State of West Virginia Campaign Financial Statement (Short Form) in Relation to 2010 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?

West Virginia Funeral Din	ame ectors Association – PAC	Candidate or Committee's Treasurer Mark A. Tomblyn					
Political Party (for candidat Office Sought (for candidat		Treasurer's Mailing Address (Street, Route or P.O. Box) P. O. Box 223 City, State, Zip Code Daytime Phone #					
		Elkins, WV 26241-0223	304-636-5595				
Election Cycle Primary - First Report Due March 27-April 2,2010 General - First Report Due Sept. 20-24, 2010	Pre-general Report Due Oct. 18-22, 2010	Post-primary Report Due May 24-June 23, 2010 Post-general Report Due Nov 15-Dec 15, 2010	Check if Applicable: Amended Report You must also check box of appropriate reporting period				
Non-Election Cycle Reporting Period:		rt Due In Calendar Year urday in March or within 6 er	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)			\$ 465.87		
Total Contributions (from Page 2)		+	\$.00		
Subtotal (lines 1+2)	3.	=	\$ 465.87		
Total Expenditures (from Page 2)		_	\$ 0.00		
Ending Balance (lines 3-4)		=	\$ 465.87		
*Cannot have a negative ending balance					

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

\$2,675.00

TOTAL EXPENDITURES
ELECTION YEAR-TO-DATE

(Add line 4 from all reports)

CONTRIBUTORS OF:

\$250 or Less

More than \$250

	\$250 Of Less			INIC	ore than \$250			
Date	Full Name	Amount	Date				Amount	
				FullName: Address:				
	***************************************		1	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)				
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				Full Name: Address:				
				Contributor's job: (Individ Where contributor works Affiliation: (Political comm				
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	ave been atached.			(add bott	i columns) ==			
	ITEMIZED EXPENDI	TURES (Item	ize 3r	d parv expenditur	es/ reimbursei	ments)		
Date	Full name, residence address (if p				Purpose		Amount	
			<u>.</u>					
				<u>. </u>				
MAKE	AS MANY COPIES							
	S PAGE AS YOU NEED.			-	Total Expendit	ures:	\$0.00	
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	lark A. Tomblyn	of all finance	, SV	vear or affirm that t	he attached sta	tement is t	true and	
statem	t, to the best of my knowledge ent, as required by West Virgin	ia Code §3-8-	iai tra 5a.	risactions occurring	i wimin me peni	od covered	a by this	
. 5		7						
<u> </u>				Signature	e of Candidate, A	Agent, or Tr	reasure	
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					Office Use Only			
					ZEH 1001. SS			
				Receiv	red By:			

WVFDA-PAC

815 Quarrier Street, Suite 345 Charleston, WV 25301-2645



The Office of the Secretary of State
The Honorable Natalie E. Tennant
Elections Division
Bldg. 1, Suite 157-K
1900 Kanawha Blvd. East
Charleston, WV 25305-0770

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