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 No Commi	es) Exec Coma	Candidate or Committee's Treasurer Hylis Jashworth Treasurer's Mailing Address (Street, Route or P.O. Box) 686 State St City, State, Zip Code Daytime Phone # Ham Lin WU2553 304-824-3707				
Election Cycle Primary - First Report Due March 29-April 4, 2014 General - First Report Due Sept. 22-26, 2014	Reporting Period (chec Pre-primary Report Due April 28-May 2, 2014 Pre-general Report Due Oct. 20-24, 2014	Post-general Report Due Nov. 17-Dec. 15, 2014	Check if Applicable: Amended Report You must also check box of appropriate reporting period			
Non-Election Cycle Reporting Period:	Annual Repor Due last Satu days thereafte	t Due In Calendar Year orday in March or within 6 er	Final Report Zero balance required. PAC must also file Form			

REPORT TOTALS

(Fill in totals after you have completed page 2)

CASH BALANCE SUMMARY

	Beginning Balance balance from previous report)	1.		1082.65		
To	otal Contributions (from Page 2)	2.	+	-320.00		
	Subtotal (lines 1+2)	3.	=	140265		
Т	otal Expenditures (from Page 2)	4.	—	658.08		
	Ending Balance (lines 3-4)		=	744.57		
	*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)

3026.90

CONTRIBUTORS OF:

\$250 or Less

More than \$250

	V220 0. 2000				•		
Date	Full Name	Amount	Date	Amount			
Ish	when I amo La resine	20.00		Full Name: Address:			
10/2	Mu John Youring	2500		Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)			
1-19	174 0011120000			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: (Individu Where contributor works: Affiliation: (Political comm			
	Check if additional pages have			Total Con	tributions:		
	been atached.			lada boti			<u> </u>
	ITEMIZED EXPENDITU	RES (Item	ize 3	rd nary expenditure	es/ reimburs	ements)	
Date					Purpose	1	Amount
\vdash			 				
<u> </u>							
<u> </u>							
<u> </u>							
		· · · · · · · · · · · · · · · · · · ·					
MAKE	AS MANY COPIES			-	Total Expend	litures:	
OF TH	IIS PAGE AS YOU NEED.			- New years			je nasta zastajuju i nasta je
		OATH O	RAF	FIRMATION			٠
				awaar ar affirm t	hat the attack	had stateme	ont ic truc
and o	correct, to the best of my knowledge	of all fina	ncial	, swear or affirm t transactions occurring	nat the attaching within the p	period cover	ed by this
state	ment, as required by West Virginia	Code §3-8	-5a.		•		
							
	<u></u>			Signatur	e of Candidat	e, Agent, or	ıreasurer
Date	, 20			-	Office Use	Only	
	•				Onice USB	Offiny	

CONTRIBUTORS OF:

Received By:

Page 2	\$250 or Less			More	e than \$250		
Date	Full Name	Amount	Date	Amount			
1//	14 Carol Miller	100.00	Full Name: Address:				
146	Cassie Miller 100,00 Contribute Where constitutions			Contributor's job: (Individu Where contributor works: Affiliation: (Political comm	ıal) (Individual) ittee)		
11/10/	1			Full Name: Address:			
19341	7 1 1 1 E 11			Contributor's job: (Individu Where contributor works:	(Individual)		
1934/	gryly Phyllis Ashworth 500			Affiliation: (Political comm			
10/24	Sherrelll Porter	10.00		Address: Contributor's job: (Individe	ual)		
10/24	Drug Mullins	15,00	- I More contributor works: (Individual)				
JUKY	Charlie Cook	16,00		Full Name: Address:			
10/24	Howard Issaac	30.00		Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)			
Check if additional pages have been atached. Total Contributions: 320.00							
	ITEMIZED EXPENDITU	RES (Item	ize 3	rd pary expenditure	es/ reimburs	ements)	
Date	Full name, residence address (if person)	; business add	lress (if	firm)	Purpose		Amount
16/27 MDPH Charter 733, Harts WV 25524 Vet					Deterar	~~ ~~	100.00
10/21	Reindurse 500.00						
Remolyana						58,08	
	AS MANY COPIES S PAGE AS YOU NEED.				Total Expend	litures:	58.08
	en de la composition	OATH O	RAF	FIRMATION	Transference (1994)	The second	The second secon
I, Phyllis J 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.							
Phyllis of Candidate, Agent, or Treasurer Date 12-5-14 20 WINDHA ISBN 40 31VIS							
Date 12-5-19, 20 . HINE Use Only 18-18					35		
					8S :11 MA	6-030	34107
				i			1

WV Secretary of State 181dg. I, Scute 157-K 1900 Mamowha 181d., East Charleston WV 25305 いののとしいいのののの