

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>RACE TRACK FRIENDS OF MOUNTAIN CASINO</i>	Candidate or Committee's Treasurer <i>KATHY A. BOWMAN</i>
Political Party (for candidates) <i>[Signature]</i>	Treasurer's Mailing Address (Street, Route or P.O. Box) <i>243 Milltop Dr.</i>
Office Sought (for candidates) District/Division <i>[Signature]</i>	City, State, Zip Code Daytime Phone # <i>WEAVER WV 26062 304-723-1477</i>

Election Cycle Reporting Period (check one):			Check if Applicable: <input type="checkbox"/> Amended Report You must also check box of appropriate reporting period <input type="checkbox"/> Final Report Zero balance required. PAC must also file Form F-6 Dissolution
<input type="checkbox"/> Primary - First Report Due March 29-April 4, 2014	<input type="checkbox"/> Pre-Primary Report Due April 28-May 2, 2014	<input type="checkbox"/> Post-Primary Report Due May 26-June 23, 2014	
<input type="checkbox"/> General - First Report Due September 22-26, 2014	<input type="checkbox"/> Pre-General Report Due October 20-24, 2014	<input checked="" type="checkbox"/> Post-General Report Due Nov. 17-Dec. 15, 2014	
Non-Election Cycle Reporting Period:	<input type="checkbox"/> 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>35.10</i>	
Total Contributions (from Page 2) 2.	+	<i>0</i>	
Subtotal (lines 1+2) 3.	=	<i>35.10</i>	
Total Expenditures (from Page 2) 4.	-	<i>0</i>	
Ending Balance (lines 3-4)	=	<i>35.10</i>	
*Cannot have a negative ending balance			

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

0

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

180.00

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, Kathryn A Bowman, 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.

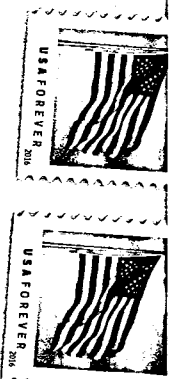
Kathryn A Bowman

Signature of Candidate, Agent, or Treasurer

Date April 4, 2017.

OFFICE USE ONLY STATE OF WEST VIRGINIA SECRETARY OF STATE 2017 APR 10 PM 12:11 RECEIVED Received By: _____

WILSON DRIVE
WV 26062



WEST VIRGINIA SECRETARY OF STATE
STATE CAPITAL
CHARLESTON WV 25305

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