

# 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<br><i>Barbour County Educ. Assoc.</i> |                   | Candidate or Committee's Treasurer<br><i>James Poling</i>                                  |  |
| Political Party (for candidates)                                  |                   | Treasurer's Mailing Address (Street, Route or P.O. Box)<br><i>1272 Meadowville Fort Rd</i> |  |
| Office Sought (for candidates)                                    | District/Division | City, State, Zip Code<br><i>Montrose WV 26283</i>  | Daytime Phone #<br><i>304-591-2139</i> |

**Election Cycle Reporting Period (check one):**

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> <b>Primary - First Report</b><br>Due March 29-April 4, 2014 | <input type="checkbox"/> <b>Pre-Primary Report</b><br>Due April 28-May 2, 2014 | <input type="checkbox"/> <b>Post-Primary Report</b><br>Due May 26-June 23, 2014             |
| <input type="checkbox"/> <b>General - First Report</b><br>Due September 22-26, 2014  | <input type="checkbox"/> <b>Pre-General Report</b><br>Due October 20-24, 2014  | <input checked="" type="checkbox"/> <b>Post-General Report</b><br>Due Nov. 17-Dec. 15, 2014 |

**Check if Applicable:**

- Amended Report**  
You must also check box of appropriate reporting period
- Final Report**  
**Zero balance required.**  
PAC must also file Form F-6 Dissolution

**Non-Election Cycle Reporting Period:**

- Annual Report Due In \_\_\_\_\_ Calendar Year**  
Due last Saturday in March or within 6 days thereafter

## REPORT TOTALS

(Fill in totals after you have completed page 2)

### CASH BALANCE SUMMARY

|  |                 |
|--|-----------------|
| <b>Beginning Balance</b><br>(ending balance from previous report) 1. | <i>467.91</i>   |
| <b>Total Contributions</b><br>(from Page 2) 2.                       | + <i>—</i>      |
| <b>Subtotal</b><br>(lines 1+2) 3.                                    | = <i>467.91</i> |
| <b>Total Expenditures</b><br>(from Page 2) 4.                        | - <i>—</i>      |
| <b>Ending Balance</b><br>(lines 3-4)                                 | = <i>467.91</i> |
| <b>*Cannot have a negative ending balance</b>                        |                 |

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

*669.13*

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

*1160.16*

CONTRIBUTORS OF:

\$250 or Less

More than \$250

| Date | Full Name | Amount | Date | Full Name:<br>Address:   | Amount |
|------|-----------|--------|------|--|--------|
|      |           |        |      | Contributor's job: (Individual)<br>Where contributor works: (Individual)<br>Affiliation: (Political committee) |        |
|      |           |        |      | Contributor's job: (Individual)<br>Where contributor works: (Individual)<br>Affiliation: (Political committee) |        |
|      |           |        |      | Contributor's job: (Individual)<br>Where contributor works: (Individual)<br>Affiliation: (Political committee) |        |
|      |           |        |      | Contributor's job: (Individual)<br>Where contributor works: (Individual)<br>Affiliation: (Political committee) |        |
|      |           |        |      | Contributor's job: (Individual)<br>Where contributor works: (Individual)<br>Affiliation: (Political committee) |        |

Check if additional pages have been attached.

Total Contributions: (add both columns)

[Empty box for Total Contributions]

ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/reimbursements)

| Date | Full name, residence address (if person); business address (if firm) | Purpose | Amount |
|------|--|---------|--------|
|      |  |         |        |
|      |  |         |        |
|      |  |         |        |
|      |  |         |        |
|      |  |         |        |

MAKE AS MANY COPIES OF THIS PAGE AS YOU NEED.

Total Expenditures:

[Empty box for Total Expenditures]

OATH OR AFFIRMATION

I, James Paluy, 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.

James Paluy Signature of Candidate, Agent, or Treasurer

Date 12/4/14, 20 14.

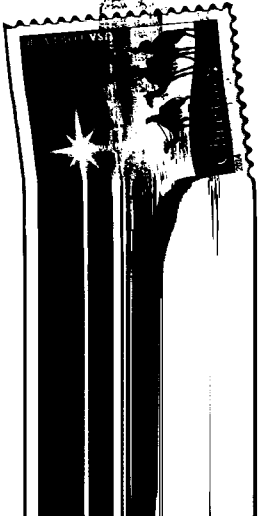
Office Use Only  
 STATE OF WEST VIRGINIA  
 SECRETARY OF STATE  
 2014 DEC -8 PM 12:26  
 Received By: \_\_\_\_\_

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1272. Meadowville Firt Rd  
Montrose Wv 26083

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Building 1, Suite 157-K  
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Charleston WV 25305

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