# State of West Virginia Campaign Financial Statement (Short Form) in Relation to 2006 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 YOUR CAMPAIGN FINANCE 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 account interest or transferred funds from a previous campaign?
- 4. Do you have any unpaid bills?
- 5. Have you or anyone else given an in-kind contribution to your campaign?

Candidate or Committee Name  Political Party (for candidates)		Candidate or Con	mmittee's Treasurer 30 + 13 9 ling Address (Street,	
	trict/Division	TOAULS City, State, Zip C	26260 Code	304 - 637 - 061 8 Daytime Phone #
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 Saturda within 6 days the	riod (check one ay in March or reafter. This is the rrent election year	Pre-primary Re (Due 10 to 17 d	ays Due 25 to 31days
First General Report (Due first Saturday in September or within 6 days thereafter)  Amended Report (check if applicable) You must also check box of appropri-	Pre-general Re (Due 10 to 17 d before general special election	ays or n)	Post-general Rep (Due 25 to 31 day after general or special election)	(Zero balance required. PAC must also file Form F-6 Dissolution)
ate reporting period	DEDO			so be final report if "0"balance

### REPORT TOTALS

(Fill in totals after you have completed page 2)

### Totals for this period

RECEIPTS 1. Total Contributions (Schedule 1A)	175
EXPENDITURES 2. Total Expenditures (Schedule 1B)	1527.20

### CASH BALANCE SUMMARY

A. Beginning Balance (ending balance from previous report	1351.11
B. Total Receipts (Line 1)	175.00
C. Subtotal (Add lines A & B)	1526.11
D.Total Expenditures (Line 2)	1527.20
E. Ending Balance (Subtract line D from line C)	-1.09
*Cannot be neg	ative balance

TOTAL RECEIPTS
ELECTION YEAR-TO-DATE
(Add line B from all reports)

7366.24

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

7475.60

### **SCHEDULE 1A**

### **CONTRIBUTIONS**

\$250 or more

\$250 or less

Date	Full Name	Amount	Date	Amount
10/9	Brevantosac	100	Full Name: Address:  Contributor's job: (Individual) Where works: (Individual) Affiliation: (Political committee)	
io	KATHY WALLOCK	25		
10/19	SARSHFLERRY	50	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:	
		#5	Contributor's job: (Individual) Where works: (Individual Affiliation: (Political committee)	
		,	TOTAL	175
				16 ( )

(both columns)

### Schedule 1B

### ITEMIZED EXPENDITURES

Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount
9/30	BANKONEICHASE PU BUY 113 Charleston	Service for	8-00
10/4	RNOY White 273 RUE DRUE WEBSTER SPRINGS 26284	9 EN. Election 2000	100 ∞
	tal Hurchius 86 Stammhure Wheeling 26003	9 EU ELECTION 2006	10000
	(374 14 948) 126-128 MG 32869	920 Election	LOU ou.
	ERIC ANDRESON BLUB HUNTING TON 25705	SEVIESECTIÓN	2000
	AS MANY COPIES S PAGE AS YOU NEED.	TOTAL	418

**OATH OR AFFIRMATION** 

	, swear or affirm that the attached statement is true and ncial transactions occurring within the period covered by this
statement.	Signature of Candidate, Agent, or Treasurer
Date, 200	Office Use Only

### SCHEDULE 1A

### **CONTRIBUTIONS**

PA 92 [[Schepus

\$250 or more

\$250 or less

Date	Full Name	Amount	Date	Amount
Date	, un realite		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)	
			Euil 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)	
				TOTAL
				(both columns)

### Schedule 1B

### ITEMIZED EXPENDITURES

Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount
10/4/61		9EU Erection Zecto	10000
7	KEVIN MAYNUS PO AW 5333 BECKLY WY 25KU	980 ELEGAOU 2000	10000
1	NANCE GUTHRIQ 5300 KANANNA CHANCESTON 2530H	9en Election 2006	(00 <del>sa</del>
	BARBAR WATTIELD 3 WILBUR DRS. Charleston 25303	GEN. Election	20000
	+ IN MILEY VIEW RULL BOLLEGEPONT 26830	9EN Election	too
-	AS MANY COPIES IS PAGE AS YOU NEED.	TOTAL	(10000

### **OATH OR AFFIRMATION**

I, correct, to the best of my knowledge, of all financi statement.	, swear or affirm that the attached statement is true and all transactions occurring within the period covered by this
	Signature of Candidate, Agent, or Treasurer
Date, 200	Office Use Only

### **SCHEDULE 1A**

### **CONTRIBUTIONS**

PAGE III Schabule

\$250 or more

\$2	50	ОГ	les

Date	Full Name	Amount	Date		Amount
				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)	
				Full Name: Address:	
				Contributor's job: (Individual) Where works: (Individual Affiliation: (Political committee)	
			<b></b>	TOTAL	-
				(both columns	s I

Schedule 1B

### ITEMIZED EXPENDITURES

		_	AA
Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount
194	Stan Swaver Rti pour 478 tunnertour 26444	genine steam	2000
10/4	US BUST MASTER	Contitues	477
10/9	Brenda ISSAC 1410 Lyndale W. Charleston 25311	Starys	3900
	WENA POY1946 Charleston WA 25327	Pressiont. Setup	<b>ネ8: 75</b> で
	Stavance Lavy Poroux 1940 Charle steel 25827	7N+ELVIEW E+NEUSES	236 68
	AS MANY COPIES IS PAGE AS YOU NEED.	TOTAL	509.20

## OATH OR AFFIRMATION

I, SARAT TFLESCUSC. si correct, to the best of my knowledge, of all financial trastatement.	wear or affirm that the attached statement is true and insactions occurring within the period covered by this
Date 10/28, 20006.	Signature of Candidate, Agent, or Treasurer  Office Use Only  19:8: NJ 08:130:90
	BEGEINED

# 



West Virginia Nurses Policital Action Committee c/o Sarah T. Fletcher, RN, Treasurer HC 70 Box 139 Davis, Wv 26260-9706 To Secretary of State
Bldg. 1 Suite 157-K
1900 Kanawha Blvd
Charleston, WV 25305-0770

