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 N	ame Laber Council	Candidate or Committee's Treasurer			
Political Party (for sandida		Treasurer's Mailing Address (Street, Route or P.O. Box)			
Office Sought (for candida	tes) District/Division		Daytime Phone # 30 Y C (17 9 2 7 7)		
Election Cycle Primary - First Report Due March 29-April 4, 2014 General - First Report Due September 22-26, 2014	Pre-Primary Report Due April 28-May 2, 2014 Pre-General Report Due October 20-24, 2014	Post-Primary Report Due May 26-June 23, 2014 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		
Non-Election Cycle Reporting Period:		ort Due In Calendar Year aturday in March or within 6 fter	Zero balance required. PAC must also file Form F-6 Dissolution		

REPORT TOTALS

(Fill in totals after you have completed page 2)

CASH BALANCE SUMMARY

Beginning Balance (ending balance from previous report) 1.		498.85				
Total Contributions (from Page 2) 2.	+	100.00				
Subtotal (lines 1+2) 3.		598.85				
Total Expenditures (from Page 2) 4.	_	0				
Ending Balance (lines 3-4)	=	598.85				
*Cannot have a negative ending balance						

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

900.W

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

3262.25

CONTRIBUTORS OF:

\$250 or Less

More than \$250

	\$250 OF Less			More than \$250		
Date	Full Name	Amount	Date			Amount
				Full Name: Polkershwa Pran La Address: Polkershwa Pran La Contributor's job: (Individual) Council	10)	
			1	Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	100 12	
			1	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:		
			1	Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)		
	Total Contributions: 100			100.	(O)	
	Check if additional pages nave been atached.			(add both columns)		
		· · · · · · · · · · · · · · · · · · ·		rd party expenditures/reimburse	ments)	
Date	Full name, residence address (if	person); business a	address	(if firm) Purpose		Amount
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<u> </u>						
	AS MANY COPIES	<u></u>		Total Expend	itures:	0
OF TH	IS PAGE AS YOU NEED.					U
I, corre	ct, to the best of my knowledg	e, of all finance	, s cial tra	FIRMATION wear or affirm that the attached seansactions occurring within the pe		
Date 14 Les 20 14.			·•.	Signature of Candidate, Agent, or Treasure		
24.0_		_ `		Office Use O	nly ?	
				PECENED		
				Received By:		

P.O. Ray 102 Dorkersburg, LW ZUUZ

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