

State of West Virginia Campaign Financial Statement (Long Form) in Relation to the 2014 Election Year

Candidate or Committee Name <i>Marion County Democrat Exec Comm</i>		Candidate or Committee's Treasurer <i>Ron Pearse</i>	
Political Party (for candidates) <i>Democrat</i>		Treasurer's Mailing Address (Street, Route or P.O. Box) <i>PO Box 813</i>	
Office Sought (for candidates)	District/Division	City, State, Zip Code <i>Fairmont WV 26555</i>	Daytime Phone # <i>304-641-2394</i>

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 at the completion of the report.

RECEIPTS OF FUNDS:

Totals for this Period

Contributions (Page 3)	<i>2000.00</i>
Monetary Contributions from all Fund-Raising Events (Page 4)	+
Receipt of a Transfer of Excess Funds (Page 8)	+
Total Monetary Contributions:	= <i>2000.00</i>
In-Kind Contributions (Page 5)	+
Total Contributions:	=

CASH BALANCE SUMMARY

Beginning Balance (ending balance from previous report)	<i>512.59</i>
Total Monetary Contributions	+ <i>2000.00</i>
Total Other Income	+
Subtotal:	a. = <i>2512.59</i>

Other Income (Page 5)	
Loans Received (Page 6)	+
Total Other Income:	=

Total Expenditures (Page 7)	<i>1833.13</i>
Total Disbursements of Excess Funds (Page 8)	+
Repayment of Loans (Page 6)	+
Subtotal:	b. =

OUTSTANDING LOANS & DEBTS:

Unpaid Bills (Page 9)	
Outstanding Loans (Page 6)	+
Total Debts:	=

Ending Balance: (Subtotal a. - Subtotal b.)	= <i>679.46</i>
<small>*Cannot be negative balance</small>	

**TOTAL CONTRIBUTIONS
ELECTION YEAR-TO-DATE**
(Add total contributions from all reports)

3956.59

**TOTAL EXPENDITURES
ELECTION YEAR-TO-DATE**
(Add total expenditures from all reports)

3237.13

RECEIVED

OCT 23 2014

Contributors of More than \$250

Check if additional pages have been attached.

DATE	INDIVIDUAL CONTRIBUTOR OR COMMITTEE'S NAME	AMOUNT
10/1/04	Full Name: <i>WV FDW-</i> Address: (residential and mailing if they are different) <i>Po box 813 Fairmont WV 26555</i> Contributor's job: (Individual contributor only) Where contributor works: (Individual contributor only) Affiliation: (political committee only) <i>Democrat committee</i>	1000.00
10/1/04	Full Name: <i>Dave Sturm</i> Address: (residential and mailing if they are different) <i>513 Maryland Ave Fairmont WV 26554</i> Contributor's job: (Individual contributor only) <i>Teacher</i> Where contributor works: (Individual contributor only) Affiliation: (political committee only)	1000.00
	Full Name: Address: (residential and mailing if they are different) Contributor's job: (Individual contributor only) Where contributor works: (Individual contributor only) Affiliation: (political committee only)	
	Full Name: Address: (residential and mailing if they are different) Contributor's job: (Individual contributor only) Where contributor works: (Individual contributor only) Affiliation: (political committee only)	
	Full Name: Address: (residential and mailing if they are different) Contributor's job: (Individual contributor only) Where contributor works: (Individual contributor only) Affiliation: (political committee only)	
	Full Name: Address: (residential and mailing if they are different) Contributor's job: (Individual contributor only) Where contributor works: (Individual contributor only) Affiliation: (political committee only)	

MAKE AS MANY COPIES OF THIS PAGE AS YOU NEED

Subtotal of all contributors of more than \$250
 Subtotal of all contributors of \$250 or less (From page 2) +

Total Contributions: = *2000.00*

ITEMIZED EXPENDITURES
(Itemize 3rd party expenditures/reimbursements)

Check if additional pages
have been attached.

Date	Name of Person or Vendor and Address	Purpose	Amount
10/4/14	Times WV Po Box 2530 Fairmont WV 26555	Ads	200.00
10/6/14	Frontier Po Box 20550 Rochester NY 14602-0550	Phone Service	633.13
10/8/14	Times WV PO BOX 2569 Fairmont WV 26555	Ads	1000.00

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OF THIS PAGE AS YOU NEED.

Total Expenditures: **1833.13**

UNPAID BILLS

Check if additional pages have been attached.

Date	Owed to Whom	Affiliated with what Company or Group	Purpose	Amount

Total Unpaid Bills:

OATH OR AFFIRMATION

I, Belinda Biafore, swear or affirm that the attached statement is true and correct, to the best of my knowledge, for all financial transactions occurring within the period covered by this statement, as required by West Virginia Code §3-8-5a.

Belinda Biafore Signature of Candidate, Financial Agent or Treasurer

Date Oct 20, 2014

Office Use Only

RECEIVED

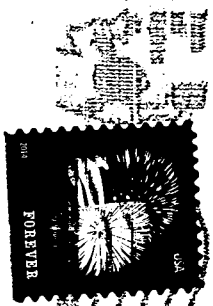
2014 OCT 23 AM 11:38

SECRETARY OF STATE
STATE OF WEST VIRGINIA

Received By: _____

Marion County Democratic Exec
PO BOX 813
Fairmont, WV 26555

PITTSBURGH PA 150
21 OCT 2014 PM 9 L



WV Secretary of State Elections Division
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1900 Kanawha Blvd. East
Charleston, WV 25305-0770