State of West Virginia Campaign Financial Statement (Short Form) in Relation to the 2008 Election Year

IF YOUR ANSWER TO ANY OF THE FOLLOWING QUESTIONS IS "YES," YOU CANHOT USE THIS FORM. YOU MUST USE THE LONG FORM (FORM F-7) TO FILE YOUR CAMPAIGN FINANCE REPORT.

Candidate or Committee's Treasurer

JOANN KRADLE

- 1. Has your committee received any loans?
- 2. Has your committee held any fundraisers?

Candidate or Committee Name

- 3. Has your committee received any miscellaneous receipts, such as refunds or checking account interest?
- 4. Does your committee have any unpaid bills?

KAVAWHA COREPUBLICAN WOMEN

- 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?

Political Party (for candidates)	Treasurer's Mailing Address (Sireet, Route or P.O. Box) を19 Wにもいるこの くっとくは					
Office Sought (for candidates) District/Division	City, State, Zip Code Daytime Phone # ST. 9 LB 9 N リ コニコフ フスフータタンプ					
Election Cycle Reporting Period (ch	neck one): Check if Applicable:					
Primary - First Report Due March 29 - April 4, 2008 Pre-primary Repo Due April 28 - May	rt Post-primary Report Amended Report					
General - First Report Due Sept. 22 - 26, 2008 Pre-general Repo Due Oct. 20 - 24, 2	Due Nov. 17 - 21, 2008 reporting period.					
	port Due in Calendar Year					

REPORT TOTALS

(Fill in totals after you have completed page 2)

CASH BALANCE SUMMARY

Beginning Balance (ending balance from previous report)	1.		927.68					
Total Contributions (from Page 2)	2.	+	48.50					
Subtotal (lines 1+2)	3.	=	976.18					
Total Expenditures (from Page 2)	4.	_	900.00					
Ending Balance (lines 3-4)		=	76.18					
*Cannot have a negative ending balance								

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

83.95

TOTAL EXPENDITURES

**LECTION YEAR-TO-DATE*
(Add line 4 from all reports)

918.35

CONTRIBUTORS OF:

	\$250 or less				Моте	e than \$250				
Date	Full Name	Amount	Date				Amount			
1. 0	ERA MOLORNICK YNNESLAMIC AROLYN CHRICHPIELD ARH FORD ORIS GERKE AT F15 de	21.50 250 250 250 2.50 1.50		Full Name: Address: Contributor's job: (Individu Where contributor works: Affiliation: (Political commi Full Name: Address: Contributor's job: (Individual	(inc i ittee) 	· · · · · · · · · · · · · · · · · · ·				
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Check if additional pages have been atached. Total Contributions: 4850 (add both calumns)										
	ITEMIZED EXPENDITURES				/ rein	, <u>, , , , , , , , , , , , , , , , , , </u>				
Date Full name, residence address (if person); business address (if firm) SHELLY MOURIZ CAPITO SE REMPS/+UCIC PL CHARLES NE 25314					C iti-	n pai cu	Arricunt			
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	MANY COPIES PAGE AS YOU NEED.				l Fota	Expenditures:	900.0			
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OATH OR AFFIRMATION I										
Date 10-33 . 20 08 . Signature of Candidate, Agent,						or Treasurer				
				97:01 MF						

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