State of West Virginia Campaign Financial Statement (Short Form) in Relation to 2014 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 HARRISON COUNTY Democra Political Party (for candidates)	atic Executive Committe	Candidate or Committee's Treasurer Adela M Cortes Treasurer's Mailing Address (Street, Route or P.O. Box)		
Office Sought (for candidates)	District/Division	898 EAST Ave	Daytime Phone #	
Primary - First Report Due March 29-April 4, 2014 General - First Report	porting Period (che Pre-Primary Report Due April 28-May 2, 2014 Pre-General Report Due October 20-24, 2014	ck one): Post-Primary Report Due May 26-June 23, 2014 Post-General Report Due Nov. 17-Dec. 15, 2014	Check if Applicable: Amended Report You must also check box of appropriate reporting period Final Report	
Non-Election Cycle Reporting Period:		rt Due In Calendar Year urday in March or within 6 er	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) 1	-0-	TOTAL CONTRIBUTIONS		
Total Contributions (from Page 2) 2	. + 100.00	ELECTION YEAR-TO-DATE (Add line 2 from all reports)		
		100.00		
Subtotal ((lines 1+2)3	= 100.00	TOTAL EXPENDITURES		
Total Expenditures (from Page 2)	0-	ELECTION YEAR-TO-DATE (Add line 4 from all reports)		
Ending Balance (lines 3-4)	= 100.00	-0-		
*Cannot have a ne	gative ending balance			

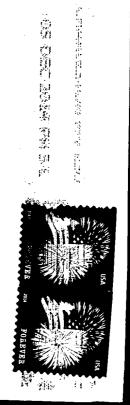
Ceneral - 1st CONTRIBUTORS OF: Narrisco Co Ex Comm

\$250 or Less

More than \$250

Date	Full Name	Amount	Date			Amount						
8/13/4	0 .1 0	100		Full Name: Address:	<u> </u>							
ifef	Anita Payne	100		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)								
				Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)								
	heck if additional pages ave been atached.			Total Cont (add both	ributions: 100 columns)	0.00						
	ITEMIZED EXPENDITU	RES (Item	ize 3r	d party expenditure	s/reimbursements)							
Date	Full name, residence address (if perso				Purpose	Amount						
			-		,							
		was the same of th										
			·									
	AS MANY COPIES S PAGE AS YOU NEED.			To	otal Expenditures:	-0-						
		OATH O	R AF	FIRMATION								
I,	Ade/A M ORGE t, to the best of my knowledge, onent, as required by West Virginia	f all financ Code §3-8-	ial tra	wear or affirm that the	e attached statement within the period cove	is true and ered by this						
Date	Signature of Candidate, Agent, or Treasure											
Dare_	, 20.1			AWERN TRANS OF STATE AND STATE								
				2014 DEC -8 PM I2: 28								
	Received By:											
		2	!		2 ZETABUH							

Harrison Co. Democratic Executive Committee 898 East Ave
Shinnston, WV 26431



The Office of the Secretary of State Bldg. 1, Suite 157-K 1900 Kanawha Blvd E Charleston, WV 25305

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