## 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 Name  NOSMUK COUNTY DEMOCRAT EX. COMM.	Candidate or Committee's Treasurer	S		
Political Party (for candidates)	Treasurer's Mailing Address (Street, Route or P.O. Box)  72 S F 10rid A Street			
Office Sought (for candidates) District/Division	City, State, Zip Code D BUCKMANNON WV 2620	aytime Phone # 304 ~ 472 - 2735		
Election Cycle Reporting Period (che 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	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		
	rt Due In Calendar Year urday in March or within 6 er	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.	2006.47				
Total Contributions (from Page 2)	2.	+ -0-				
Subtotal (lines 1+2)	3.	= 2006.47				
Total Expenditures (from Page 2)	4.	0-				
Ending Balance		= 2006.47				
*Cannot have a negative ending balance						

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

**CONTRIBUTORS OF:** 

OATH OR AFFIRMATION  I. ANDRA HAS 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 the statement, as required by West Virginia Code §3-8-5a.  Treisure Signature of Candidate, Agent, or Treasure			\$250 or L	.ess	More than \$250					
Address: Contributor's job: (Individual) Address: Contributor's job: (Individu	Date		Full Name		Amount	Date				Amount
Check if additional pages   Full Name:   Address:   Contributor's job: (Individual)   Affiliation: (Editical committee)   Check if additional pages   Affiliation: (Political committee)   Check if additional pages   Affiliation: (Political committee)   Check if additional pages   Affiliation: (Political committee)   Check if additional pages   Full Name:   Address:   Contributor's job: (Individual)   Affiliation: (Political committee)   Check if additional pages   Affiliation: (Political committee)   Affiliation: (Political committee)   Check if additional pages   Check if additional pages   Affiliation: (Political committee)   Check if additional pages   Check if additio							Full Name: Address:			
Address:    Contributor's job: (Individual)   Contributor's job: (Individu			<del></del>				Contributor's job: (Individ Where contributor works Affiliation: (Political comm	ual) : (Individual) nittee)		
Address: Contributor's job: (Individual) Where contributor's job: (Individual) Affiliation: (Political committee)  Check if additional pages Address: Contributor's job: (Individual) Affiliation: (Political committee)  Total Contributions:  [Check if additional pages Anve been atached.  ITEMIZED EXPENDITURES (Itemize 3rd pary expenditures/reimbursements)  Date  Full name, residence address (if person); business address (if firm)  Purpose  Amount  OATH OR AFFIRMATION  I. AN INCHAL HAYS  Correct, to the best of my knowledge of all financial transactions occurring within the period covered by the statement, as required by West Virginia Code §3-8-5a.  The Its West  Signature of Candidate, Agent, or Treasure  Office Use Only  ANICHAL ISAM 40 3 IMIS				<del>- · · · · · · · · · · · · · · · · · · ·</del>					**************************************	1
Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Policial committee)  Full Name: Address: Contributor's job: (Individual) Affiliation: (Political committee)  Total Contributions: (add both columns)  Date Full name, residence address (if person); business address (if firm)  Purpose Amount  MAKE AS MANY COPIES OF THIS PAGE AS YOU NEED.  OATH OR AFFIRMATION  I. AND WEAT HAYS Correct, to the best of my knowledge, of all financial transactions occurring within the period covered by the statement, as required by West Virginia Code §3-8-5a.  TVE ITS WEAT Signature of Candidate, Agent, or Treasure  Date 5-1 2014  Office Use Only AMICHAIA IS M. 10 3 INIS							Contributor's job: (Individ Where contributor works Affiliation: (Political comn	ual) : (Individual) nitlee)		Richard Control
Check if additional pages   Ch							Full Name:			
Full Name: Address   Contributor's job: (Individual)   Check if additional pages   Individual   Affiliation: (Political committee)   Full name, residence address (if person); business address (if firm)   Purpose   Amount							Contributor's job: (Individ	lual) :: (Individual) nittee)		
Check if additional pages have been atached.    Check if additional pages have been atached.   Total Expenditures   Contribution   Contributions   Contributio							Full Name:			1
Tremized Expenditures (Itemize 3rd pary expenditures/reimbursements)   Date   Full name, residence address (if person); business address (if firm)   Purpose   Amount					·· ~ •		Contributor's job: (Individ Where contributor works Affiliation: (Political comm	ual) : (Individual) ilttee)		direction of the second
ITEMIZED EXPENDITURES (Itemize 3rd pary expenditures/reimbursements)  Date Full name, residence address (if person); business address (if firm) Purpose Amount  MAKE AS MANY COPIES OF THIS PAGE AS YOU NEED.  OATH OR AFFIRMATION  I. A NOVE A HAY S correct, to the best of my knowledge of all financial transactions occurring within the period covered by the statement, as required by West Virginia Code §3-8-5a.  OATH OR AFFIRMATION  I. Signature of Candidate, Agent, or Treasure Date S - 1 20 / Y Office Use Only  WANK HAI 197M 10 3 IVIS							Total Co (add bot	ntributions: h columns)	()	
Date Full name, residence address (if person); business address (if firm)  MAKE AS MANY COPIES OF THIS PAGE AS YOU NEED.  OATH OR AFFIRMATION  I. A NOVER HAYS correct, to the best of my knowledge, of all financial transactions occurring within the period covered by the statement, as required by West Virginia Code §3-8-5a.  OATH OR AFFIRMATION  I. A NOVER HAYS  Signature of Candidate, Agent, or Treasure  Date 5 -1  2014  Office Use Only  WHICHEN ISTAN 10 11415		rave bee	n atacne	a.						
MAKE AS MANY COPIES OF THIS PAGE AS YOU NEED.  OATH OR AFFIRMATION  I, AND HAYS OF THIS PAGE AS YOU NEED.  OATH OR AFFIRMATION  I, AND HAYS OF All financial transactions occurring within the period covered by the statement, as required by West Virginia Code §3-8-5a.  OATH OR AFFIRMATION  I, AND HAYS OF THIS WEB Signature of Candidate, Agent, or Treasure  Date 5-1  2014  Office Use Only MANICHAI (SAM 10 3141)			ITEMIZ	ED EXPENDI	TURES (Item	iize 3ı	rd pary expenditur	es/reimburse	ements)	
OATH OR AFFIRMATION  I. ANDREAS YOU NEED.  OATH OR AFFIRMATION  I. ANDREAS AS YOU NEED.  OATH OR AFFIRMATION  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 the statement, as required by West Virginia Code §3-8-5a.  OATH OR AFFIRMATION  I. ANDREAS AS YOU NEED.  OATH OR AFFIRMATION  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 the statement, as required by West Virginia Code §3-8-5a.  OATH OR AFFIRMATION  I. ANDREAS AS YOU NEED.  OATH OR AFFIRMATION  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 the statement, as required by West Virginia Code §3-8-5a.  OATH OR AFFIRMATION  OFFICE Use Only  WANIGHIA IS AND A SIVE OFFICE USE ONLY  WANIGH OFF	Date	Fu	ll name, resid	dence address (if pe	rson); business a	ddress (	(if firm)	Purpose		Amount
OATH OR AFFIRMATION  I. ANDREAS YOU NEED.  OATH OR AFFIRMATION  I. ANDREAS AS YOU NEED.  OATH OR AFFIRMATION  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 the statement, as required by West Virginia Code §3-8-5a.  OATH OR AFFIRMATION  I. ANDREAS AS YOU NEED.  OATH OR AFFIRMATION  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 the statement, as required by West Virginia Code §3-8-5a.  OATH OR AFFIRMATION  I. ANDREAS AS YOU NEED.  OATH OR AFFIRMATION  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 the statement, as required by West Virginia Code §3-8-5a.  OATH OR AFFIRMATION  OFFICE Use Only  WANIGHIA IS AND A SIVE OFFICE USE ONLY  WANIGH OFF		<b>[</b>							1	
OATH OR AFFIRMATION  I. ANDREAS YOU NEED.  OATH OR AFFIRMATION  I. ANDREAS AS YOU NEED.  OATH OR AFFIRMATION  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 the statement, as required by West Virginia Code §3-8-5a.  OATH OR AFFIRMATION  I. ANDREAS AS YOU NEED.  OATH OR AFFIRMATION  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 the statement, as required by West Virginia Code §3-8-5a.  OATH OR AFFIRMATION  I. ANDREAS AS YOU NEED.  OATH OR AFFIRMATION  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 the statement, as required by West Virginia Code §3-8-5a.  OATH OR AFFIRMATION  OFFICE Use Only  WANIGHIA IS AND A SIVE OFFICE USE ONLY  WANIGH OFF										
OATH OR AFFIRMATION  I. ANDREAS YOU NEED.  OATH OR AFFIRMATION  I. ANDREAS AS YOU NEED.  OATH OR AFFIRMATION  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 the statement, as required by West Virginia Code §3-8-5a.  OATH OR AFFIRMATION  I. ANDREAS AS YOU NEED.  OATH OR AFFIRMATION  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 the statement, as required by West Virginia Code §3-8-5a.  OATH OR AFFIRMATION  I. ANDREAS AS YOU NEED.  OATH OR AFFIRMATION  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 the statement, as required by West Virginia Code §3-8-5a.  OATH OR AFFIRMATION  OFFICE Use Only  WANIGHIA IS AND A SIVE OFFICE USE ONLY  WANIGH OFF		]								
OATH OR AFFIRMATION  I. ANDREAS YOU NEED.  OATH OR AFFIRMATION  I. ANDREAS AS YOU NEED.  OATH OR AFFIRMATION  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 the statement, as required by West Virginia Code §3-8-5a.  OATH OR AFFIRMATION  I. ANDREAS AS YOU NEED.  OATH OR AFFIRMATION  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 the statement, as required by West Virginia Code §3-8-5a.  OATH OR AFFIRMATION  I. ANDREAS AS YOU NEED.  OATH OR AFFIRMATION  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 the statement, as required by West Virginia Code §3-8-5a.  OATH OR AFFIRMATION  OFFICE Use Only  WANIGHIA IS AND A SIVE OFFICE USE ONLY  WANIGH OFF										
OATH OR AFFIRMATION  I. ANDREAS YOU NEED.  OATH OR AFFIRMATION  I. ANDREAS AS YOU NEED.  OATH OR AFFIRMATION  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 the statement, as required by West Virginia Code §3-8-5a.  OATH OR AFFIRMATION  I. ANDREAS AS YOU NEED.  OATH OR AFFIRMATION  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 the statement, as required by West Virginia Code §3-8-5a.  OATH OR AFFIRMATION  I. ANDREAS AS YOU NEED.  OATH OR AFFIRMATION  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 the statement, as required by West Virginia Code §3-8-5a.  OATH OR AFFIRMATION  OFFICE Use Only  WANIGHIA IS AND A SIVE OFFICE USE ONLY  WANIGH OFF									8	
OATH OR AFFIRMATION  I. ANDREAS YOU NEED.  OATH OR AFFIRMATION  I. ANDREAS AS YOU NEED.  OATH OR AFFIRMATION  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 the statement, as required by West Virginia Code §3-8-5a.  OATH OR AFFIRMATION  I. ANDREAS AS YOU NEED.  OATH OR AFFIRMATION  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 the statement, as required by West Virginia Code §3-8-5a.  OATH OR AFFIRMATION  I. ANDREAS AS YOU NEED.  OATH OR AFFIRMATION  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 the statement, as required by West Virginia Code §3-8-5a.  OATH OR AFFIRMATION  OFFICE Use Only  WANIGHIA IS AND A SIVE OFFICE USE ONLY  WANIGH OFF									1	
OATH OR AFFIRMATION  I. ANDREAS YOU NEED.  OATH OR AFFIRMATION  I. ANDREAS AS YOU NEED.  OATH OR AFFIRMATION  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 the statement, as required by West Virginia Code §3-8-5a.  OATH OR AFFIRMATION  I. ANDREAS AS YOU NEED.  OATH OR AFFIRMATION  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 the statement, as required by West Virginia Code §3-8-5a.  OATH OR AFFIRMATION  I. ANDREAS AS YOU NEED.  OATH OR AFFIRMATION  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 the statement, as required by West Virginia Code §3-8-5a.  OATH OR AFFIRMATION  OFFICE Use Only  WANIGHIA IS AND A SIVE OFFICE USE ONLY  WANIGH OFF							***************************************			
OATH OR AFFIRMATION  I. ANDREAS YOU NEED.  OATH OR AFFIRMATION  I. ANDREAS AS YOU NEED.  OATH OR AFFIRMATION  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 the statement, as required by West Virginia Code §3-8-5a.  OATH OR AFFIRMATION  I. ANDREAS AS YOU NEED.  OATH OR AFFIRMATION  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 the statement, as required by West Virginia Code §3-8-5a.  OATH OR AFFIRMATION  I. ANDREAS AS YOU NEED.  OATH OR AFFIRMATION  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 the statement, as required by West Virginia Code §3-8-5a.  OATH OR AFFIRMATION  OFFICE Use Only  WANIGHIA IS AND A SIVE OFFICE USE ONLY  WANIGH OFF									,	
OATH OR AFFIRMATION  I, ANOVER HAS 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 the statement, as required by West Virginia Code §3-8-5a.  Order HASINER Signature of Candidate, Agent, or Treasure Date 5-1 2014.  Office Use Only HANICHIA ISAM 10 31VIS				ED			7	Total Expend	itures: -	-()
I. ANOVER HAYS , 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 the statement, as required by West Virginia Code §3-8-5a.  The its use The its use of Candidate, Agent, or Treasure Date 5-1 , 2014.  Office Use Only WALLOHIA IS AM 10 31V1S	<u> </u>	3 FAGE A	3 TOO NE	ED.	CATUO	D A F F				
correct, to the best of my knowledge of all financial transactions occurring within the period covered by the statement, as required by West Virginia Code §3-8-5a.  TVE ITSUREF  Signature of Candidate, Agent, or Treasure  Date 5 - 1 2014.  Office Use Only  WAND HA 10 31V1S					UAIRU	KAFF	RMATION			
correct, to the best of my khowledge, of all financial transactions occurring within the period covered by the statement, as required by West Virginia Code §3-8-5a.  The fisher Signature of Candidate, Agent, or Treasure Date 5 - 1 2014.  Office Use Only WANDHIA ISAM 40 31VIS	1.	Andr	GA H	A-15		SV	vear or affirm that t	he attached s	tatement i	is true and
Date 5-1 2014.  Signature of Candidate, Agent, or Treasure  Office Use Only  HANGHIA IS AM 40 31V1S	correc	t, to the	best of r	ny knowledge.	of all financ	ial tra	nsactions occurring	within the pe	riod cover	red by this
Date 5 -1 , 20 1 4 .  Office Use Only HANGHIA IS AM 40 BLAIS	statem	nent, as r	required b	y West Virgini	a Code §3-8-	5a.				
Date 5 -1 , 20 1 4 .  Office Use Only HANGHIA IS AM 40 BLAIS		$-Q_{i}$	udu	K Ha	n Tro	> 4<10	00 A			_
Office Use Only WINDHIA ISAM 40 31VIS	<del></del>	ا مہ	1	Huy		- 11 J ()	Signature	e of Candidate	, Agent, or	· I reasurer
STATE OF WEST VIHORINA	Date_	5-1		, 20/4			F	D(C 11 0		
SECRETARY OF STATE								Office Use O	SIAIE OF 1	
☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐								AMDOM TOTAL	SECHER	· Conference
							الموادية . الموادية الموادية ال			
Receiver 187: Wd S- XVH 1107							Receiv	egil BZ: Hd	3- YAM 410	51
RECEIVED 2					2			CHAI	BECE	

HAYS 725 Florida St. BUCKHAMMON WV

THE RESERVE AND A PERSON OF THE PERSON OF TH

USA | forete

Secretary of S-AHE Bldg I suite 157-K 1900 KANTWA Blvd EAST Charleston, WV 25305-0770