

# 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 Name<br><b>UPSHUR County Democrats</b> |                   | Candidate or Committee's Treasurer<br><b>ANDREA K HAYS</b>                             |  |
| Political Party (for candidates)                              |                   | Treasurer's Mailing Address (Street, Route or P.O. Box)<br><b>72 S. Florida Street</b> |  |
| Office Sought (for candidates)                                | District/Division | City, State, Zip Code<br><b>Buckhannon WV 26201</b>                                    | Daytime Phone #<br><b>304-472-2735</b> |

**Election Cycle Reporting Period (check one):**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> <b>Primary - First Report</b><br>Due March 31-April 6, 2012 | <input type="checkbox"/> <b>Pre-primary Report</b><br>Due April 23-27, 2012 | <input type="checkbox"/> <b>Post-primary Report</b><br>Due May 21-June 19, 2012 |
| <input type="checkbox"/> <b>General - First Report</b><br>Due Sept. 24-28, 2012      | <input type="checkbox"/> <b>Pre-general Report</b><br>Due Oct. 22-26, 2012  | <input type="checkbox"/> <b>Post-general Report</b><br>Due Nov 19-Dec 19, 2012  |

**Check if Applicable:**

- Amended Report**  
You must also check box of appropriate reporting period
- Final Report**  
Zero balance required.  
PAC must also file Form

**Non-Election Cycle Reporting Period:**

- Annual Report Due In 4/13 Calendar Year**  
Due last Saturday in March or within 6 days thereafter

## REPORT TOTALS

*(Fill in totals after you have completed page 2)*

### CASH BALANCE SUMMARY

|  |                  |
|--|------------------|
| <b>Beginning Balance</b><br>(ending balance from previous report) 1. | <b>2095,47</b>   |
| <b>Total Contributions</b><br>(from Page 2) 2.                       | +                |
| <b>Subtotal</b><br>(lines 1+2) 3.                                    | =                |
| <b>Total Expenditures</b><br>(from Page 2) 4.                        | -                |
| <b>Ending Balance</b><br>(lines 3-4)                                 | <b>= 2095.47</b> |
| <i>*Cannot have a negative ending balance</i>                        |                  |

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

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

**CONTRIBUTORS OF:**

**\$250 or Less**

**More than \$250**

| Date | Full Name | Amount | Date | Amount   |
|------|-----------|--------|------|--|
|      |           |        |      | Full Name:<br>Address:<br>Contributor's job: (Individual)<br>Where contributor works: (Individual)<br>Affiliation: (Political committee) |
|      |           |        |      | Full Name:<br>Address:<br>Contributor's job: (Individual)<br>Where contributor works: (Individual)<br>Affiliation: (Political committee) |
|      |           |        |      | Full Name:<br>Address:<br>Contributor's job: (Individual)<br>Where contributor works: (Individual)<br>Affiliation: (Political committee) |
|      |           |        |      | Full Name:<br>Address:<br>Contributor's job: (Individual)<br>Where contributor works: (Individual)<br>Affiliation: (Political committee) |

**Total Contributions:**  
(add both columns)

Check if additional pages have been attached.

**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:**

**OATH OR AFFIRMATION**

I, ANDREA HAYS, 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.

Andrea K Hays

Signature of Candidate, Agent, or Treasurer

Date 4/8, 2013.

Office Use Only  
SECRETARY OF STATE  
2013 APR 10 AM 10:03  
RECEIVED  
Received By: \_\_\_\_\_

HAYS 72 S Florida St  
Buckhannon WV  
26201

09 APR 2013 PM 2 L



Secretary of State  
Bldg 1, Suite 157K  
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Charleston, WV 25305-3077

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