State of West Virginia Campaign Financial Statement (Long Form) in Relation to the Election Year

For political committees, list the current election year. For candidates, list the current campaign or the year of an open past campaign.

Supply all information requested. It is required by WV Code §3-8-5a.

Marion County Education Associa	PAT Kath	V Jacque	2	
Candidate or Committee Name	Candidate or Commit	e's Treasurer	5+	
Political Party (for candidates)	Treasurer's Malling Ad	ddress (Street, Route or P.C). Box) 346+6	10 Z
S. W. D. L.	ion City, State, Zip Code	, //e WV-2455	me Phone #	ال ک
Office Sought (for candidates) District/Divis	rting Period (check one		IIIIe Filolie #	
·	rimary		Post-primary	Report
(Due last Saturday in March or within 6 days thereafter. This report within	ast Saturday in March or 6 days thereafter. This is the port for current election year	(Due 10 to 17 days before primary election)	(Due 25 to 31 after primary	
or within 6 days thereafter) (Due	general Report 10 to 17 days	Post-general Report (Due 25 to 31 days after general or	Final Report (Zero balance re PAC must also f	
You must also check box of appropri-	re general or ial election) */	special election) bost general may also be fina	F-6 Dissolution) Il report if "0"bal	•
ate reporting period	REPORT TOTALS		•	
Fill in totals after you complete pages for contributions, CONTRIBUTIONS OF MONEY		kind contributions, loans, ex	penditures,unpak E SUMMA	d bills. RY
1. Contributions - Schedule 1A	563.06	A. Beginning Balance (ending balance from	2755,0	1.7
2. Fund-raising Events - Schedule 2A	0.00	previous report		
3. TOTAL CONTRIBUTIONS (Add lines 1 and 2)	<u>5-63,Q6</u>	B. Total Receipts (Add lines 3 & 6)	-5 68.6	,3
4. Other Income - Schedule 3A	<u> </u>	C. Subtotal		
5. Loans received - Schedule 1B	0.00	(Add lines A & B)	3324.2	
6. TOTAL OTHER INCOME (Add lines 4 and 5)	<u> 5,57</u>	D.Total Expenditures (Line 10)	1500.	00
7. In-kind (non-cash) contributions - Schedule 4A	0.00	E. Ending Balance		
EXPENDITURES		(Subtract line D from line C)	1824.2	_5
8. Itemized Expenditures - Schedule 2B	1500.00	*Cannot be neg TOTAL RI		
9. Loan Repayment - Schedule 1B	0.00	ELECTION YE (Add line B fro	AR-TO-DAT	Œ
10. TOTAL EXPENDITURES (Add lines 8 and 9)	1500,00	ļ - ` 		7
OUTSTANDING LOANS/DEBTS		TOTAL EXP	8,63	_
11. Unpaid Bills - Schedule 3B	0.00	ELECTION YE		
12. Outstanding Loans - Schedule 1B	0.00		om all reports)	_
13. TOTAL DEBTS (Add lines 11 and 12)	0.00	15 00	.00	

SCHEDULE 3A

OTHER INCOME: INTEREST, REFUNDS, MISCELLANEOUS RECEIPTS
(For information, see General Instructions, Page 4.)

Date	(For Information, see General III	Type of Receipt	Amount
3/31	interest from savings account	bank statement	5.57
_			
	(E	nter Total on Page 1, line 4) Total	5,57

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	-	_	11			-	44

IN-KIND CONTRIBUTIONS

Date	Full name, address, occupation and place where works (if total contributions by individual or committee are more than \$250.00)	Description of contribution	Value (amount)
	,		
			ŀ

SCHEDULE 1A

CONTRIBUTIONS OVER \$250.00

	OVER \$250.00	
	(For information about contributions, see General Instructions, Page 3.)	
DATE	INDIVIDUAL CONTRIBUTOR OR COMMITTEE'S NAME By law, you must report an individual contributor's occupation and business affiliation. For a committee, you must report the affiliation (the group, association, corporation, or union with which it is connected.)	AMOUNT
■ 1	Full Name: West Virginia Education Association PAC	
	Full Name: West Virginia Education Association PAC Address: Quarrier St Charleston WV	563.06
5/2/04	Contributor's job: (individual contributor only)	
	Where contributor works: (individual contributor only)	
	Affiliation: (political committee only)	
<u> </u>	Full Name:	<u> </u>
	Address:	:
	Contributor's job: (individual contributor only)	
	Where contributor works: (individual contributor only)	
	Affiliation: (political committee only)	ļ
	Full Name:	
	Address:	
	Contributor's job: (individual contributor only)	
	Where contributor works: (individual contributor only)	
	Affiliation: (political committee only)	
	Full Name:	
	Address:	
	Contributor's job: (individual contributor only)	
	Where contributor works: (individual contributor only)	
	Affiliation: (political committee only)	
	Full Name:	
	Address:	
	Contributor's job: (Individual contributor only)	
	Where contributor works: (individual contributor only)	
	Affiliation: (political committee only)	
	Full Name:	
	Address:	
	Contributor's job: (individual contributor only)	
	Where contributor works: (Individual contributor only)	
	Affiliation: (political committee only)	1-1341
MAKE AS MAI	Subtotal contributions of more than \$250.00	5-63.06
OF THIS PAG	E AS YOU NEED Subtotal contributions of \$250.00 or less	
	(Enter Total on Page 1, line 1)	563.04

SCHEDULE 2B ITEMIZED EXPENDITURES (For information on Expenditures, see General Instructions, Page 5.)						
Date	Full name, residence address (if a person) or business address (if a firm)	Purpose	Amount expenditure			
5/7/04	Natalic Tennant POBOX 2545 Charleston WU25329	support of campaign	1000.00			
5/7/04	Linda Longstreth Ohio Avenue Fairmont WU 24554	support of campaign	500,00			
MAKE AS MAN OF THIS PAGE		Page 1, line 8) Total	1500.00			

SCHEDULE 3B

UNPAID BILLS

CHEDULE 3B	(For information, see General Instructions, Page 5.)					
Date	Full name, residence addres or business address (if a fir	ss (if a person)	Purpose	Amount		
				,		
	·					
	(Er	nter Total on Page 1, Line 11)	Total			
	OATH OR A	FFIRMATION				
I, Katk tatement is true and co	rect, to the best of my knowledge	e, for all financial tran	swear or affirm sactions occurring	that the atta		
covered by this statem	ent.					

JOE MANCHIN III WY SECHETARY OF STATE

- Signature of Candidate, Financial
Agent or Treasurer

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