

# State of West Virginia Campaign Financial Statement (Long Form) in Relation to the 2010 Election Year

Candidate or Committee Name <i>Roane County Republican Exec. Comm.</i>		Candidate or Committee's Treasurer <i>Nada Camp</i>	
Political Party (for candidates) <i>Republican</i>		Treasurer's Mailing Address (Street, Route or P.O. Box) <i>810 JOHN BOGGS Rd.</i>	
Office Sought (for candidates)	District/Division	City, State, Zip Code <i>Spencer, WV 25376</i>	Daytime Phone # <i>304/927-2933</i>

**Election Cycle Reporting Period (check one):**

**Primary - First Report** Due March 27-April 2, 2010

**Pre-primary Report** Due April 26-30, 2010

**Post-primary Report** Due May 24-Jun 23, 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

**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 at the completion of the report.*

### RECEIPTS OF FUNDS:

Totals for this Period

Contributions (Page 3)		
Monetary Contributions from all Fund-Raising Events (Page 4)	+	-
Receipt of a Transfer of Excess Funds (Page 8)	+	-
In-Kind Contributions (Page 5)	+	<i>26.67</i>
<b>Total Contributions</b>	=	<i>26.67</i>
Loans Received (Page 6)	+	-
Other Income	=	-

### OUTSTANDING LOANS & DEBTS:

Unpaid Bills (Page 9)		-
Outstanding Loans (Page 6)	+	-
<b>Total Debts:</b>	=	-

### CASH BALANCE SUMMARY

Beginning Balance (ending balance from previous report)	<i>5,207.09</i>
Total Monetary Contributions	<i>+ 26.67</i>
Total Other Income	+
<b>Subtotal a.</b>	=
Total Expenditures (Page 7)	<i>344.72</i>
Total Disbursements of Excess Funds (Page 8)	+
Repayment of Loans (Page 6)	+
<b>Subtotal b.</b>	<i>= 344.72</i>
<b>Ending Balance:</b> (Subtotal a. - Subtotal b.)	<i>= 4,889.04</i>
<i>*Cannot be negative balance</i>	

**TOTAL CONTRIBUTIONS  
ELECTION YEAR-TO-DATE  
(Add total contributions from all reports)**

*26.67*

**TOTAL EXPENDITURES  
ELECTION YEAR-TO-DATE  
(Add total expenditures from all reports)**

*344.72*



**Contributors of  
More than \$250**

Check if additional pages  
have been attached.

DATE	INDIVIDUAL CONTRIBUTOR OR COMMITTEE'S NAME	AMOUNT
	Full Name: Address: (residential and mailing if they are different) Contributor's job: (individual contributor only) Where contributor works: (individual contributor only) Affiliation: (political committee only)	
	Full Name: Address: (residential and mailing if they are different) Contributor's job: (individual contributor only) Where contributor works: (individual contributor only) Affiliation: (political committee only)	
	Full Name: Address: (residential and mailing if they are different) Contributor's job: (individual contributor only) Where contributor works: (individual contributor only) Affiliation: (political committee only)	
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	Full Name: Address: (residential and mailing if they are different) Contributor's job: (individual contributor only) Where contributor works: (individual contributor only) Affiliation: (political committee only)	

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OF THIS PAGE AS YOU NEED**

Subtotal of all contributors of more than \$250  
 Subtotal of all contributors of \$250 or less (From page 2)  
**Total Contributions:**

+	
=	

Roane Co  
Citizens Exec. Committee  
Nada Camp, Tenn.  
810 John Boggess Rd.  
Spencer, TN 25276



TN - Secretary of State  
Building 1 - Suite 157  
1900 Kanawha Blvd., East  
Charles Town, WV - 25305

FUND-RAISING EVENTS

Check if additional pages have been attached.

All monies contributed received at a fundraiser must be reported in the Event Summary below. If contributor's name and amount are not listed, the contribution must be turned over to the West Virginia General Revenue Fund.

For more information on reporting requirements, apply to the State Auditor, Office of the Auditor, (MAY Code 20-2-5a)

EVENT SUMMARY

NAME OF EVENT _____	LOCAL GOVERNMENT CONTRIBUTIONS: _____
Type of Event _____	Total Expenditures: _____
Address of Place held _____	NET RECEIPTS: _____
	Contributions Related to the Fund-raiser (Itemized on page 5.) _____

Contributors of \$250 or less

Contributors of more than \$250

Date	Full Name	Amount	Date	Amount
			Full Name: Address: (residential and mailing if they are different)	
			Contributor's job: (Individual only)	
			Where contributor works: (Individual only)	
			Affiliation: (Political committee only)	
			Full Name: Address: (residential and mailing if they are different)	
			Contributor's job: (Individual only)	
			Where contributor works: (Individual only)	
			Affiliation: (Political committee only)	
			Full Name: Address: (residential and mailing if they are different)	
			Contributor's job: (Individual only)	
			Where contributor works: (Individual only)	
			Affiliation: (Political committee only)	
			Full Name: Address: (residential and mailing if they are different)	
			Contributor's job: (Individual only)	
			Where contributor works: (Individual only)	
			Affiliation: (Political committee only)	
Subtotal of contributors of \$250 or less:			Subtotal of contributors of more than \$250:	
Subtotal of contributors of \$250 or less: <input type="text"/>			Subtotal of contributors of more than \$250: <input type="text"/>	
			Total Contributions: <input type="text"/>	

MAKE COPIES OF THIS PAGE TO LIST ADDITIONAL CONTRIBUTIONS. ATTACH ADDITIONAL PAGES TO REPORT.

**OTHER INCOME: INTEREST, REFUNDS, MISCELLANEOUS RECEIPTS**

Date	Source of Income	Type of Receipt	Amount
3/17/11	Fibernet	Refund from Telephone Company for phone in Headquarters	26.67

Total Other Income:

26.67

Check if additional pages have been attached.

**IN-KIND CONTRIBUTIONS**

Date	Name and Contributor Information	Description of Contribution	Value

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Total In-Kind Contributions:



Receipt of a Transfer of Excess Funds

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Date	Candidate Committee Name and Year	Amount

Total Receipts of Transfers of Excess Funds:

Disbursements of Excess Funds

Date	Name of candidate committee and election year disbursing excess funds	Purpose of Disbursement	Amount

Total Disbursements of Excess Funds:

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