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?

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Election Cycle Reporting Period (check one):								
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required. so file solution								

REPORT TOTALS

(Fill in totals after you have completed page 2)

CASH BALANCE SUMMARY

Beginning Balance (ending balance from previous report)	1.		514	, 52	TOT/
Total Contributions (from Page 2)	2.	+	0	, 00	ELEC (Add I
Subtotal (lines 1+2)	3.	=	514.	52	
Total Expenditures (from Page 2)	4.		0.	00	TOTA ELEC
Ending Balance (lines 3-4)	± 7.	=	514.	52	
*Cannot have a n	ega	tive e	ending ba	alance	

TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE (Add line 2 from all reports)
0.00

TOTAL EXPENDITURES ELECTION YEAR-TO-DATE (Add line 4 from all reports)				
0,00				

CONTRIBUTORS OF:

\$250 or Less

More than \$250

				wore man \$250		
Date	Full Name	Amount	Date			Amount
				FullName: Address:		
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)		
				FullName: 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:	The state of the s	***
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)		
			<u></u>	Total Contributions:	0,	(20)
				(add both columns) L		
	ITEMIZED EXPENDIT	URES (Item	ize 3r	d party expenditures/reimbursen	nents)	
Date						Amount
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	AS MANY COPIES IS PAGE AS YOU NEED.			Total Expendit	ures: c	, <i>0</i> 0
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o care i	nent, as required by West Virginia	1 Code 32-0-:	ગ્ય.			
<u> </u>	and is type	entroperation of the state of t		Signature of Candidate.	Agent. or ⁻	Treasurer
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