State of West Virginia Campaign Financial Statement (Short Form) in Relation to 2012 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?

*Cannot have a negative ending balance

6. Has your committee given or received a		s?					
Candidate or Committee Name Puthan O. Rep Political Party (for candidates)	Candidate or Commit Jane Treasurer's Mailing A	Ann Reed Address (Street, Route or P.O. Box)					
Office Sought (for candidates) Distr	102 Frict/Division City, State, Zip Code	102 FOX Rum City, State, Zip Code 14/12 Daytime Phone #					
Hurricane 304-389-0638							
Election Cycle Reporting Primary - First Report Due March 31-April 6,2012 General - First Report Due Sept. 24-28, 2012 Pre-gene Due Oct. 2	Check if Applicable: Amended Report You must also check box of appropriate reporting period						
Non-Election Cycle Reporting Period:	Annual Report Due In Calendone last Saturday in March or with days thereafter	dar Year in 6 Final Report Zero balance required. PAC must also file Form					
REPORT TOTALS (Fill in totals after you have completed page 2) CASH BALANCE SUMMARY							
Beginning Balance (ending balance from previous report) 1.	200.00	TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE (Add line 2 from all reports)					
Total Contributions (from Page 2) 2.	+500.00						
Subtotal (lines 1+2) 3.	=700.00	TOTAL EXPENDITURES					
Total Expenditures (from Page 2) 4.	_	ELECTION YEAR-TO-DATE (Add line 4 from all reports)					
Ending Balance (lines 3-4)	=700,00						

CONTRIBUTORS OF:

\$250 or Less			More than \$250				
Date Full Name	Amount	Date	Amount Putn	amc	ounte	1 DV.	
126 PutnamCounte 128 Republican Women	7		Full Name: PCRe Address: POLITION Contributor's job: (Individual) Where contributor works: (In Affiliation: (Political committe Full Name: Address:	ee)Club	LVV'CO	onen 26	
			Contributor's job: (Individual) Where contributor works: (In Affiliation: (Political committe				
		-	Full Name: Address: Contributor's job: (Individual) Where contributor works: (In				
			Affiliation: (Political committe Full Name: Address:				
			Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)				
Check if additional pages have been atached.			Total Contri (add both o	ibutions: columns)	500.0	00	
ITEMIZED EXPENDIT	URES (Iten	nize 3r	d pary expenditures/	reimburs	ements)		
Date Full name, residence address (if perso				Purpose		Amount	
							
							
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					-		
MAKE AS MANY COPIES				-15	.,		
OF THIS PAGE AS YOU NEED.		_		al Expend	itures:		
I, Jane On Re and correct, to the best of my knowledge	e Q	ncial tr	IRMATION _, swear or affirm that ansactions occurring v	the attach	ed statemer	nt is true d by this	
statement, as required by West Virginia	Code §3-8	-5а.					
Janean 1	Beed	2	Signature of	F Candidate	e, Agent, or T	reasurer	
Date 4- 13 , 20 /2.							
				Office Use C	Only		
SOLZ ARA 30 ETT 19: 4.5							
			Received	Ву:	: []		



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