## State of West Virginia Campaign Financial Statement (Short Form) in Relation to 2011 Election Year

| (0110111 01111) 111 144   |  | riection test  |  |  |  |  |
|---|--|--|--|--|--|--|
| IF YOUR ANSWER TO ANY OF THE FOLLOWING USE THE LONG FORM (FORM F- 1. Has your committee received any loans? 2. Has your committee held any fundraisers? 3. Has your committee received any miscellaneous re 4. Does your committee have any unpaid bills? 5. Have you or anyone else given an in-kind contributi 6. Has your committee given or received a transfer of  | eceipts, such as refunds on to your campaign?  | ar checking account interest?  |  |  |  |  |
| Candidate or Committee Name   | Candidate or Commit  | andidate or Committee's Treasurer                                      |  |  |  |  |
| Political Party (for candidates)  | Vincenia Se  | Vinginia S Calhoun   |  |  |  |  |
| Political Party (for candidates)  |  | Treasurer's Mailing Address (Street, Route or P.O. Box)                |  |  |  |  |
|   | 1 .  | R+1 Box 215  |  |  |  |  |
| Office Sought (for candidates) District/Division  | City, State, Zip Code  | Daytime Phone #  |  |  |  |  |
|   | Marlinton WV   |  |  |  |  |  |
| Flaction Cycle Penarting Beried (e  |  | 24954 304-799-7237   |  |  |  |  |
| Election Cycle Reporting Period (check one):  Primary - First Report (Due last Saturday in March or within 6 days thereafter)  General - First Report (Due 43 days prior to the General election or within 4 business days)  Pre-general Report (Due 15 days before Primary election or within 4 business days)  Pre-general Report (Due 13 days after Primary election box of appropriate reporting period election or within 4 business days)  Final Report |  |  |  |  |  |  |
| Non-Election Cycle Reporting Period:  Annual Reporting Period:  Adaptable Due last S days there   | ar Year  Description Action Ac |  |  |  |  |  |
| CASH BALANCE SUMMA  |  |  |  |  |  |  |
| Beginning Balance (ending balance from previous report) 1.  | 54,50  | TOTAL CONTRIBUTIONS  |  |  |  |  |
| Total Contributions (from Page 2) 2. + /  | 77,00  | ELECTION YEAR-TO-DATE (Add line 2 from all reports)                    |  |  |  |  |
| Subtotal (lines $1+2$ ) 3. $=$ 8.   | 31,50  | TOTAL EVDENDERIDES   |  |  |  |  |
| Total Expenditures  | 50.00  | TOTAL EXPENDITURES ELECTION YEAR-TO-DATE (Add line 4 from all reports) |  |  |  |  |
| Ending Balance (lines 3-4) = 5  | 8 1 50   |  |  |  |  |  |

\*Cannot have a negative ending balance

## CONTRIBUTORS OF:

\$250 or Less

More than \$250

| Date   | Full Name                               | Amount          | 1 0-1-    |   | more than \$250                                 | )                                       |  |  |  |  |
|--|---|-----------------|-----------|---|---|---|--|--|--|--|
| 3/   | AFT- WVCom-                             | runoung         | Date      | Full Name:  |   |   | Amount   |  |  |  |
| 121  | ·                                       | 177α            |           | Address:  |   |   |  |  |  |  |
|  |   |                 |           | Contributor's job: (<br>Where contributor<br>Affiliation: (Political  | ndividual)<br>works: (Individual)<br>committee) |   |  |  |  |  |
|  |   |                 |           | Full Name:<br>Address:  |   | · · ·                                   | +  |  |  |  |
|  |   |                 |           | Contributor's job: (<br>Where contributor<br>Affiliation: (Political  | ndividual)<br>works: (Individual)<br>committee) |   |  |  |  |  |
|  |   |                 |           | Full Name:<br>Address:  |   |   | <del>                                     </del> |  |  |  |
|  |   |                 |           | Contributor's job: (I<br>Where contributor<br>Affiliation: (Political | ndividual)<br>works: (Individual)<br>committee) |   |  |  |  |  |
|  |   |                 |           | Full Name:<br>Address:  | •   |   |  |  |  |  |
|  | ,                                       |                 |           | Contributor's job: ()<br>Where contributor<br>Affiliation: (Political | ndividual)<br>works: (Individual)<br>committee) |   |  |  |  |  |
|  | Check if additional pages               |                 |           | Total<br>(add   | Contributions:<br>both columns)                 |   |  |  |  |  |
|  |   |                 |           |   |   |   |  |  |  |  |
| Date   Full name, residence address (if person): business address (reimbursements) |   |                 |           |   |   |   |  |  |  |  |
| Date 72 /  | Full name, residence address (if person | n); business ad | ldress (i | f firm)   | Purpose   |   | Amount   |  |  |  |
| 17/7   | Rick Thomason for                       | West of         |           | RI  | Governm   | ient a                                  |  |  |  |  |
| ,  | - in the crapson war                    |                 | 1/0       | 1152  | Comp  | raign &                                 | 500  |  |  |  |
|  | Lavalette WV 2535                       |                 |           |   |   |   |  |  |  |  |
|  |   |                 |           |   |   |   |  |  |  |  |
|  |   |                 | -         |   |   |   |  |  |  |  |
|  |   |                 |           |   |   |   |  |  |  |  |
|  |   |                 |           |   | ,   |   |  |  |  |  |
|  | AS MANY COPIES<br>S PAGE AS YOU NEED,   |                 | -         |   | Total F   |   |  |  |  |  |
|  |   | 0.15            |           |   | Total Expend                                    | litures:                                |  |  |  |  |
|  |   | OATH OR         | AFFI      | RMATION   |   |   |  |  |  |  |
| 1, <u>V</u> ;  | ginia S alhoun                          |                 |           |   |   |   |  |  |  |  |
| correc   | to the best of my knowledge of          | all financia    | _, SW6    | ear or affirm the   | at the attached s                               | statement is                            | true and   |  |  |  |
| staten<br>1/1  | nent, as required by West Virginia C    | ode §3-8-5      | a.        | bactions occur  | ing within the pe                               | ariod covered                           | d by this  |  |  |  |
| 1),  | 1000                                    | A.              |           |   |   |   |  |  |  |  |
| <del></del>  |   | Bu              |           | Signa   | ture of Candidate                               | Agent or T                              | reasurer   |  |  |  |
| Date_  | 3 26-1 20//                             |                 |           |   |   | ,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | , 5454, 51                                       |  |  |  |
|  |   |                 |           |   | Office Use Onl                                  |   | <del></del>                                      |  |  |  |
|  |   |                 |           |   |   |   |  |  |  |  |
|  | 2011 MAR 30 MA 9: 03                    |                 |           |   |   |   |  |  |  |  |
|  |   |                 |           |   | 99 <b>5</b> 10                                  | OF AAR III                              | U6   |  |  |  |
|  |   |                 |           | Re  | ceived By:                                      |   |  |  |  |  |

Calhourn Rt 1Box 215 Marlinton, Wu 24954