

# 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?

|                                                                                |                   |                                                                                     |                                        |
|--------------------------------------------------------------------------------|-------------------|-------------------------------------------------------------------------------------|----------------------------------------|
| Candidate or Committee Name<br><b>NORTH CENTRAL WV Building Trades COFFACE</b> |                   | Candidate or Committee's Treasurer<br><b>Steve Perdue</b>                           |                                        |
| Political Party (for candidates)                                               |                   | Treasurer's Mailing Address (Street, Route or P.O. Box)<br><b>1001-A N 12th St.</b> |                                        |
| Office Sought (for candidates)                                                 | District/Division | City, State, Zip Code<br><b>CLARKSBURG, WV 26301</b>                                | Daytime Phone #<br><b>304-624-3882</b> |

## Election Cycle Reporting Period (check one):

- |                                                                                      |                                                                                        |                                                                                 |
|--------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| <input type="checkbox"/> <b>Primary - First Report</b><br>Due March 27-April 2, 2010 | <input checked="" type="checkbox"/> <b>Pre-primary Report</b><br>Due April 26-30, 2010 | <input type="checkbox"/> <b>Post-primary Report</b><br>Due May 24-June 23, 2010 |
| <input type="checkbox"/> <b>General - First Report</b><br>Due Sept. 20-24, 2010      | <input type="checkbox"/> <b>Pre-general Report</b><br>Due Oct. 18-22, 2010             | <input type="checkbox"/> <b>Post-general Report</b><br>Due Nov 15-Dec 15, 2010  |

## Check if Applicable:

- ☐ **Amended Report**  
You must also check box of appropriate reporting period
- ☐ **Final Report**  
**Zero balance required.**  
PAC must also file Form F-6 Dissolution

## Non-Election Cycle Reporting Period:

- ☐ **Annual Report Due In \_\_\_\_\_ Calendar Year**  
Due last Saturday in March or within 6 days thereafter

## REPORT TOTALS

(Fill in totals after you have completed page 2)

## CASH BALANCE SUMMARY

|                                                                      |                    |
|----------------------------------------------------------------------|--------------------|
| <b>Beginning Balance</b><br>(ending balance from previous report) 1. | <b>1650.00</b>     |
| <b>Total Contributions</b><br>(from Page 2) 2.                       | <b>+ 15000.00</b>  |
| <b>Subtotal</b><br>(lines 1+2) 3.                                    | <b>= 16650.00</b>  |
| <b>Total Expenditures</b><br>(from Page 2) 4.                        | <b>- 11,250.00</b> |
| <b>Ending Balance</b><br>(lines 3-4)                                 | <b>= 4,400.00</b>  |
| <i>*Cannot have a negative ending balance</i>                        |                    |

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

**\$ 17000.00**

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

**13,250.00**

## CONTRIBUTORS OF:

\$250 or Less

More than \$250

| Date | Full Name | Amount | Date | Full Name:<br>Address:<br>Contributor's job: (Individual)<br>Where contributor works: (Individual)<br>Affiliation: (Political committee) | Amount |
|------|-----------|--------|------|------------------------------------------------------------------------------------------------------------------------------------------|--------|
|      |           |        |      | Full Name:<br>Address:<br>Contributor's job: (Individual)<br>Where contributor works: (Individual)<br>Affiliation: (Political committee) |        |
|      |           |        |      | Full Name:<br>Address:<br>Contributor's job: (Individual)<br>Where contributor works: (Individual)<br>Affiliation: (Political committee) |        |
|      |           |        |      | Full Name:<br>Address:<br>Contributor's job: (Individual)<br>Where contributor works: (Individual)<br>Affiliation: (Political committee) |        |
|      |           |        |      | Full Name:<br>Address:<br>Contributor's job: (Individual)<br>Where contributor works: (Individual)<br>Affiliation: (Political committee) |        |
|      |           |        |      | Full Name:<br>Address:<br>Contributor's job: (Individual)<br>Where contributor works: (Individual)<br>Affiliation: (Political committee) |        |
|      |           |        |      | Full Name:<br>Address:<br>Contributor's job: (Individual)<br>Where contributor works: (Individual)<br>Affiliation: (Political committee) |        |

Total Contributions:  
(add both columns)
☐
Check if additional pages  
have been attached.

## ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/ reimbursements)

| Date | Full name, residence address (if person); business address (if firm)    | Purpose           | Amount  |
|------|-------------------------------------------------------------------------|-------------------|---------|
| 4/15 | Committee to Elect Frank Angotti<br>PO Box 1652, Clarksburg WV 26307    | Pol. Contribution | 1000.00 |
| 4/15 | Committee to Elect Tim Miley<br>23 Valley Green Rd Bridgeport WV 26330  | Pol. Contribution | 1000.00 |
| 4/15 | Committee to Elect Mike Romano<br>138 S. Second St. Clarksburg WV 26307 | Pol. Contribution | 250.00  |
| 4/15 | Committee to Elect Bill Hammon<br>PO Box 1192 Buckhannon WV 26207       | Pol. Contribution | 1000.00 |
| 4/15 | Committee to Elect Shelby Leary<br>PO Box 76 Blacksburg WV 26307        | Pol. Contribution | 1000.00 |

MAKE AS MANY COPIES  
OF THIS PAGE AS YOU NEED.

Total Expenditures:

 Cont

## OATH OR AFFIRMATION

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 \_\_\_\_\_, 20\_\_\_\_.

Office Use Only

Received By: \_\_\_\_\_

## CONTRIBUTORS OF:

\$250 or Less

More than \$250

| Date | Full Name | Amount | Date | Full Name                                                                                                                                                                                                                | Amount  |
|------|-----------|--------|------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------|
|      |           |        |      | Full Name: NORTH CENTRAL WV Building<br>Address: 1001-A 12th TRADING TRADER<br>Contributor's job: (Individual) CLARKSBURG COUNCIL<br>Where contributor works: (Individual) W 24381<br>Affiliation: (Political committee) | 1500.00 |
|      |           |        |      | Full Name:<br>Address:<br>Contributor's job: (Individual)<br>Where contributor works: (Individual)<br>Affiliation: (Political committee)                                                                                 |         |
|      |           |        |      | Full Name:<br>Address:<br>Contributor's job: (Individual)<br>Where contributor works: (Individual)<br>Affiliation: (Political committee)                                                                                 |         |
|      |           |        |      | Full Name:<br>Address:<br>Contributor's job: (Individual)<br>Where contributor works: (Individual)<br>Affiliation: (Political committee)                                                                                 |         |
|      |           |        |      | Full Name:<br>Address:<br>Contributor's job: (Individual)<br>Where contributor works: (Individual)<br>Affiliation: (Political committee)                                                                                 |         |

☐ Check if additional pages  
have been attached.

**Total Contributions:** \$1500.00  
(add both columns)

## ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/ reimbursements)

| Date | Full name, residence address (if person); business address (if firm)      | Purpose           | Amount  |
|------|---------------------------------------------------------------------------|-------------------|---------|
| 4/15 | Committee to Elect Brent Boggs<br>PO Box 254 Grassaway W 26624            | Pol. Contribution | 1000.00 |
| 4/15 | Committee to Elect Mary Poling<br>Rt 1 Box 331 Marlinton WV 26405         | Pol. Contribution | 1000.00 |
| 4/15 | Committee to Elect Ron Fragale<br>503 E Main St. Clarksburg W 26307       | Pol. Contribution | 1000.00 |
| 4/15 | Committee to Elect Richard Jagunite<br>139 Vermont Ave Clarksburg W 26307 | Pol. Contribution | 1000.00 |
|      |                                                                           |                   |         |

 MAKE AS MANY COPIES  
OF THIS PAGE AS YOU NEED.

**Total Expenditures:** Cont

## OATH OR AFFIRMATION

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 \_\_\_\_\_, 20\_\_\_\_.

Office Use Only

Received By: \_\_\_\_\_

## CONTRIBUTORS OF:

\$250 or Less

More than \$250

| Date | Full Name | Amount | Date | Full Name:<br>Address:<br>Contributor's job: (Individual)<br>Where contributor works: (Individual)<br>Affiliation: (Political committee) | Amount |
|------|-----------|--------|------|------------------------------------------------------------------------------------------------------------------------------------------|--------|
|      |           |        |      | Full Name:<br>Address:<br>Contributor's job: (Individual)<br>Where contributor works: (Individual)<br>Affiliation: (Political committee) |        |
|      |           |        |      | Full Name:<br>Address:<br>Contributor's job: (Individual)<br>Where contributor works: (Individual)<br>Affiliation: (Political committee) |        |
|      |           |        |      | Full Name:<br>Address:<br>Contributor's job: (Individual)<br>Where contributor works: (Individual)<br>Affiliation: (Political committee) |        |
|      |           |        |      | Full Name:<br>Address:<br>Contributor's job: (Individual)<br>Where contributor works: (Individual)<br>Affiliation: (Political committee) |        |
|      |           |        |      | Full Name:<br>Address:<br>Contributor's job: (Individual)<br>Where contributor works: (Individual)<br>Affiliation: (Political committee) |        |

☐Check if additional pages  
have been attached.Total Contributions:  
(add both columns)

## ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/ reimbursements)

| Date | Full name, residence address (if person); business address (if firm)                | Purpose            | Amount  |
|------|-------------------------------------------------------------------------------------|--------------------|---------|
| 4/15 | Committee to Elect Barbara Fleischman<br>235 High St. Suite 418 Morgantown WV 26501 | Pol. Contributions | 1000.00 |
| 4/15 | Committee to Elect Charlene Marshall<br>1010 Ashton Drive Morgantown WV 26501       | Pol. Contribution  | 1000.00 |
| 4/15 | Cook For The House<br>160 Mount Chateau Rd Morgantown WV 26501                      | Pol. Contribution  | 1000.00 |
|      |                                                                                     |                    |         |
|      |                                                                                     |                    |         |

MAKE AS MANY COPIES  
OF THIS PAGE AS YOU NEED.

Total Expenditures:

11,250.00

## OATH OR AFFIRMATION

I, Steven Perdue, 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.

Steven Perdue

Signature of Candidate, Agent, or Treasurer

Date April 30, 2010.

Office Use Only

10:12:01 2010 MAY -5 PM

Received By: \_\_\_\_\_

NEUVILLE  
1001-A 15. 18th St.  
Clarksburg, WV 26301

CLARKSBURG WV 263  
04 MAY 2010 PM 3 L



Secretary of State of WV  
Building 1 Suite 157-K  
100 Kanawha Blvd. East

25303+0770 Charleston, WV 25305