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?

Candidate or Committee Na	ne	Candidate or Committee's Treasurer			
UMWA LOCO	1 5958				
Political Party (for candidates)		Treasurer's Mailing Address (Street, Route or P.O. Box)			
		14F Wheatler Br.R	ġ.		
Office Sought (for candidate	s) District/Division	City, State, Zip Code	Daytime Phone #		
		Chromanville Wil 2550	1 JUP-228-40E X		
Election Cycle Primary - First Report Due March 27-April 2.2010 General - First Report Due Sept. 20-24, 2010	Reporting Period (che Pre-primary Report Due April 26-30, 2010 Pre-general Report Due Oct. 18-22, 2010	Post-general Report Due Nov 15-Dec 15, 2010	Check if Applicable: Amended Report You must also check box of appropriate reporting period		
		ort Due In Calendar Year turday in March or within 6 fter	Final Report Zero balance required PAC must also file Form F-6 Dissolution		
	RE	PORT TOTALS			

(Fill in totals after you have completed page 2)

CASH BALANCE SUMMARY

Beginning Balance (ending balance from previous report)	1.	#456332		
Total Contributions (from Page 2)	2.	+ - 0-		
Subtotal (lines 1+2)	3.	= 4456332		
Total Expenditures (from Page 2)	4.	_ ~ 0 ~		
Ending Balance (lines 3-4)		= \$456333		
*Cannot have a negative ending balance				

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

TOTAL EXPENDITURES ELECTION YEAR-TO-DATE (Add line 4 from all reports)

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Chapmanulle WU, 25508



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(900 Konsumber Bind East
Chambridge Will District 157-K

AMERICAN CONTROL OF CO

CONTRIBUTORS OF:

\$250 or Less

More than \$250

Date	Full Name	Amount	Date			Amount
	NA			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: (Individ Where contributor works Affiliation: (Political come					
				Full Name: Address:		
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)		
	Theck if additional pages nave been atached.			Total Contributions: (add both columns)	- 0	
		OITURES (Itemi	ze 3r	d pary expenditures/ reimburs	sements)	
Date	Full name, residence address (i	f person); business ac	ddress	(if firm) Purpose		Amount
	NA					
			 			
		11				
	AS MANY COPIES IS PAGE AS YOU NEED.			Total Expend	ditures:	-0-
		OATH O	R AF	FIRMATION		
i				waar ar affirm that the attached c	statomont is	e truo and
	•	ge, of all financi	ial tra	vear or affirm that the attached s nsactions occurring within the pe		
stater	nent, as required by West Virg	inia Code §3-8-	5a.			
K	with with			Signature of Candidate	e Agent or	Treasurer
Data	11/18/10 20			- Januara -	or sign	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Date_	, 20			Office Use On	ly	
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				Received Ry	14.4	