

# 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 Name <i>FAD (Financial Assistance Democrats)</i>		Candidate or Committee's Treasurer <i>Belinda Biafore</i>	
Political Party (for candidates) <i>Democrat</i>		Treasurer's Mailing Address (Street, Route or P.O. Box) <i>1006 GASTON AVE</i>	
Office Sought (for candidates)	District/Division	City, State, Zip Code <i>Fairmont WV 26554</i>	Daytime Phone # <i>304 641-2394</i>

**Election Cycle Reporting Period (check one):**

- |                                                                                      |                                                                                |                                                                                            |
|--------------------------------------------------------------------------------------|--------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|
| <input type="checkbox"/> <b>Primary - First Report</b><br>Due March 29-April 4, 2014 | <input type="checkbox"/> <b>Pre-Primary Report</b><br>Due April 28-May 2, 2014 | <input checked="" type="checkbox"/> <b>Post-Primary Report</b><br>Due May 26-June 23, 2014 |
| <input type="checkbox"/> <b>General - First Report</b><br>Due September 22-26, 2014  | <input type="checkbox"/> <b>Pre-General Report</b><br>Due October 20-24, 2014  | <input type="checkbox"/> <b>Post-General Report</b><br>Due Nov. 17-Dec. 15, 2014           |

**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

<b>Beginning Balance</b> (ending balance from previous report) 1.			<i>5346.48</i>
<b>Total Contributions</b> (from Page 2) 2.	+		<i>0</i>
<b>Subtotal</b> (lines 1+2) 3.	=		<i>5346.48</i>
<b>Total Expenditures</b> (from Page 2) 4.	-		<i>0</i>
<b>Ending Balance</b> (lines 3-4)	=		<i>5346.48</i>
<b>*Cannot have a negative ending balance</b>			

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

*10380.42*

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

*7353.71*

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
				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: 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)	

Check if additional pages have been attached.

Total Contributions: (add both columns)

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ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/reimbursements)

Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount

MAKE AS MANY COPIES OF THIS PAGE AS YOU NEED.

Total Expenditures:

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OATH OR AFFIRMATION

I, Belinda Biafore, 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.

Belinda Biafore

Signature of Candidate, Agent, or Treasurer

Date June 20, 2014.

<p>Office Use Only</p> <p>2014 JUN 25 AM 11:48</p> <p>RECEIVED</p> <p>Received By: _____</p>
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PITTSBURGH PA 150  
23 JUN 2014 PM 9:1

WF/DW/FAD  
1006 Gaston Ave  
Fairmont, WV 26554

WV Secretary of State  
ATT: Elections Division  
Building 1, Suite 157K  
1900 Kanawha Blvd East  
Charleston, WV 25305

25305000101