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?

	nocrotic E	Ex.Comm	Candidate or Committee's Treasurer Valax a A Cine Treasurer's Mailing Address (Street, Route or P.O. Box)			
Political Party (for candidate	es)					
Office Sought (for candidat	es) Dist	rict/Division	City, State, Zip Code	Daytime 125621 30	Phone# 以664313子	
Election Cycle Primary - First Report Due March 27-April 2,2010 General - First Report Due Sept. 20-24, 2010	Pre-prin	Period (che nary Report 26-30, 2010 eral Report 18-22, 2010	Post-general Repo	2010	eck if Applicable: Amended Report You must also check box of appropriate reporting period Final Report	
Non-Election Cycle Reporting Period:	Ø		rt Due In <u>2011</u> Calendar Yea urday in March or within 6 ter	ar LI	Zero balance required PAC must also file Form F-6 Dissolution	

REPORT TOTALS

(Fill in totals after you have completed page 2)

CASH BALANCE SUMMARY

Beginning Balance (ending balance from previous report) Total Contributions	1.	1621.97	TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE
	2.	+ Ø	(Add line 2 from all reports)
Subtotal (lines 1+2)	3.	= 1621.97	TOTALEXPENDITURES
Total Expenditures (from Page 2)	4.	_ 🗡	ELECTION YEAR-TO-DATE (Add line 4 from all reports)
Ending Balance (lines 3-4)		= 1621.97	
*Cannot have a nego			

CONTRIBUTORS OF:

\$250 or Less

More than \$250

Date	Full Name	Amount	Date				Amount
				Full Name: Address:			
				Contributor's job: (I Where contributor Affiliation: (Political	ndividual) works: (Individual) committee)		
				Full Name: Address:			
				Contributor's job: (I Where contributor Affiliation: (Political	works: (Individual)		
				Full Name: Address:			
				Contributor's job: (I Where contributor Affiliation: (Political	Individual) works: (Individual) committee)		
				Full Name: Address:			
	PHINI			Contributor's job: (Where contributor Affiliation: (Political	Individual) works: (Individual) committee)		
1	Check if additional pages			Total (add	Contributions: both columns)	Q	
<u> </u>	ave been atached.						
	ITEMIZED EXPENDITU	RES (Item	ize 3	rd pary expen	ditures/ reimbur	sements)	
Date	Full name, residence address (if pers	on); business a	ddress	(if firm)	Purpose		Amount
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MAKE	AS MANY COPIES						
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	ment, as required by West Virginia			ansactions occi	army within the p	JCHOU COVCI	ca by tills
V							
	Jului Un	J		Sign	nature of Candidat	te, Agent, or	Treasurer
Date_	<u>3/30</u> , 20/1.						
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MV Secretary of State
Building 1 Switz 157-K
1900 Kanawa Blvd Fast
Charleston W 25021

APPLICATION OF THE PROPERTY OF