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 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 Macion County Educa	tion Association	Candidate or Committee's Treasure			
Political Party (for candidates)		Treasurer's Mailing Address (Street, Route or P.O. Box)			
Office Sought (for candidates)	District/Division	City, State, Zip Code Bassackulle NV 263	-	Phone# 304 366 00 70	
Election Cycle Reporting Period (check one): Check if Applicable:					
Primary - First Report Due March 29 - April 4, 2008	Pre-primary Report Due April 28 - May 2,	2008 Post-primary Report Due May 26 - 30, 2008		Amended Report You must also check	
General - First Report Due Sept. 22 - 26, 2008	Pre-general Report Due Oct. 20 - 24, 200		box of appropriate reporting period Final Report		
Non-Election Cycle Reporting Period:		t Due in Calendar Year orday 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) 1.	2790,62	T@TAL CONTRIBUTIONS
Total Contributions (from Page 2) 2.	+ 0.00	ELECTION YEAR-TO-DATE (4dd line 2 from all reports)
Subtotal (lines 1+2) 3.	= 2790.62	TOTALEXPENDITURES
Total Expenditures (from Page 2) 4.	_ 0.00	ELECTION YEAR-TO-DATE (Add line 4 from all reports)
Ending Balance (lines 3-4)	= 2790,62	FIRST CONTRACTOR CONTR
*Cannot have a negati	ve ending balance	

CONTRIBUTORS OF:

\$250 or less

More than \$250

Date	Full Name	Amount	Date				A CONTRACTOR OF THE PARTY OF TH	Amount
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	ITEMIZED EXPENDITUR	ES (Itemize	3rd	party expenditures	/ rein	burser	nents)	
Date				The second secon		Purpose		Amount
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Date	NOV 18 , 20 08		ノ					
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