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?

Candidate	or Committee Name		Candidate or Committee's Treasurer					
West Virginia	a For A Brighter Tomorrov	N	Charles S. Smith					
Political Party (for candidates)			Treasurer's Mailing Address (Street, Route or P.O. Box) 405 Capitol Street, Suite 908					
Office Sou	ight (for candidates)	District/Division	City, State, Zip Code Charleston, WV 25301	Daytime Phone # 304-345-1151				
Primary - Due Mare General - I	Election Cycle Report Ch 25- 31, 2006 First Report 2-8, 2006	Pre-primary Report Due April 22- 29, 200 Pre-general Report Due Oct. 21- 28, 200	Post-primary Report Due June 3- 9, 2006 Post-general Report	Check if Applicable: Amended Report You must also check box of appropriate reporting period Final Report				
Non-Election Cycle Reporting Period:		a ,	tCalendar Year rday in March or hereafter	Zero balance required. PAC must also file Form F-6 Dissolution				

REPORT TOTALS

(Fill in totals after you have completed page 2)

CASH BALANCE SUMMARY

				_		
Beginning Balance (ending balance from previous report)	1.		0.00	TOTAL CONTRIBUTIONS		
Total Contributions (from Page 2)		+	0	ELECTION YEAR-TO-DATE (Add line 2 from all reports)		
_				0.0		
Subtotal (lines 1+2)	3.	=	0	TOTAL EXPENDITION		
Total Expenditures (from Page 2)		_		TOTAL EXPENDITURES ELECTION YEAR-TO-DATE (Add line 4 from all reports)		
Ending Balance (lines 3-4)		<u></u>	0.00	0.		
*Cannot have a neg	gativ	ve ending balance				

(Add line 2 from all reports)			
-	0.00		
TOTAL EXPEN			
(Add line 4 from			

0.00

CONTRIBUTIONS

Less than \$250

\$250 or more

Date	Full Name	Amount	Date			Amount		
	N/A			Full Name: Address:				
<u> </u>				Contributor's job: (Individual) Where works: (Individual) Affiliation: (Political committee)				
				Full Name: Address:				
				Contributor's job: (Individual) Where works: (Individual) Affiliation: (Political committee)				
				Full Name: Address:				
				Contributor's job: (Individual) Where works: (Individual) Affiliation: (Political committee)				
				Full Name: Address:				
				Contributor's job: (Individual) Where works: (Individual Affiliation: (Political committee)				
	Check if additional pages have been atached.			Total Contribution (add both columns	is:			
ITEMIZED EXPENDITURES								
Date	Full name, residence address (if person	n); business ac	idress (if firm) Purpo	ose	Amount		
	N/A							
	AS MANY COPIES			Total Evr	enditures:			
OF TH	IS PAGE AS YOU NEED.		*********	TOTAL EXP	enditures:			
		OATH OF	RAFF	TRMATION				
I, Charles 'Chuck" Smill, 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								
Date 10 200 6 .								
	Office Use Only							
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	BECEINEG							



SMITH, COCHRAN & HICKS, P.L.L.C. CERTIFIED PUBLIC ACCOUNTANTS 405 CAPITOL STREET, SUITE 908 CHARLESTON, WEST VIRGINIA 25301

To: SECRETARY OF STATE
BLDG. 1, SUITE 157-K
1900 KANAWHA BLVD. EAST
CHARLESTON, WV 25305-0770