

CAMPAIGN FINANCIAL STATEMENT

Short Form

Relating to Elections Held in 19 2002

Please check the appropriate box to indicate which report you are filing

- ☐ **First or Annual:**
Due last Saturday
in March or within
15 days thereafter
- ☐ **Pre-Primary:**
Due 7 - 10 days
before a primary
election.
- ☒ **Post-primary:**
Due 25 - 30 days
after a primary
election.
- ☐ **Pre-General:**
Due 7 - 10 days
before a general
or special election.
- ☐ **Post-General:**
Due 25 - 30 days
after a general or
special election.
- ☐ **Final report:** Campaign fund has a zero balance and no loans or bills outstanding. There will be no further activity.
(YOU MUST FILE A STATEMENT OF DISSOLUTION WITH THIS REPORT IF THE FILING IS FOR A POLITICAL ACTION COMMITTEE)

- Have you made or accepted any loans to your campaign? ☐ Yes ☐ No
- Have you had any fundraisers? ☐ Yes ☐ No
- Have you received any miscellaneous receipts, such as refunds or interest on a checking account? ☐ Yes ☐ No
- Do you have any unpaid bills? ☐ Yes ☐ No
- Have you or anyone else given an in-kind contribution to your campaign? ☐ Yes ☐ No

IF YOU ANSWERED "YES" TO ANY OF THESE QUESTIONS, YOU MUST FILL OUT THE LONG FORM

Candidate <u>NICHOLAS COUNTY REPUBLICAN EXECUTIVE COMMITTEE</u>		Phone
Residence Address (Street, City, State, Zip)		(County)
Mailing Address (If Different) <u>P.O. Box 118 CRIVINGSVILLE, WV 26205</u>		
Office <u>IN CARE OF LAWRENCE TI BECKERLE CHAIRMAN</u>	District/Circuit/Division <u>NICHOLAS COUNTY</u>	Party <u>REPUBLICAN</u>
Candidate Committee/PAC	Address (Street, City, State, Zip)	Phone
Treasurer <u>NONE</u>	Residence/Mailing Address (Street, City, State, Zip)	Phone

REPORT SUMMARY: COMPLETE ALL ITEMIZED SCHEDULES BEFORE ENTERING TOTALS HERE

	Schedule	Column A: This Period	Column B: Election-To-Date
Receipts			
1. Itemized Contributions	1A		
2. Candidate Contributions	1A		
3. TOTAL RECEIPTS		<u>10-</u>	<u>10-</u>
Expenditures			
4. Itemized Expenditures	2A		
5. TOTAL EXPENDITURES		<u>10-</u>	<u>10-</u>
Cash Balance Summary			
6. Beginning Balance (From previous statement)		<u>217.95</u>	
7. Total Receipts (From Line 3)		<u>NONE</u>	
8. Sub Total (Line 7 + Line 8)		<u>217.95</u>	
9. Total Expenditures (From Line 5)		<u>10-</u>	
10. Ending Balance (Line 10 - Line 9)		<u>217.95</u>	

(This number is incorrect if it reflects a negative balance.)

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OFFICE OF STATE CLERK
SECRETARY OF STATE

ITEMIZED CONTRIBUTIONS(CANDIDATE & INDIVIDUAL): CASH OR CHECK RECEIPTS (SCHEDULE 1A)

\$250 or less

\$250 or more

Date	Full Name	Amount	Date	Full Name: Address:	Amount
				Occupation/ Business Affiliation:	
				Full Name: Address:	
				Occupation/ Business Affiliation:	
				Full Name: Address:	
				Occupation/ Business Affiliation:	
				Full Name: Address:	
				Occupation/ Business Affiliation:	
				Full Name: Address:	
				Occupation/ Business Affiliation:	
TOTAL (Both columns):					

ITEMIZED EXPENDITURES (SCHEDULE 2A)

Date	Full residence address (if person) or business address (if firm), mailing address	Purpose	Amount
TOTAL:			

OATH OR AFFIRMATION

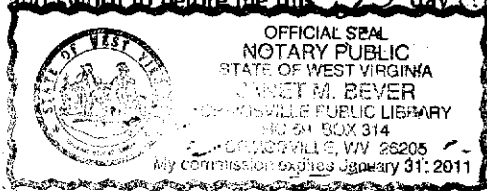
State of West Virginia, County of NICHOLAS

I, LAWRENCE T. BECKERLE, 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. I also swear or affirm that I or my campaign committee have not accepted any loans, had any fundraisers, or accepted or made any in-kind contributions to my campaign during this reporting period.

Lawrence T. Beckerle
Signature of Candidate, Agent, or Treasurer

Subscribed and sworn to before me this 25 day of June, 2002

Notary Seal



Jan 31, 2011
My Commission expires

Janet M. Bever
Signature of Notary Public

Note: All notaries must use a rubber stamp or seal when notarizing any document. Failure to do so may lead to the revocation of the notary's commission.