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

IF YOUR ANSWER TO ANY OF THE FOLLOWING QUESTIONS IS "YES," YOU CANNOT USE THIS FORM. YOU MUST USETHE 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	Candidate or Committee's Treasurer				
Candidate or Committee Name Taylor County Republican Exacutive Commit	Barbara, Matka				
Political Party (for candidates)					
	296 GOWET LA				
Office Sought (for candidates) District/Division		ytime Phone #			
Omoc coagni (i.e. canalasse)	Grafton, WV26354	304-265-3190			
Election Cycle Reporting Period (che	eck one): Post-Primary Report	Check if Applicable:			
Primary - First Report Due March 26 - April 1, 2016 Pre-Primary Report Due April 25 - 29, 2016	Due May 23 - June 21, 2016	Amended Report You must also check			
General - First Report Due September 26 - 30, 2016 Pre-General Report Due October 24 - 28, 2016	Post-General Report Due Nov. 21 - Dec. 19, 2016	box of appropriate reporting period			
Duo dopioni de la caricalita de la caric		Final Report Zero balance required.			
Non-Election Cycle Reporting Period: Annual Reporting Due last Safadays thereaf	ort Due InCalendar Year turday in March or within 6 fter	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.	^{\$} 1340.10			
Total Contributions (from Page 2)	2.	+ 0			
Subtotal (lines 1+2)	3.	= 1346,10			
Total Expenditures (from Page 2)	4.	_ [06.00			
Ending Balance (lines 3-4)		= 1240.10			
*Cannot have a negative ending balance					

CONTRIBUTORS OF:

\$250 or Less

More than \$250

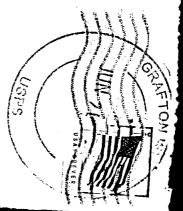
Date	Full Name	Amount	Date				Amount	
				Full Name: Address:				
			1	Contributor's job: (Individu Where contributor works: Affiliation: (Political comm	ual) : (Individual) ittee)			
	34444			Full Name: Address:				
				Contributor's job: (Individent Where contributor works Affiliation: (Political comments)	tributor's job: (Individual) ere contributor works: (Individual) iation: (Political committee)			
				Full Name: Address:				
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				Full Name: Address:				
				Contributor's job: (Individ Where contributor works Affiliation: (Political comm				
<u> </u>				Total Co	ntributions: h columns)			
	ITEMIZED EXPENDIT	URES (Item	ize 3ı	rd party expenditu	res/reimbursem	ents)		
Date	Full name, residence address (if per	rson); business a	address	(if firm)	Purpose		Amount	
4-30	t-30-16 Mothers Day Shrina IIE. Main St. Grafton,				magt candidate	5 \$	Ø	
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	AS MANY COPIES IS PAGE AS YOU NEED.				Total Expendit	ures: 🗯	00.00	
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_4	Durch 18 - 16			- FINE	e of Candidate, A	,)	Treasurer	
Date yunc 1 v 20/2.				Office Use Only				
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West Virginia Secretary of State Building 1, Suite 157-K 1900 Kanawha Blud. East Charleston, WV 25305



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