

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 KANAWHA FEDERATION OF TEACHERS COPE		Candidate or Committee's Treasurer STEVEN W SHAMBLIN, TREASURER	
Political Party (for candidates)		Treasurer's Mailing Address (Street, Route or P.O. Box) 1610 WASHINGTON ST. E, STE 200	
Office Sought (for candidates)	District/Division	City, State, Zip Code CHARLESTON, WV 25311	Daytime Phone # 304.344.2679

Election Cycle Reporting Period (check one):

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

Beginning Balance (ending balance from previous report) 1.			7,342.61
Total Contributions (from Page 2) 2.	+		3640.50
Subtotal (lines 1+2) 3.	=		10,983.11
Total Expenditures (from Page 2) 4.	-		8000.00
Ending Balance (lines 3-4)	=		2,983.11
*Cannot have a negative ending balance			

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

10,899.00

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

17,852.75

CONTRIBUTORS OF:

\$250 or Less

More than \$250

Date	Full Name	Amount	Date	Full Name	Amount
			9/24/14	Full Name: AFT WV COPE Address: 1610 WASHINGTON ST, CHARLESTON, WV 25311 Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee) REBATE - COPE	3640.50
				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)	

Total Contributions: (add both columns) 3640.50

Check if additional pages have been attached. PAGE 1 OF 2

ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/reimbursements)

Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount
9/24/14	FLOWERS FOR WV PO BOX 1108 LEWISBURG, WV 24901	CONTRIBUTION	1000.00
9/24/14	COMMITTEE TO ELECT BOBBIE HATFIELD 3 WILBUR DR 50. CHARLESTON, WV 25303	CONTRIBUTION	1000.00
9/24/14	NANCY GUTHRIE FOR HOUSE 5300 KANAWHA AVE CHARLESTON, WV 25304	CONTRIBUTION	1000.00
9/24/14	NANCY JAMISON 4 WV HOUSE PO 265 DELSLEW, WV 26531	CONTRIBUTION	1000.00
9/24/14	WVNG FOR WV PO BOX 145 - 1111 FLEDDERJCHS RD CHARLESTON, WV 25314	CONTRIBUTION	1000.00

MAKE AS MANY COPIES OF THIS PAGE AS YOU NEED. SUB-Total Expenditures: 5000.00 CONT.

OATH OR AFFIRMATION

I, _____, 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.

Signature of Candidate, Agent, or Treasurer

Date _____, 20____.

Office Use Only

Received By: _____

CONTRIBUTORS OF:

\$250 or Less

More than \$250

Date	Full Name	Amount	Date	Full Name: Address:	Amount
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	

Total Contributions: (add both columns)

Check if additional pages have been attached. **PAGE 2 OF 2**

CONT. - ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/reimbursements)

Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount	PREV BAL
4/24/14	COMMITTEE TO REELECT ADAM YOUNG 207 MAIN ST. SUMMERSVILLE, WV 26051	CONTRIBUTION	1000.00	5000.00
10/8/14	MIKE PUSHKIN FOR HOUSE 411 B RANDOLPH ST CHARLESTON, WV 25302	CONTRIBUTION	1000.00	
10/8/14	SALLY SHEPHERD FOR HOUSE 1273 HAINES BRANCH RD SISSONVILLE, WV 25320	CONTRIBUTION	1000.00	

MAKE AS MANY COPIES OF THIS PAGE AS YOU NEED.

Total Expenditures: **8000.00**

OATH OR AFFIRMATION

I, STEVEN W SHAMBUN, 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.

Steven W Shambun Signature of Candidate, Agent, or Treasurer

Date 22 OCTOBER, 2014.

Office Use Only
STATE OF WEST VIRGINIA
SECRETARY OF STATE
2014 OCT 24 PM 4:03
Received By: _____