## State of West Virginia Campaign Financial Statement (Short Form) in Relation to 1004 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.

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 YO	UR CAMPAIGN FI	NANCE REPORT.							
1. Have you made or accepted any loans to your campaign?									
2. Have you had any fundraisers?									
3. Have you received any miscellaneous receipts, such as	refunds, checking a	ccount interest or transfe	errea iunas						
from a previous campaign?									
<ul><li>4. Do you have any unpaid bills?</li><li>5. Have you or anyone else given an in-kind contribution to</li></ul>	vour campaion?								
o. Have you of anyone cise given and mind continuation to	· · · · · · · · · · · · · · · · · · ·	<del></del>							
Jaylor Co. Political Action Candidate or Committee Name	LIN da Candidate or Comp	HOYCE hittee's Treasurer							
	1 419 W	· WainSt	_						
Political Party (for candidates)	Treasurer's Mailing	Address (Street, Route o	or P.O. Box),204						
	Watt	on WU 26	3747655464						
Office Sought (for candidates) District/Division	City, State, Zip Coo	de	Daytime Phone #						
	riod (check one)								
Annual Report Calendar Year (Due last Saturday in March or within 6 days thereafter. This report filed for old campaigns or year following most recent election)  First Primary (Due last Saturday within 6 days the first report for cureporting)		Pre-primary Report (Due 10 to 17 days before primary election)	Post-primary Report (Due 25 to 31days after primary election)						
First General Report			☐ Final Report						
☐ (Due first Saturday in September ☐ Pre-general Reform within 6 days thereafter) ☐ Pre-general Reform (Due 10 to 17 to		Post-general Report (Due 25 to 31 days	(Zero balance required.						
before general		after general or	PAC must also file Form						
Amended Report (check if applicable) special election		special election)	F-6 Dissolution)						
You must also check box of appropriate reporting period	*p	ost general may also be fin	nal report if "0"balance						
	RT TOTALS	- Company Comp							
(Fill in totals after y	ou have completed pa	age 2)							
Totals	for this period	CASH BALANC	E SUMMARY						
RECEIPTS	16 11	A. Beginning Balance							
1. Total Contributions (Schedule 1A)	10.16	(ending balance from	1117/10						
EXPENDITURES		previous report	1221.49						
2. Total Expenditures (Schedule 1B)	ノート	B. Total Receipts							
		(Line 1)	210/6						
TOTAL RECEIPTS	C. Subtotal (Add lines A & B)	3537.65							
ELECTION YEAR-TO-DATE (Add line B from all reports)	D.Total Expenditures								
(Aud tine & from an reports)	(Line 2)								
396.26									
TOTAL EXPENDITURES	E. Ending Balance	ال ا							
ELECTION YEAR-TO-DATE	(Subtract line D	353765							
(Add line D from all reports)	from line C)	I work							

\*Cannot be negative balance

## CONTRIBUTIONS

\$250 or less

\$250 or more

Date	Full Name	Amount	Date			Amount
3/05	WVEA	210.14	) D	Full Name: Address: Contributor's job: (Individual) Where works: (Individual) Affiliation: (Political committee	ee)	
				Address:  Contributor's job: (Individual) Where works: (Individual) Affiliation: (Polítical committe	ee)	
				Full Name: Address:		
				Contributor's job: (Individual) Where works: (Individual) Affiliation: (Political committee	ee)	
				Full Name: Address:		
		210.10		Contributor's job: (Individual) Where works: (Individual Affiliation: (Political committ		
·					ТОТА	12/0/6
					(both column	s)
Sched	ule 1R	ITEMIZED E	XPFN	DITURES		
Date	Date   Full name, residence address (if person); business address (if firm)				Purpose	Amount
			<u>.</u>			
						,
	AS MANY COPIES S PAGE AS YOU NEED.				TOTAL	<u> </u>
OF THI	S PAGE AS TOU NEED.	OATH C	DAE	FIRMATION		
l, <u> </u>	INCA ROYCE tt, to the best of my knowledge nent.		, S\	wear or affirm that the	attached statemen vithin the period cov	t is true and ered by this
	Junda 1	oyce	<u> </u>	Signature o	of Candidate, Agent,	or Treasurer
Date_	10/18 200 <u>.5</u>			lvi.	OFFICE US SO BY SO	

HAW. MainSt Graffen WU 26354

1900 Kanawha Boulevard East Building 1 Suite 157-K Office of the Secretary of State Charleston W.U. 25305

1000 58-8800420001

A CONTRACTOR OF THE PARTY OF TH