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 N	ame	Candidate or Committee's Treasurer Candidate or Committee's Treasurer Candidate or Candida			
	317 FARE	PAC				
	Political Party (for candidate	tes)				
	Office Sought (for candida	tes) District/Division	55 Dogwood City, State, Zip Code	人でAの Daytime Phone #		
			ST. ALBANS WV 2977	3044157664		
<u></u>	-/ :	Pre-General Report Due October 20-24, 2014	ck one): 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		
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)		554.15	TOTAL	
Total Contributions (from Page 2)	2.	+ 💢	ELECTION (Add line	
Subtotal (lines 1+2)	3.	= 584.15	TOTAL	
Total Expenditures (from Page 2)	4.	- 250.00	ELECTION (Add line	
Ending Balance (lines 3-4)		= 304.15	2	
*Cannot have a n	ega	tive ending balance		

(Add line 2 from all reports)				
X				
TOTAL EXPENDITURES ELECTION YEAR-TO-DATE (Add line 4 from all reports)				
250.co				

CONTRIBUTIONS

CONTRIBUTORS OF:

\$250 or Less

More than \$250

Date	Full Name	Amount	Date				Amount		
				Full Name: Address:					
				Contributor's job: (Individu Where contributor works: Affiliation: (Political commi	(Individual)				
	(Full Name: Address:					
				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)					
				Full Name: Address:	Full Name:				
				Contributor's job: (Individu Where contributor works: Affiliation: (Political comm	tor's job: (Individual) ontributor works: (Individual) n: (Political committee)				
	Check if additional pages		-	Total Cor (add both	ntributions: columns)	ζ	\$		
	ITEMIZED EXPEND	OITURES (Item	ize 3	rd pary expenditure	es/reimburs	ements)			
Date	Full name, residence address (if		ddress	(if firm)	Purpose		Amount		
1/2	VI3 PALMER FO	DR HOUSE			CAMPATES COURTES	770nu	250.00		
			_						
					_				
	AS MANY COPIES IS PAGE AS YOU NEED.		-	•	Total Expen	ditures:	250.00		
	CAN	OATH O	R AF	FIRMATION	- 				
I, Stand 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.									
———Date	3/29 20 14	Still		Signatur VINIOSIA JUNIOSIA	to De New York SENE OF MEST SENERAL OF SENERAL OF SENERAL OF SENERAL S		or Treasurer		
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