## State of West Virginia Campaign Financial Statement (Short Form) in Relation to 2016 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?

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		
Election Cycle Reporting Period (check Primary - First Report Due March 26 - April 1, 2016  General - First Report Due September 26 - 30, 2016  Pre-Primary Report Due April 25 - 29, 2016  Pre-General Report Due October 24 - 28, 2016		Post-Primary Report Due May 23 - June 21, 2016  Post-General Report Due Nov. 21 - Dec. 19, 2016	Check if Applicable:  Amended Report You must also check box of appropriate reporting period  Final Report		
Office Sought (for candidat	es) District/Division	1272 Meadowville City, State, Zip Code Montrose WV 26263	Ki/+ Kd Daytime Phone # 304-591-2139		
	duc. Association	Teasurer's Mailing Address (Street, Route or P.O. Box)			
Candidate or Committee Na	me	Candidate or Committee's Treasurer			

## REPORT TOTALS

(Fill in totals after you have completed page 2)

## CASH BALANCE SUMMARY

Beginning Balance (ending balance from previous report) 1.		992.65			
Total Contributions (from Page 2)	2.	+ 164.24			
Subtotal (lines 1+2)	3.	= 1156.89			
Total Expenditures (from Page 2)	4.	- 250.00			
Ending Balance (lines 3-4)		= 906.89			
*Cannot have a negative ending balance					

TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE (Add line 2 from all reports)				
164.24				
TOTAL EXPENDITURES				

(Add line 4 from all reports)

## **CONTRIBUTORS OF:**

\$250 or Less

More than \$250

Date	Full Name	Amount	Date				Amount				
3/14/6	WVEA	16421		Full Name: Address:							
	W + E 7 3			Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)							
				Full Name: Address:							
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				Full Name: Address:							
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				Full Name: Address:							
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)							
Total Contributions: (add both columns)											
ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/reimbursements)											
Date	Full name, residence address (if person				Purpose		Amount				
Nagle	& Wr Family Values				Donatio	,	150.00				
,	0				•						
	AS MANY COPIES S PAGE AS YOU NEED.				Total Expend	ditures:	Soci				
		OATH OF	RAF	FIRMATION							
	0										
I,	James Polins	-U. 6	_, sv	vear or affirm that t	he attached	statement is	s true and				
	t, to the best of my knowledge, of ent, as required by West Virginia C			insactions occurring	within the p	erioa coveri	ea by this				
12 ans Mills											
Signature of Candidate Agent, or Treasurer											
Date_	te / 4/1/6 20 1/6 .										
	office Use Only 9/02 8/ 8/ 8/ 8/ 8/ 8/ 8/ 8/ 8/ 8/ 8/ 8/ 8/										
	BECEINE										
	Received By:										

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CHEST SECTION

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Charleston wu assas-6770

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