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 Raleigh Co Republican FA. Comm. Political Party (for candidates)	Candidate or Committee's Treasurer Bener Lund Treasurer's Mailing Address (Street, Route or P.O. Box) 136 Wad-a Road			
Office Sought (for candidates) District/Division	City, State, Zip Code Beckley, WI 2580y	Daytime Phone # 304-237-8925		
Election Cycle Reporting Period (che	Check if Applicable:			
	Pre-primary Report Due April 28 - May 2, 2008 Post-primary Report Due May 26 - 30, 2008			
General - First Report Due Sept. 22 - 26, 2008 Pre-general Report Due Oct. 20 - 24, 20	box of appropriate reporting period			
	ort Due in Calendar Year urday in March or within 6 ter	Final Report 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.	\$5,777.04				
Total Contributions (from Page 2) 2.	+ -0-				
Subtotal (lines 1±2) 3.	= \$5,777.04				
Total Expenditures (from Page 2) 4.	- = 93.47				
Ending Balance (lines 3-4)	= \$5,683,67				
*Cannot have a negative ending balance					

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

\$10,504.68

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

\$ 8 673.77

CONTRIBUTORS OF:

\$250 or less

More than \$250

	\$250 OF 1635							
Date	Full Name	Amount	Date	- 111			Amount	
			1	Full Name: Address:				
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				Full Name: Address:				
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				Full Name: Address:				
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ha	ve been atached.						n yas	
	ITEMIZED EXPENDITUR	ES (Itemize	3rd p	party expenditures	reimburser	nents)		
Date	Full name, residence address (if pe	rson); business a	address	(if firm)	Purpose		Amount	
2/1	Hountaineer Gas Company				Headquarters		93.47	
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	PAGE AS YOU NEED.			•	Total Expend	aitures:	93,47	
		OATH C	RAF	FIRMATION	10.6			
_								
1. P.	Beverly Lund		. S'	wear or affirm that t	he attached	statement	is true and	
correct,	, to the best of my knowledge,	for all finan	cial tra	ansactions occurring	within the p	eriod cov	ered by this	
stateme	ent, as required by West Virginia	a Code §3-8	-5a.					
13	Dewelle Send			Signature	e of Candidate	e. Agent.	or Treasurer	
Date Cyrcl 2009.				Office Use Only				
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