## State of West Virginia Campaign Financial Statement (Short Form) in Relation to 2010 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?

		rt Due In Calendar Year urday in March or within 6 er	Zero balance required. PAC must also file Form F-6 Dissolution			
Primary - First Report Due March 27-April 2,2010  General - First Report Due Sept. 20-24, 2010	Pre-primary Report Due April 26-30, 2010  Pre-general Report Due Oct. 18-22, 2010	Post-primary Report Due May 24-June 23, 2010  Post-general Report Due Nov 15-Dec 15, 2010	Check if Applicable:  Amended Report You must also check box of appropriate reporting period  Final Report			
Office Sought (for candida	<u> </u>	Treasurer's Mailing Address (Street 133 - Waller Was	et, Route or P.O. Box)  Daytime Phone #  304-389-1572			
Candidate or Committee N	ame /	Candidate or Committee's Treasurer				

## REPORT TOTALS

(Fill in totals after you have completed page 2)

## CASH BALANCE SUMMARY

Beginning Balance (ending balance from previous report)		\$ 4,181.36			
Total Contributions (from Page 2)		+ -0-			
Subtotal (lines 1+2)	3.	= 4 4,181.34			
Total Expenditures (from Page 2)	4.	- 180.75			
Ending Balance (lines 3-4)		= 3,400.61			
*Cannot have a negative ending balance					

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

\$4,645,00

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

# 4,094.23

## **CONTRIBUTORS OF:**

\$250 or Less

More than \$250

Date	Full Name	Amount	Date				Amount			
				Full Name: Address:						
	,	, , , , , ,		Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)						
				Full Name: Address:						
				Contributor's job: (Individ Where contributor works Affiliation: (Political comm						
				Full Name: Address:						
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				Full Name: Address:						
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	Charles Aliabara			Total Co	ntributions:					
Check if additional pages (add both columns)										
ITEMIZED EXPENDITURES (Itemize 3rd pary expenditures/ reimbursements)										
Date	Full name, residence address (if person	•			Purpose	sements)	Amount			
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1/10 Sept 198					adred	uery 1.	50.00			
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4/	Wistate 1/ay Dept			***************************************	Bus. H	un	2510			
410	marlistin, m				Bert le	wat	03			
03/10	Callagerelle W				at Fall		50.			
	AS MANY CORIES IS PAGE AS YOU NEED.			٦	Total Expend	ditures:	180.75			
		OATH O	RAF	FIRMATION						
I, 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.										
Signature of Candidate, Agent, or Treasurer										
Date_	Date Xun 33 . 20 10									
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