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 NORTH CENTRAL WV BUSINESS OWNERS PAC	Candidate or Committee's Treas	Candidate or Committee's Treasurer JIM CRAIG			
Political Party (for candidates)	Treasurer's Mailing Address (Str 426 DRUMMOND STREET	eet, Route or P.O. Box)			
Office Sought (for candidates) District/Division	on City, State, Zip Code MORGANTOWN, WV 26505	Daytime Phone # 304-676-0930			
Election Cycle Reporting Period Primary - First Report Due March 26 - April 1, 2016 General - First Report Due September 26 - 30, 2016 Election Cycle Reporting Period Due April 25 - 29, 201 Pre-General Report Due October 24 - 28, 3	Post-Primary Report Due May 23 - June 21, 2016 Post-General Report	Check if Applicable: Amended Report You must also check box of appropriate reporting period Final Report			
	Report Due In Calendar Year st Saturday in March or within 6 ereafter	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.		-0-	TOTAL CONTRIBUTIONS	
Total Contributions (from Page 2)	2.	+	-0-	(Add line 2 from all reports)	
Subtotal (lines 1+2)	3.	=	-0-	TOTAL EXPENDITURES	
Total Expenditures (from Page 2)	4.	_	-0-	ELECTION YEAR-TO-DATE (Add line 4 from all reports)	
Ending Balance (lines 3-4)		=	-0-	-0-	
*Cannot have a r					

CONTRIBUTORS OF:

\$250 or Less

More than \$250

	\$250 or Less			Mc	ore than \$250	
Date	Full Name	Amount	Date			Amount
	NONE			Full Name: Address:		
			1	Contributor's job: (Individ Where contributor works Affiliation: (Political comm	ual) : (Individual) iittee)	
-			 -	Full Name: Address:	-	
			1	Contributor's job: (Individ Where contributor works Affiliation: (Political comm	lual) s: (Individual) nittee)	
				Full Name: Address:		
				Contributor's job: (Individ Where contributor works Affiliation: (Political com		
				Full Name: Address:	·	
				Contributor's job: (Individ Where contributor works Affiliation: (Political comn	lual) :: (Individual) nittee)	
				Total Co (add bot	ntributions: h columns)	
	ITEMIZED EXPEN	DITURES (Item	ize 3r	d party expenditu	res/reimbursements)	
Date	Full name, residence address (Purpose	Amount
	NONE					
						
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						-
	AS MANY COPIES S PAGE AS YOU NEED.			•	Total Expenditures:	
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/		OATH O				
	JAMES (DAIG		SIM	vear or affirm that t	he attached statement	is true an
orrec	t, to the best of my knowled	ge, of all financ	ial tra	nsactions occurring	within the period cover	red by thi
tatem	nent as required by West Virg	jinia Code §3-8-	5a.		, , ,	
	79/1)					
	19 Mud			Signature	e of Candidate, Agent, o	r Treasure
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 Andrew Smith Morgantown, WV 26505 426 Drummond Street

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