

CONTRIBUTORS OF:

\$250 or Less

More than \$250

Date	Full Name	Amount	Date	Amount
				Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)
				Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)
				Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)
				Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)

Check if additional pages have been attached.

Total Contributions: (add both columns)

0

ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/ reimbursements)

Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount

MAKE AS MANY COPIES OF THIS PAGE AS YOU NEED.

Total Expenditures:

0

OATH OR AFFIRMATION

I, Joe Gresham, 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.

Joe Gresham
Date 7-19- 2011

Signature of Candidate, Agent, or Treasurer

Office Use Only

Received By: _____

STATE OF WEST VIRGINIA
2011 JUL 21 AM 9:58

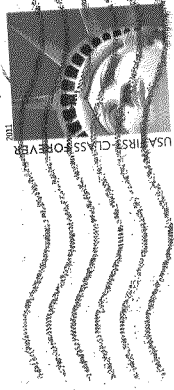


WV State Council of Machinists
International Association of Machinists
and Aerospace Workers, AFL-CIO



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CHARLESTON WV 253
20 JUL 2011 PM 2 L



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Charleston, West Virginia 25305

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