State of West Virginia Campaign Financial Statement (Short Form) in Relation to the 2008 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 Mercer County Education Association PAC	Candidate or Committee's Tre Janice L. Williams	Candidate or Committee's Treasurer Janice L. Williams Treasurer's Mailing Address (Street, Route or P.O. Box) 4023 Honaker Avenue			
Political Party (for candidates) NA					
Office Sought (for candidates) District/Div	,	City, State, Zip Code Daytime Phone # Princeton, WV 24740 304 384 7586			
General - First Report Due Sept. 22 - 26, 2008 Pre-general Due Oct. 20 Annu Annu	Report Post-primary Report Due May 26 - 30, 2 Report Post-general Report	You must also che box of appropriate reporting period			

REPORT TOTALS

(Fill in totals after you have completed page 2)

CASH BALANCE SUMMARY

Beginning Balance (ending balance from previous report)	1.		537.98			
Total Contributions (from Page 2)	2.	+	1,940.01			
Subtotal (lines 1+2)	3.	==	2,477.99			
Total Expenditures (from Page 2)	4.	_	0.00			
Ending Balance (lines 3-4)		=	2,477.99			
*Cannot have a negative ending balance						

1,940.01
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2,477.99

CONTRIBUTORS OF:

\$250 or less

More than \$250

Date	Full Name	Amount	Date		Amount
			11/7/08	Full Name: WVEAPAC Address: Quarrier Street Charleston, WV Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee) members reimbursement	1,940.01
				Full Name: Address:	
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
				Full Name: Address:	
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
				Full Name: Address:	
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
	Check if additional pages			Total Contributions: 1940.01 (add both columns)	
	itemizer Evpenditues	/Itomino	2		
Date	Full name, residence address (if person			arty expenditures/ reimbursements) if firm) Purpose	Amount
					
l					
MAKE.	AS MANY COPIES			Total Expenditures:	
OF THI	S PAGE AS YOU NEED.			rotal Expenditures:	0.00
-	T. 1.	OATH O	R AF	FIRMATION	
correc	JAMICE WILLIAMS It, to the best of my knowledge, for	all financ	ial tra	vear or affirm that the attached statement in sactions occurring within the period cover	s true and ed by this
Staten	nent, as required by West Virginia C	,oae 33-8-	oa.		
\subseteq	fance S. William	No		Signature of Candidate, Agent,(or	Treasurer
Date_	4-4,2008			SIMIE OF WEST MRGINIA	
	 			Office Use Only	
				SI:SIM9 V- A9A 800S	
				Received By:	

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Office of the Secretary of State Building 1, Suite 157-K, Churk Flannerg 1900 Kanawha Blvd., East Charleston, MV 25305