## 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.

Candidate or Committee's Treasurer

- 1. Has your committee received any loans?
- 2. Has your committee held any fundraisers?

Candidate or Committee Name

- 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?

	Roance Co, Repub Political Party (for candidat Republican Office Sought (for candidat	es)	WALA S CAMP  Treasurer's Mailing Address (Street, Route or P.O. Box)  8 10 Jo H. M. 130 795 17 J  City, State, Zip Code Daytime Phone #  Spenders WV 25276 304/927-2933			
	Election Cycle Primary - First Report Due March 29-April 4, 2014  General - First Report Due September 22-26, 2014	Pre-General Report Due October 20-24, 2014		Check if Applicable:  Amended Report You must also check box of appropriate reporting period  Final Report		
Non-Election Cycle Reporting Period:		Due last Satu	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.	44. 22,94				
Total Contributions (from Page 2)	2.	+ 201, 40				
Subtotal (lines 1±2)	-	= 4623,94				
Total Expenditures (from Page 2)	4.	- 135.60				
Ending Balance (lines 3-4)	į	= 44 88.34				
*Cannot have a negative ending balance						

TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE (Add line 2 from all reports)
201.00

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

## CONTRIBUTORS OF:

\$250 or Less

More than \$250

Date	Full Name	Amount	Date				Amount
				FullName: Address:			
\				Contributor's job: (Individ Where contributor works Affiliation: (Political comm	: (Individual)		
4/11	Mise. Cash Donations	201.00		Full Name: Address:	····		
				Contributor's job: (Individ Where contributor works Affiliation: (Political comn	ual) :: (Individual) nittee)		
	i i			Full Name: Address:			
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)			
				Full Name: Address:			
		201.00		Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)			
2 6	Check if additional pages have been atached.			Total Cor (add boti	ntributions: L		22
	ITEMIZED EXPENDITU	RES (Item	ize 3	rd pary expenditur	es/reimburse	ments)	
Date	Full name, residence address (if person	n); business ad	ddress	(if firm)	Purpose		Amount
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1/4"	Hy' Spewcer Newspaper INC				Adv. for Lincoln D Gelebr	'44	35,60
	,				6.ele 6 x	-6.710'N	73,60
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	AS MANY COPIES IS PAGE AS YOU NEED.			•	Total Expend	itures: /	35.60
		OATH OF	RAF	IRMATION		·\$\$`,	
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 Date	572 , 20 14.			H	e of Candidate	STATE	Treasurer
20_17			*		Office Use O	HJ30 niy	
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·				Received By:			
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Nada Camp 810 John Boggs Rd 10 Spencer, WV 25276-8036

CRY NOW NOTIFIED

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