State of West Virginia Campaign Financial Statement (Short Form) in Relation to the <u>\$\lambda \infty \lambda \infty\$</u> 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 Year Oren brier Valley Dom	Candidate or Committee's Treasurer Cart Elizabeth Moe Scott						
Political Party (for candidates) Democratic	Treasurer's Mailing Address (Street, Route or P.O. Box)						
Office Sought (for candidates) District/Division City, State, Zip Code 24(0) Daytime Phone # Leur Shurg WU 9 321-505-2025							
Election Cycle Reporting Period (check one): Primary - First Report Due last Saturday in March or within 6 days thereafter. Due last Saturday in September Due last Saturday in September Due last Saturday in September Or within 6 days thereafter. Election Cycle Report							
norting Period:	al Report Due In Calendar Year ast Saturday in March or within 6						
	DEDORT TOTALS						

REPORT TOTALS

(Fill in totals after you have completed page 2)

CASH BALANCE SUMMARY

		()				
Beginning Balance (ending balance from previous report)	1.	\$468.00				
Total Contributions (from Page 2)	2.	+ 0				
Subtotal (lines 1+2)	3.	= \$ 468.00				
Total Expenditures (from Page 2)	4.	_ 0				
Ending Balance (lines 3-4)		\$468.00				
*Cannot have a negative ending balance						

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

\$ 1676.00 (Since 1008)

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

\$ 1,208.00 (9:1ce 2008)

CONTRIBUTORS OF:

\$250 or Less

More than \$250

Date	Full Name	Amount	Date	Amount				
		19 11	1	Full Name: Address:				
			-	Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)				
			<u> </u>					
			_]	Full Name: Address:				
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			İ	Full Name: Address:				
				Contributor's job: (Individual) Where contributor works: (Indiv Affiliation: (Political committee)				
			1	Full Name: Address:				
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	Check if additional pages have			Total Contrib (add both co	utions:			
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	ITEMIZED EXPEND	ITURES (Item	nize 3r	d party expenditures/ r	eimbursements			
Date	Full name, residence address (if p				Purpose	Amount		
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	Saller Co	Dage Or		Signature of 0	Candidate, Agent	, or Treasure		
Date August 1320/2					Office Use Only			
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