## 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?
- 6. Has your committee given or received a transfer of excess campaign funds?

Candidate or Committee Na	ducators PAC	Candidate or Committee's Treasure	lett		
Political Party (for candidat	es)	Treasurer's Mailing Address (Street, Route or P.O. Box)			
Office Sought (for candidat	es) District/Division	City, State, Zip Codel	Daytime Phone # 304 - 515 - 51		
Primary - First Report Due March 31-April 6,2012  General - First Report Due Sept. 24-28, 2012	Pre-general Report Due Oct. 22-26, 2012	ck one):  Post-primary Report  Due May 21-June 19, 2012  Post-general Report  Due Nov 19-Dec 19, 2012	Check if Applicable:  Amended Report You must also check box of appropriate reporting period  Final Report		
Non-Election Cycle Reporting Period:	Annual Report Due In Calendar Year  Due last Saturday in March or within 6  days thereafter		Zero balance required. PAC must also file Form		
	P. P. P.	ODT TOTAL C	<del></del>		

## REPORT TOTALS

(Fill in totals after you have completed page 2)

## CASH BALANCE SUMMARY

Beginning Balance (ending balance from previous report)		1,201.11				
Total Contributions (from Page 2)		+ -0-				
Subtotal (lines 1+2)	3.	=1,201.11				
Total Expenditures (from Page 2)	4.	0				
Ending Balance (lincs 3-4)		=1,201.11				
*Cannot have a negative ending balance						

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

\$ 59D, 33

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

\$ 153,73

## CONTRIBUTORS OF:

\$250 or Less

More than \$250

Date	Full Name	Amount	Date	Amount					
				Full Name: Address:	٠				
				Contributor's job: (Individ Where contributor works: Affiliation: (Political comn	ual) (Individual) nittee)				
	111			Full Name: Address:					
	NH			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:					
ļ				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)					
Check if additional pages have (add both columns)  been atached.									
	ITEMIZED EXPENDIT	rures (Iter	nize 3	rd pary expenditu	es/ reimburs	ements)			
Date	(d. Erre)		firm)	Purpose		Amount			
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OF TH	IS PAGE AS YOU NEED.				• •	L			
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and correct, to the best of my knowledge, of all financial transactions occurring within the period covered by this									
and c	orrect, to the best of my knowled ment, as required by West Virgin	ia Code §3-	anciai 8-5a.	transactions occurr	ing within the	penou co	vered by time		
V	arita U. Bo	Lett		Signatu	re of Candida	te, Agent,	or Treasurer		
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Sarita A. Beckett 135 Lillybrook Ln. Crab Orchard, WV 25827