2014

## State of West Virginia Campaign Financial Statement (Short Form) in Relation to 2012 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?

Candidate or Committee Name	Candidate or Com	Candidate or Committee's Treasurer					
Political Party (for candidates)	Co. Paulene	Paulene meadows					
Political Party (for candidates)	Treasurer's Mailing	Treasurer's Mailing Address (Street, Route or P.O. Box)					
Office Sought (for candidates) District	Division City, State, Zip Co	de Daytime	•				
	Rimity	WU2590 307466-1	1603				
porting Period:	Report Post-prima 7, 2012 Due May 21  Report Post-gene	ral Report -Dec 19, 2012 endar Year	ck if Applicable: Amended Report You must also check box of appropriate reporting period Final Report Zero balance re- quired. PAC must also file Form				
/Eill	REPORT TOTAL						
(FIII	in totals after you have completed	i page 2)					

Beginning Balance (ending balance from previous report)	1.		517.81				
Total Contributions (from Page 2)	2.	+	60.00				
Subtotal (lines 1+2)	3.	II	5 77.91				
Total Expenditures (from Page 2)	4.	-	Ø .				
Ending Balance (lines 3-4)		=	577.81				
*Cannot have a negative ending balance							

TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE (Add line 2 from all reports)
60.00
TOTAL EXPENDITURES ELECTION YEAR-TO-DATE (Add line 4 from all reports)
0

## CONTRIBUTORS OF:

\$250 or Less

More than \$250

Date	Full Name	Amount	Date	Amount			T
4/16	0			Full Name: Address:	······································		<del>                                     </del>
13 9/ Ev/13	Paulini medown Paulini medown	20.00	1	Contributor's job: (Individu Where contributor works: Affiliation: (Political comm	ıal) (Individual) ittee)		
4/3/14	Parlini		1	Full Name: Address:	<u> </u>		<del>                                     </del>
15/17	1 auche Michaum	20.00		Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)			
				Full Name: Address:			<del>                                     </del>
				Contributor's job: (Individu Where contributor works: Affiliation: (Political comm	ial) (Individual) ittee)		
				Full Name: Address:			_
				Contributor's job: (Individu Where contributor works: Affiliation: (Political commi			
	heck if additional pages have			Total Con (add both	tributions: columns)	68.00	3
	een atached.						
Data I	ITEMIZED EXPENDIT				s/ reimburs	ements)	
Date	Full name, residence address (if person	on); business add	fress (if t	firm)	Purpose		Amount
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MAKE A	S MANY COPIES	· · · · · · · · · · · · · · · · · · ·		<u>l</u>	otal Expend	itures:	
OF THIS	PAGE AS YOU NEED.						0
,		OATH O	RAFF	IRMATION			
I, <i>\frac{1}{2}</i>	autene Greadows			, swear or affirm th	at the attach	ed stateme	nt is true
and cor	rrect, to the best of my knowledgent, as required by West Virginia	C, UI all IIIIal	ıcıaı u	ansactions occurring	within the p	eriod covere	d by this
	Pauleni meadows			Signature	of Candidate	Agent orl	Fogguror
Date 4	Pauleni meadous			J		$S_{ij}$	reasurer
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