State of West Virginia Campaign Financial Statement (Short Form) in Relation to the _____ 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 Na	ime	Candidate or Committee's Treasurer			
Wyoming Ct. Ed	Assr Pac	Johndra A. Sutphin			
Political Party (for candidates)		Treasurer's Mailing Address (Street, Route or P.O. Box)			
		406 McGinnis St			
Office Sought (for candidat	es) District/Division	City, State, Zip Code	Daytime	Phone #	
		Beckley, W.V 258	01 304	-294-5252	
Primary - First Report Due March 27-April 2,2010 General - First Report Due Sept. 20-24, 2010	Pre-general Report Due Oct. 18-22, 2010	Post-general Report Due Nov 15-Dec 15, 2010	Che	Amended Report You must also check box of appropriate reporting period	
Non-Election Cycle Reporting Period: Annual Report Due last Satu days thereafte		rt Due In Calendar Year urday in March or within 6 ter		Final Report Zero balance required. PAC must also file Form F-6 Dissolution	
	DE	SORT TOTALS			

KEPORI IDIALS

(Fill in totals after you have completed page 2)

CASH BALANCE SUMMARY

Beginning Balance (ending balance from previous report)	1. 3900,79	TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE (Add line 2 from all reports)		
Total Contributions (from Page 2)	2. + &			
Subtotal (lines 1+2)	= 3900,79	TOTAL EXPENDITURES		
Total Expenditures (from Page 2)	4 Ø	ELECTION YEAR-TO-DATE (Add line 4 from all reports)		
Ending Balance (lines 3-4)	= 3900.79			
*Cannot have a neg	ative ending balance			

CONTRIBUTORS OF:

\$250 or Less

More than \$250

Date	Full Name	Amount	Date				Amount
				Full Name: Address:			
				Contributor's job: (Individ Where contributor works Affiliation: (Political comm			
				Full Name: Address:			
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)			
				Full Name: Address:	Name: iress: utributor's job: (Individual) ere contributor works: (Individual) iation: (Political committee) Name:		
				Where contributor works			
				Full Name: Address:			
				Contributor's job: (Individ Where contributor works Affiliation: (Political comm			
	Check if additional pages Total Contributions: (add both columns)						7
	Check if additional pages have been atached.			(add bot	n columns) •		
	ITEMIZED EXPENDITU	RFS (Item	ize 3ı	rd parv expenditu	res/ reimburs	ements	5)
Date		•			Purpose		Amount
							0.00
 							
							
	AS MANY COPIES IS PAGE AS YOU NEED.			,	Total Expend	litures:	D
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	- 1 1						
corre	Johndra A. Brooks - Suct, to the best of my knowledge, o	f all financ	cial tra	wear or affirm that ansactions occurring	the attached s g within the po	stateme eriod co	nt is true and overed by this
stater	ment, as required by West Virginia						
	Andra a Brooks-x	Julahi	u.	Signatur	e of Candidate	e. Aaent	t, or Treasurer
// Date_	Andra a Brooks-x 9-20 20 10	,					
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				Recei	ved Rv		The state of the s

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West Unginia Scretary of State's Office Building 1, Suite 1574 1900 Kanawka Blod. Cast Charleston, Wo 25305

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