee)			
	heck if additional pages have		٠	Total Conf (add both	tributions:	ב	
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	ITEMIZED EXPENDI	TUDES (to		erd name evnenditure	s/ reimbursements)		
	Full name, residence address (if pers				Purpose	Amount	
Date	Full name, residence address (ii pers						
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	correct, to the best of my knowle	<u></u>		, swear or affirm	that the attached stat	ement is true	
and s	correct, to the best of my knowle	dge, of all fi	inancia	al transactions occurri	ng within the period of	oveten na mu	
state	ment, as required by West Virgi	nia Code §3	3-8-5a	•			
Λ	Land O)		Oi a a air.	re of Candidate, Agent	or Treasure	
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Date	11/2.6 ,20,13	<u>ک</u> .			Office Use Orby		
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