## 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 Monuse County	Candidate or Committee's Treasurer
Republican Cheritani, Camminetos	Candy Gordon
Political Party (for candidates)	Treasurer's Mailing Address (Street, Route or P.O. Box)
	145 B Strady Apt. 4
Office Sought (for candidates) District/Division	City, State, Zip Code Daytime Phone #
	Kennen. W.11. 204-088-5652
Election Cycle Reporting Period (che	
Primary - First Report Due March 29 - April 4, 2008  Pre-primary Report Due April 28 - May 2,	2008 Due May 26 - 30, 2008 You must also check
General - First Report Due Sept. 22 - 26, 2008  Pre-general Report Due Oct. 20 - 24, 200	08 Due Nov. 17 - 21, 2008
Non-Flection Cycle Annual Repor	rt Due in Calendar Year

## REPORT TOTALS

(Fill in totals after you have completed page 2)

## CASH BALANCE SUMMARY

Beginning Balance (ending balance from previous report) 1.	#3132.09
Total Contributions (from Page 2) 2.	+ 40,00
Subtotal (lines 1+2) 3.	= \$3172.09
Total Expenditures (from Page 2) 4.	- 169.80
Ending Balance	= \$30D2,29
*Cannot have a negativ	ve ending balance

TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE (Add line 2 from all reports)	
94166.00	
TOTALEXPENDITURES ELECTION YEAR-TO-DATE	

(Add line 4 from all reports)

## **CONTRIBUTORS OF:**

\$250 or less

More than \$250

	\$250 or less				More than \$250		
Date	Full Name	Amount	Date			Amount	
<sup>5</sup> /23	Andries Frey	How		Full Name: Address: Contributor's job: (Individ Where contributor works Affiliation: (Political comm	lual) s: (Individual) nithe)		
				Full Name:			
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				Full Name: Address:	,		
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	Check if additional pages ave been atached.			Total Co (add bot	ntributions: 846 h columns)	, CE	
	ITEMIZED EXPENDITUR	RES (Itemize	3rd p	earty expenditures	/ reimbursements)		
Date	Full name, residence address (if p	erson); business a	ddress	(if firm)	Purpose	Amount	
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			<del></del>				
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	AS MANY COPIES S PAGE AS YOU NEED.		*		Total Expenditures	169,80	
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/	ANNY GORDON			<b></b>			
orrect tatem	t, to the best of my knowledge, ent, as required by West Virgini	for all financi	ial tra	rear or affirm that the insactions occurring	he attached stateme within the period c	ent is true and overed by this	
	Candy Surdon	/		Signature	e of C <del>andida</del> te, A <del>gen</del>	t, or Treasure	
Date	May 26, 2008						
					Office Use Only		
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				Received	14Bx:6S 41H 0007		
				Receiver	14 <b>p</b> a:25		

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Don & Candy Gordon 65 B St. leyser, WV 26726-2613





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