## 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 Na AFT Monora Political Party (for candidate	galia Co. Cope	Candidate or Committee's Treasure  Angela Have S  Treasurer's Mailing Address (Street,	
Office Sought (for candidat	es) District/Division	City, State, Zip Code Union town, P. A	Daytime Phone # . 1540/ 755-372-
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
Non-Election Cycle Reporting Period:		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**

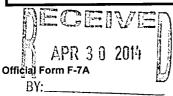
Beginning Balance (ending balance from previous report	3,220.94				
Total Contributions (from Page 2)	2.	+ 0			
Subtotal (lines 1+2)		= 3,220.94			
Total Expenditures (from Page 2)	4.	_ 500.00			
Ending Balance (lines 3-4)		= 2,720.94			
*Cannot have a negative ending balance					

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

3617.75

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

1, 143.48



## 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 comm	ıal) (Individual) ittee)					
				Full Name: Address:						
				Contributor's job: (Individu	ntributor's job: (Individual) ere contributor works: (Individual) iation: (Political committee)					
			1	Full Name: Address:						
			1	Contributor's job: (Individent Where contributor works Affiliation: (Political comm						
				Full Name: Address:						
			1	Contributor's job: (Individent Where contributor works Affiliation: (Political comm	ual) : (Individual) ittee)					
Check if additional pages (add both columns)  Total Contributions: (add both columns)										
ITEMIZED EXPENDITURES (Itemize 3rd pary expenditures/reimbursements)										
Date	Full name, residence address (if pers			(if firm)	Purpose		Amount			
4/45/1	4/9/14 Friends of Sam Brunett				Contribu	cal BOE	500.00			
					Ra	Ce				
	AS MANY COPIES S PAGE AS YOU NEED.			•	Total Expen	ditures:	500.00			
		OATH	RAF	FIRMATION						
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										
statem	nent, as required by West Virginia	Code 33-6	-5a.							
	millel			Signatur	e of Candidat	e Agent,	or Treasurer			
Date_	41281 20 14.				ના પ્રાથમિક Office <b>પુકલ</b>	F MEST VI	O BIAIS			
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				Receiv	red By:	AIIC				

AFTMan.Co ST Bastille Ln. Fairmant, W126554

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Secretary of State
Bldg. 1, Swite 157-K
Bldg. 1, Swite 157-K
1900 Kanawha Blvd. East
1900 Kanawha Blvd. East
(Attention Campaign Finance)

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