State of West Virginia Campaign Financial Statement (Short Form) in Relation to the Apple 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?

Non-Election Cycle Reporting Period:	Annual Repo	ort Due in Calendar Year turday in March or within 6	Final Report Zero balance required. PAC must also file Form F-6 Dissolution		
Election Cycle Reporting Period (check one): Primary - First Report Due last Saturday in March or within 6 days thereafter. General - First Report Due last Saturday in September or within 6 days thereafter. Pre-primary Report Due 15 days preceding primary election or within 20 business days thereafter. Pre-general Report Due 13 days following general election or within 20 business days thereafter. Pre-general Report Due 13 days following general election or within 20 business days thereafter. Since Pre-primary Report You must also check box of appropriate reporting period or within 20 business days thereafter.					
Office Sought (for candidate	es) District/Division	Gity, State, Zip Code Crafton WU 2635	Paytime Phone # 304 5-5664		
Capalidate or Committee Na Ja y DV 04/1+y 0 Political Party (for candidate	litical Action	Candidate or Committee's Treasurer IN OA O 4 C C Treasurer's Mailing Address (Street, F	toute or P.O. Box)		

(Fill in totals after you have completed page 2)

CASH BALANCE SUMMARY

Beginning Balance (ending balance from previous report)	1.	2444.81		
Total Contributions (from Page 2)	2.	+ 316.83		
Subtotal (lines 1+2)	3.	= 2761.64		
Total Expenditures (from Page 2)	4.	- 0		
Ending Balance (lines 3-4)		= 2761.64		
*Cannot have a negative ending balance				

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

3/6.83

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

			_	
	0			
-		-	_	

CONTRIBUTORS OF:

\$250 or Less

More than \$250

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	Full Name	Amount	Date	Amount			
April Name: Address: Contributor, job: (individual) Affiliation: (Foliada committee) Affiliation: (Foliada					Full Name: W V	/EA		
Address: Contributor's job: (individual) Where conflicted works: (find/wdus) Address: Contributor's job: (individual) A					Contributor's job: Where contributo Affiliation: (Politic	(Individual) r works: (Individual) al committee) (MAY/es /sn WV	316.83	
Full Name: Address: Contributor yok (Individual) Where contributor yok (Individual) Contributor yok (Individual) Address: Contributor yok (Individual) Contributo					Full Name: Address:			
Address: Contributor's job: (Individual) Where contributor vote: (Individual) Affiliation (Political committee) Check if additional pages have Contributor's job: (Individual) Affiliation (Political committee) Total Contributors: (add both columns) Check if additional pages have Contributor's job: (Individual) Affiliation (Political committee) Total Contributions: (add both columns) Full name, residence address (if person); business address (if firm) Purpose Amount OATH OR AFFIRMATION Linda Coyce and correct, to the best of my knowledge, of all financial transactions statement, as required by West Virginia Code §3-8-5a. Amala Layce Signature of Candidate, Agent, or Treasurer Office Use Only Office Use Only					Contributor's job: Where contributo Affiliation: (Politic	(Individual) r works: (individual) al committee)		
Check if additional pages have Contributor's job; (individual)					Address:			
Address: Contributors job: (Individual) Where contributors in (Political Contributions: ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/ relimbursements) Date Full name, residence address (If person); business address (If firm) MAKE AS MANY COPIES OF THIS PAGE AS YOU NEED. OATH OR AFFIRMATION Linda Royce 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. Anda Royce Signature of Candidate, Agent, or Treasurer Date Office Use Only Office Use Only					Contributor's job Where contributo Affiliation: (Politic	(Individual) or works: (Individual) ¢al committee)		
Check if additional pages have been atached. ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/ relimbursements) Date Full name, residence address (if person); business address (if firm) Purpose Amount MAKE AS MANY COPIES OF THIS PAGE AS YOU NEED. OATH OR AFFIRMATION Linda Royce swear or and correct, to the best of my knowledge, of all financial transactions statement, as required by West Virginia Code §3-8-5a. Anda Royce Signature of Candidate, Agent, or Treasurer Date Office Use Only Office Use Only Office Use Only					Full Name: Address:			
TEMIZED EXPENDITURES (Itemize 3rd party expenditures/ reimbursements) Date Full name, residence address (if person); business address (if firm) Purpose Amount					Contributor's job Where contribut Affiliation: (Politi	: (Individual) or works: (Individual) cal committee)		
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Purpose Amount MAKE AS MANY COPIES OF THIS PAGE AS YOU NEED. OATH OR AFFIRMATION In da Royce , swear or and correct, to the best of my knowledge, of all financial transactions statement, as required by West Virginia Code §3-8-5a. Anda Royce Signature of Candidate, Agent, or Treasurer Date	<i>b</i>	een atached.						
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