## State of West Virginia Campaign Financial Statement (Short Form) in Relation to 2006 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?

Non-Election Cycle Reporting Period:		Annual ReportCalendar Year  Due last Saturday in March or within 6 days thereafter		Zero balance requested PAC must also file Form F-6 Dissolution
Primary - First Due March 25  General - First F Due Sept. 2-8,	Report -31,2006	orting Period (chec Pre-primary Report Due April 22- 29, 200 Pre-general Report Due Oct. 21- 28, 200	6 Post-primary Re Due June 3- 9, 2	2006 You must also che box of appropriate reporting period
Political Party (f	or candidates)	District/Division	Treasurer's Mailing Address 156 Church Co City, State, Zip Code Hurricane, W 25	mpbells (Street, Royte or P.O. Box)  The property of the prope

## REPORT TOTALS

(Fill in totals after you have completed page 2)

## CASH BALANCE SUMMARY

Beginning Balance (ending balance from previous report)	1.	#1,166,06
Total Contributions (from Page 2)	2.	+2150,50
Subtotal (lines 1+2)	3.	=33 16 , 56
Total Expenditures (from Page 2)	4.	-1000.56
Ending Balance (lines 3-4)		=#2316.56
*Cannot have a ne	gativ	ve ending balance

	TOTAL CONTRIBUTION	_
	ELECTION YEAR-TO-DAT (Add line 2 from all reports	
	(Aud inte 2 it om an reports	<u>'</u>
	TOTAL EXPENDITURES	
]	ELECTION YEAR-TO-DAT	E
	(Add line 4 from all reports)	)
_		-
	RECEIVED	

APR 0 3 2006

## CONTRIBUTIONS

\$250 or more \$250 or less Amount Amount Date Full Name Date Full Name: ### Washington Address: ### Washington Contributor's Job: (Individual) Where works: (Individual) Affiliation: (Political committee) 550. 80 5-04 25311 Full Name: AFT-WV Address: 11 10 Wash 550.00 10-Contributor's job: (Individual) Where works: (Individual) Affiliation: (Political committee) 06 Full Name: Kanowha I 500.50 Address: Contributor's job. (Individual) Where works: (Individual) Affiliation: (Political committee) 66 Full Name: Wood Co. Address: \$500.00 166 Contributor's job: (Individual) Where works: (Individual Affiliation: (Political committee) Total Contributions: (add both columns) Check if additional pages have been atached. ITEMIZED EXPENDITURES Amount Purpose Full name, residence address (if person); business address (if firm) Date \$1,000,00 Commission Elea<u>nor</u> MAKE AS MANY COPIES Total Expenditures: OF THIS PAGE AS YOU NEED. OATH OR AFFIRMATION , 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. Signature of Candidate, Agent, or Treasurer Office Use Only

May S. Campbell 156 Church Camp Rd. Hurricane, ur 25526

THIS ENVELOPE IS RECYCLABLE AND MADE WITH 30% POST CONSUMER CONTENT.

Secretary of States Office 25-25 Building!, Suite 157-K 1900 Kanewka Blod, East Charleston, W 25305-0770