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.

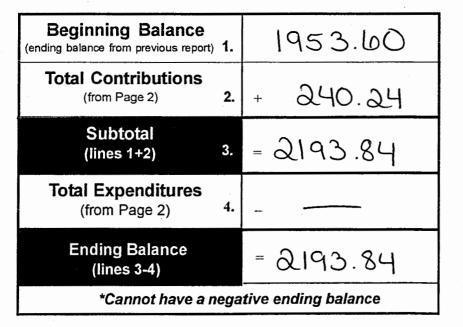
- 1. Has your committee received any loans ?
- 2. Has your committee held any fundraisers?
- 3. Has your committee received any miscellaneous receipts, such as refunds or checking account interest?
- 4. Does your committee have any unpaid bills?
- 5. Have you or anyone else given an in-kind contribution to your campaign?
- 6. Has your committee given or received a transfer of excess campaign funds?

Candidate or Committee N Harrison County		Candidate or Committee's Treasurer			
Association PA		Shannan Hines			
Political Party (for candidat	tes)	Treasurer's Mailing Address (Street, Route or P.O. Box)			
		2656 Lucas Rd.			
Office Sought (for candida	tes) District/Division	City, State, Zip Code Daytime Phone #			
		Shinnston, WV 26431	ੁਤ	04-376-3824	
Election Cycle	e Reporting Period (che	eck one):		and if Applicable	
Primary - First Report	Pre-Primary Report	Post-Primary Report		eck if Applicable:	
Due March 29-April 4, 2014	Due April 28-May 2, 2014	Due May 26-June 23, 2014		Amended Report You must also check	
General - First Report	Pre-General Report	Post-General Report		box of appropriate reporting period	
Due September 22-26, 2014	Due October 20-24, 2014	Due Nov. 17-Dec. 15, 2014			
				Final Report	
Non-Election Cycle Reporting Period:	Due last Sat	Annual Report Due In Calendar Year Due last Saturday in March or within 6 days the reafter		Zero balance required PAC must also file Form F-6 Dissolution	

REPORT TOTALS

(Fill in totals after you have completed page 2)

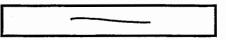
CASH BALANCE SUMMARY



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

240.24

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



Official Form F-7A

CONTRIBUTORS OF:

\$250 or Less		More than \$250				
Date	Full Name	Amount	Date			Amount
2/18	West Virginia Education Association PAC	હ્યા૦હ્ય		FullName: 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)		
				Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)		
Check if additional pages				Total Contributions: (add both columns)	240.	24

have been atached.

ITEMIZED EXPENDITURES (Itemize 3rd pary expenditures/reimbursements)

Date	Full name, residence address (if person); business address	i (if firm) Purpose	Amount
	AS MANY COPIES S PAGE AS YOU NEED.	Total Expenditure	es:

OATH OR AFFIRMATION

1, Shannan Hines I, Shannon Hines, swear or affirm that the attached statement is true and correct, to the best of my knowledge, of all financial transactions occurring within the period covered by this statement, as required by West Virginia Code §3-8-5a.

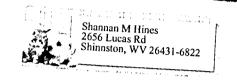
2

Date March 30 20 15

_____ Signature of Candidate, Agent, or Treasurer

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West Virginia Secretary of State Building 1, Suite 157-K 1900 Kanawha Blvd., East Charleston, WV 25305

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