...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's Treasure Robert 4/ 7 | ackson | | | |
|--|--|--|--|--|
| Treasurer's Mailing Address (Street, Route or P.O. Box) $RRIBoxI22$ | | | | |
| City, State, Zip Code Manlinton 11/1/2 | Daytime Phone # 1 0 4 - 7 9 9 - 4 2 3 5 - 4 4 9 5 4 | | | |
| 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 | | | |
| port Due InCalendar Year aturday in March or within 6 after | Zero balance required. PAC must also file Form | | | |
| | Treasurer's Mailing Address (Street R | | | |

REPORT TOTALS

(Fill in totals after you have completed page 2)

CASH BALANCE SUMMARY

| Beginning Balance (ending balance from previous report) | 1. | | 144.98 |
|---|----------|-------|--------------|
| Total Contributions (from Page 2) | 2. | + | 0 |
| Submat (Unca (22)) | 3 | = | 144,98 |
| Total Expenditures (from Page 2) | 4. | _ | 0 |
| išming Balance (inc 64)- | | = | 144,98 |
| *Cannot have a ne | gativ | e ena | ling balance |

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

1,529,25

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

8 75,93

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) | | | | | |
| | Theck if additional pages have | | | Total Contributions: | | | -0- | | |
| | een atached. | | | (add both t | columns) E | | | | |
| ITEMIZED EXPENDITURES (Itemize 3rd pary expenditures/ reimbursements) | | | | | | | | | |
| Date | Full name, residence address (if pers | | | | Purpose | | Amount | | |
| | | | | | | | | | |
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| | | | | | - | | | | |
| | AS MANY COPIES S PAGE AS YOU NEED. | | | То | tal Expend | litures: | 2 | | |
| | | OATH | OR AF | FIRMATION | | | | | |
| I,, 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. | | | | | | | | | |
| | Robert Ja | eksi | سِ | Signature o | of Candidate | e Agent o | r Treasurer | | |
| Date_ | 10/16/20/2 | | | - Olginaturo d | ECEMPOIL | TATZ | | | |
| | | | | 3.74.7 4.479. | Office Use | Only 3107 | | | |
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| | Pagaivad By () 17) 17 | | | | | | | | |

Republican Exe Committee Robert W Jankson MRIBOX 122 Marlinton, WV 24954



Equality ... FOREVER

WV Secretary & State East, Charleston, WV 25305 1900 Kanawha Blud., Building 1, Suite 159-K

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