State of West Virginia Campaign Financial Statement (Short Form) in Relation to the 2015 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		Candidate or Committee's Treasurer				
	Lincoln Colepublican Exection.	M	Phyllis J Ashworth				
	Political Party (for candidates)		Treasurer's Mailing Address (Street, Route or P.O. Box)				
			686State St.				
	Office Sought (for candidates) District/Divi	sion			hone#		
			Hamlin WV-25523 30482	<u>4.3</u>	102		
Election Cycle Reporting Period (check Primary - First Report Due last Saturday in March or Pre-primary Report Due 15 days preceding primary			Post-primary Report	Che	eck if Applicable: Amended Report		
	within 6 days thereafter. General - First Report Due 43 days preceding general Due 15 days preceding the 1 days	ort ing general	Due 13 days following general election		You must also check box of appropriate reporting period		
		after. or within 20 dusiness days thereafter. Due In <u>2015</u> Calendar Year rday in March or within 6 days		Final Report Zero balance required. PAC must also file Form F-6 Dissolution			
		REP	ORT TOTALS				

(Fill in totals after you have completed page 2)

CASH BALANCE SUMMARY

Beginning Balance (ending balance from previous report)	1.		744.57	
Total Contributions (from Page 2)	2.	+	149.00	
Subtotal (lines 1+2)	3.	=	893.57	
Total Expenditures (from Page 2)	4.	_	510.00	
Ending Balance (lines 3-4)		11	383.57	
*Cannot have a negative ending balance				

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

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

3536.90

CONTRIBUTORS OF:

Page 2 CONTRIBUTORS OF.							
\$250 or Less More than \$250							
Date	Full Name	Amount	Date	FullName:			Amount
1218	14 Lang Parley	20.00		Address:			
1218	Roan McComa	4.00		Contributor's job: (Individu Where contributor works: Affiliation: (Political comm	ual) : (Individual) iíttee)		
(219	Min Lawrence.	5.00		FullName: Address:			
1218 Change and Cook S.00 Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)							
1218	Howard Spray (5.60		Full Name: Address:			
1218	Michael Mathitt	50.00		Contributor's job: (Individ Where contributor works Affiliation: (Political comm	ual) : (Individual) nittee)		
2/24	15 Lisa Romey	5.00		Full Name: Address:		·	
212	5 John Loveray	5.00		Contributor's job: (Individe Where contributor works Affiliation: (Political comm	ual) : (Individual) nittee)	`	
 [ਹ] (V O) Check if additional pages have			Total Cor (add bot	ntributions: h columns)	4	9.00
	been atached.			·	,	• •	
		RES (Itemi	ze 3r	d party expenditur	res/reimburs	ements)	
Date	Full name, residence address (if persor	n); business ac	ldress ((if firm)	Purpose		Amount
Illight Roan McCanoo Reinberg						60.00	
	Qu And				Toy		SIL DA
12/11/14 Davy yongrass				Print	<u> </u>	50.00	
12/16	4 Howard Issa	ae			Rent		400.00
	Ţ			<u> </u>			
	AS MANY COPIES IS PAGE AS YOU NEED.			1	Total Expen	ditures:	510.0
		OATH OF	R AFF	IRMATION			
1, Phyllic D ashworth, 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.							
Bhylis Jahuronth Signature of Candidate, Agent, or Treasurer							
	2 20 15						
Date_							

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CONTRIBUTORS OF:

\$250 or Less				More than \$250			
Date	Full Name	Amount	Date		Amount		
22	15 Hervard Issuac	5.00		FullName: Address:			
2/2/	5 they Mullins	5.00		Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)			
212/1	- Hine Loverpey	5,00		FullName: Address:			
2/21	- John Barritt	5.00		Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)			
2/11	- String Porty	5.00		Full Name: Address:			
2/2/	5 Rogh Mc Comas	5.00		Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)			
2121	1 Then ye anna Brown			Full Name: Address:			
2121	" Blona Lowjoy	5.00		Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)			
	/ / Check if additional pages have			Total Contributions: (add both columns)			
\mathbb{Z}_{t}	beenatached.						

ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/reimbursements)

Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount
	r.		
AKE AS	MANY COPIES	Total Expenditures:	
	AGE AS YOU NEED.	rotar Expenditures:	

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_____.

Page 2

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CONTRIBUTORS OF:

\$250 or Less				More than \$250			
Date	Full Name	Amount	Date	· · · · · · · · · · · · · · · · · · ·	Amount		
26	5 Phylles ashworth	1 9 .00		FullName: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)			
				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)			
	Check if additional pages have been atached.			Total Contributions: (add both columns)			

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Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount		
	t-				
	MAKE AS MANY COPIES Total Expenditures:				

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Signature of Candidate, Agent, or Treasurer

Date_____, 20_____.

Page 2

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Mrs. Phyllis Ashworth 686 State St. Hamlin, WV 25523-1018



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