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.

Candidate or Committee's Treasurer

- 1. Has your committee received any loans?
- 2. Has your committee held any fundraisers?

Candidate or Committee Name

- 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?

Marion County Education As	sociationPaC	Kathy Jacquez				
Political Party (for candidates	s)	Treasurer's Mailing Address (Street, Route or P.O. Box) PO Box 4 611 Ice St.				
Office Sought (for candidates	s) District/Division	City, State, Zip Code Barrackville, WV 26559	Daytime Phone # 304-366-0020			
Election Cycle F Primary - First Report Due March 25- 31, 2006 General - First Report Due Sept. 2- 8, 2006	Reporting Period (che Pre-primary Report Due April 22- 29, 20 Pre-general Report Due Oct. 21- 28, 20	Post-primary Report Due June 3- 9, 2006	Check if Applicable: Amended Report You must also check box of appropriate reporting period			
		rtCalendar Year urday in March or thereafter	Final Report 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) Total Contributions (from Page 2)			3,982.28	Т
		+ 0.00		EI (.
Subtotal (lines 1+2)	3.	=	3982.28	<u> </u>
Total Expenditures (from Page 2)	4.	_ 0.00		EL (/
Ending Balance (lines 3-4)			3,982.28	
*Cannot have a negative ending balance			e	

ELECT	TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE (Add line 2 from all reports)			
	1,041.00			
	AL EXPENDITURES TON YEAR-TO-DATE			
	ine 4 from all reports)			
	0.00			

Less than \$250

\$250 or more

Date	Full Name	Amount	Date				Amount		
				Full Name: Address:					
				Contributor's job: (Individual) Where works: (Individual) Affiliation: (Political committee)					
			-	Full Name: Address:					
				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 Check if additional pages have been atached. Total Contributions: (add both columns)			(0.00				
ITEMIZED EXPENDITURES									
Date	Full name, residence address (if perso	on); business a	ddress	(if firm)	Purpose	•	Amount		
	 								
			- W						
									
	AS MANY COPIES S PAGE AS YOU NEED.			*	Total Expend	litures:	0.00		
		OATH O	R AFF	FIRMATION					
	17								
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.									
ĵ	tent, agrequired by vest virginia	Code 33-0-	oa.						
Signature of Candidate, Agent, or Treasurer									
Date_	<u>1)ec 4</u> 200 6.	\mathcal{O}			Office Use Onl	\ <u>\</u>			
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	DEC 0 7 2006								
					Added to on the				



Secretary of State

BIDS. 1 Suite 157-K

1900 tanawha BIDD. East

(harleston W) 25305-0770