

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 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>Clay County Democratic</i>		Candidate or Committee's Treasurer <i>Wanita Gray</i>	
Political Party (for candidates) <i>Executive Committee</i>		Treasurer's Mailing Address (Street, Route or P.O. Box) <i>P.O. Box 371</i>	
Office Sought (for candidates)	District/Division	City, State, Zip Code <i>Clay WV 25045</i>	Daytime Phone # <i>304-587-4343</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 checked="" 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 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>3069.63</i>
Total Contributions (from Page 2) 2.		+	<i>95.00</i>
Subtotal (lines 1+2) 3.		=	<i>3164.63</i>
Total Expenditures (from Page 2) 4.		-	<i>614.62</i>
Ending Balance (lines 3-4)		=	<i>2550.01</i>
*Cannot have a negative ending balance			

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

2694.43

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

614.62

CONTRIBUTORS OF:

\$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
4/23/16	Mrs. \$5.00 Cash Donations	95.00			

Total Contributions:
(add both columns)

95.00

ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/reimbursements)

Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount
3/24/16	Delta Communications	Newspaper Ad	20.00
3/30/16	Family Dollar	Paper Products	44.42
4/8/16	Clay Nutrition Center	Rent for County Convention	70.00
4/12/16	Clay County Free Press	Newspaper Ad	64.00
4/18/16	Smiths Food Fair	Food for Meet the Candidates	216.20

MAKE AS MANY COPIES OF THIS PAGE AS YOU NEED.

Total Expenditures:

Cont. p. 3

OATH OR AFFIRMATION

Cont. Page 3

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: _____

CONTRIBUTORS OF:

\$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)

ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/reimbursements)

Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount
4/22/16	Giorgannis	Food for Meet the Candidates	200.00

MAKE AS MANY COPIES OF THIS PAGE AS YOU NEED.

Total Expenditures:

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.

Wanita Gray

Signature of Candidate, Agent, or Treasurer

Date 6/21, 2016

Office Use Only

RECEIVED

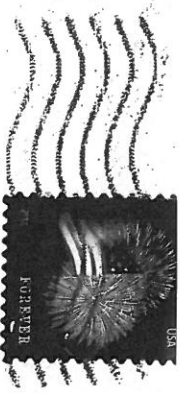
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Received By: _____

Manita Gray
P.O. Box 371
Clay, WV 25043

Secretary of State
Elections Div.
Building 1 Suite 157-K
1900 Kanawha Boulevard East
Charleston, WV 25305

CHARLESTON WV 25301
22 JUN 2016 PM 3:1



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