

State of West Virginia Campaign Financial Statement (Short Form) in Relation to 2016 Election Year

PAGE 1 OF 4

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 <i>STAND UP FOR YOUR COUNTRY</i>		Candidate or Committee's Treasurer <i>VIRGINIA KIRBY</i>	
Political Party (for candidates) <i>REPUBLICAN</i>		Treasurer's Mailing Address (Street, Route or P.O. Box) <i>101 MEADOWLANE</i>	
Office Sought (for candidates) <i>HOUSE OF DELEGATES</i>	District/Division <i>50</i>	City, State, Zip Code <i>FAIRMONT, WV. 26554</i>	Daytime Phone # <i>304-363-5475</i>

Election Cycle Reporting Period (check one):

- | | | |
|--|---|---|
| <input type="checkbox"/> Primary - First Report
Due March 26 - April 1, 2016 | <input type="checkbox"/> Pre-Primary Report
Due April 25 - 29, 2016 | <input type="checkbox"/> Post-Primary Report
Due May 23 - June 21, 2016 |
| <input type="checkbox"/> General - First Report
Due September 26 - 30, 2016 | <input type="checkbox"/> Pre-General Report
Due October 24 - 28, 2016 | <input checked="" type="checkbox"/> Post-General Report
Due Nov. 21 - Dec. 19, 2016 |

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 after you have completed page 2)

CASH BALANCE SUMMARY

Beginning Balance (ending balance from previous report) 1.			<i>4377.23</i>
Total Contributions (from Page 2) 2.	+		<i>2550.00</i>
Subtotal (lines 1+2) 3.	=		<i>6927.23</i>
Total Expenditures (from Page 2) 4.	-		<i>6326.45</i>
Ending Balance (lines 3-4)	=		<i>600.78</i>
*Cannot have a negative ending balance			

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

\$ 7940.00

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

\$ 8826.39

CONTRIBUTORS OF:

\$250 or Less

More than \$250

Date	Full Name	Amount	Date	Full Name	Amount
10/26	KEN JONES	\$100.00	10/25	Full Name: ERIC NELSON Address: P.O. Box 15L STARBUCKS, WV. 25321	\$500.00
10/31	MCKINLEY FOR CONGRESS	\$250.00		Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
10/31	GEORGE FOSTER	\$100.00	10/31	Full Name: MARATHON PETROLEUM CORP. Address: 539 S. MAIN ST. FINDLAY, OHIO 45846	\$1000.00
11/4	LORI KLEITHERGES	\$100.00	11/1	Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee) MPAC	
			11/1	Full Name: WILD AND WONDERFUL PAC Address: P.O. Box 65133 PORTMAN FALLS, VA. 20165	\$500.00
				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)	

Total Contributions:
(add both columns)

SEE PAGE 4

ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/reimbursements)

Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount
10/27	FACEBOOK MENLO PARK, CA.	MESSAGE BOOST	\$50.00
10/24	FACEBOOK MENLO PARK, CA.	MESSAGE BOOST	\$50.00
10/26	FACEBOOK MENLO PARK, CA.	MESSAGE BOOST	\$50.00
11/1	KINE STRATEGIC 750 CROSS POINT BLVD., STEEN. GAHANNA, OHIO	CAMPAIGN MAILER	\$4499.35
11/2	WVAX RADIO FARMONT WV.	RADIO ADVERTISING	\$375.00

MAKE AS MANY COPIES
OF THIS PAGE AS YOU NEED.

Total Expenditures:

SEE PAGE 4

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____.

Office Use Only
Received By: _____

\$250 or Less

More than \$250

Date	Full Name	Amount	Date	Full Name: Address:	Amount
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	

Total Contributions:
(add both columns)

SEE PAGE 4

ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/reimbursements)

Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount
11/3	WFCM RADIO FARMINGTON, WV.	RADIO ADVERTISING	\$690.00
11/4	FACEBOOK MENLO PARK, CALIF.	BOOST	\$75.00
11/4	FACEBOOK MENLO PARK, CALIF.	BOOST	\$75.00
11/4	FACEBOOK MENLO PARK, CALIF.	BOOST	\$75.00
11/5	RMC LIMITED DUBLIN OHIO	ROBO CALL	\$312.10

MAKE AS MANY COPIES
OF THIS PAGE AS YOU NEED.

Total Expenditures:

SEE PAGE 4

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____.

Office Use Only
Received By: _____

\$250 or Less

More than \$250

Date	Full Name	Amount	Date	Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	Amount

Total Contributions: (add both columns) \$ 2550.⁰⁰

ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/reimbursements)

Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount
11/16	FACEBOOK MENLO PARK, CA.	MESSAGE BOOST	75.00

MAKE AS MANY COPIES OF THIS PAGE AS YOU NEED.

Total Expenditures: 6326.45

OATH OR AFFIRMATION

I, Phil W. Miller, 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.

Phil W. Miller Signature of Candidate, Agent, or Treasurer

Date Nov. 21, 2016

Office Use Only

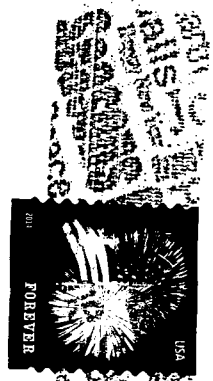
RECEIVED
2016 DEC -5 PM 12:00

Received By: _____

P.O. Box 3
KINGMONT, WV
26578

SECRETARY OF STATE'S OFFICE
1980 KANAWHA BLVD, EAST
BUILDING 4, SUITE 157-K
CHARLESTON, WV
25305

PITTSBURGH PA 150
02 DEC 2016 PM 4 1



25305-002144

