

State of West Virginia Campaign Financial Statement
Relating to Elections Held in 2002

(For political committees, this will be the current election year. For candidates, this will be the year you were or are on the ballot.)

Short Form

(Supply all information requested. It is required by WV Code §3-8-5a.)

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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.

OCT 03 2002

1. Have you made or accepted any loans to your campaign?
2. Have you had any fundraisers?
3. Have you received any miscellaneous receipts, such as refunds, checking account interest or transferred funds from a previous campaign?
4. Do you have any unpaid bills?
5. Have you or anyone else given an in-kind contribution to your campaign?

JOE MANCHIN III
WV SECRETARY OF STATE

| Reporting Period (check one) | | | |
|---|---|---|---|
| <input type="checkbox"/> First or Annual Due last Saturday in March or within 15 days thereafter. | <input type="checkbox"/> Pre-Primary Due 7 - 10 days before a primary election. | <input type="checkbox"/> Post-primary Due 25 - 30 days after a primary election. | <input type="checkbox"/> Final Report (Campaign has zero balance, no loans or outstanding bills. Political committees must also file Statement of Dissolution (Form F-6), with this report.) |
| <input type="checkbox"/> First General Report Due last Saturday in September or within 15 days thereafter preceding a general election. | <input checked="" type="checkbox"/> Pre-General Due 7 - 10 days before a general or special election. | <input type="checkbox"/> Post-General Due 25 - 30 days after general or special election. | |

| | |
|--|---|
| Candidate or Committee Name <i>Committee for Competent Govt</i> | Treasurer <i>A MICHAEL McPECK</i> |
| Political Party (for candidates) | Treasurer's Mailing Address <i>79 Natchez Lane</i> |
| Office (for candidates) | <i>Parkersburg WV 26101</i> |
| District/Circuit/Division (for candidates) | Treasurer's Daytime Phone # <i>304 485 5487</i> |

REPORT SUMMARY

(Complete page 2 before entering totals on the Report Summary)

COLUMN A

Totals for this reporting period

COLUMN B

Totals for election cycle*

| | |
|--------------------------------------|-------------|
| Receipts | |
| 1. Total Contributions (Schedule 1A) | <i>0.00</i> |
| Expenditures | |
| 2. Total Expenses (Schedule 1B) | <i>0.00</i> |

| |
|-------------|
| <i>0.00</i> |
| <i>0.00</i> |

CASH BALANCE SUMMARY

(For information about the Cash Balance Summary, see page 3.)

*To get the numbers for Column B, add this report's Column A figures to Column B figures from the previous report. If this is the first report of the election cycle, Column B will be the same number as Column A.

| | |
|---|---------------|
| 3. Beginning Balance (from previous report) | <i>449.20</i> |
| 4. Total Contributions (from line 1) | <i>0.00</i> |
| 5. Subtotal (add lines 3 and 4) | <i>449.20</i> |
| 6. Total Expenses (from line 2) | <i>0.00</i> |
| 7. Ending Balance (subtract line 6 from line 5) <small>(This number is incorrect if it reflects a negative balance.)</small> | <i>449.20</i> |

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SECRETARY OF STATE

CONTRIBUTIONS

\$250 or less

\$250 or more

| Date | Full Name | Amount | Date | | Amount |
|----------------|-----------|--------|------|---|--------|
| | | | | Full Name: Address: | |
| | | | | Contributor's job: (Individual) Where works: (Individual) Affiliation: (Political committee) | |
| | | | | Full Name: Address: | |
| | | | | Contributor's job: (Individual) Where works: (Individual) Affiliation: (Political committee) | |
| | | | | Full Name: Address: | |
| | | | | Contributor's job: (Individual) Where works: (Individual) Affiliation: (Political committee) | |
| | | | | Full Name: Address: | |
| | | | | Contributor's job: (Individual) Where works: (Individual) Affiliation: (Political committee) | |
| TOTAL | | | | | |
| (both columns) | | | | | 0.00 |

Schedule 1B

ITEMIZED EXPENDITURES

| Date | Full name, residence address (if person); business address (if firm) | Purpose | Amount |
|--|--|---------|--------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| MAKE AS MANY COPIES OF THIS PAGE AS YOU NEED. | | TOTAL | 0.00 |

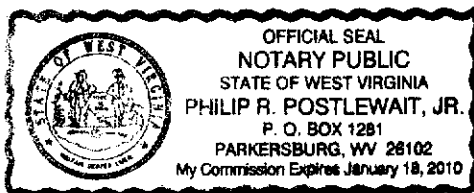
OATH OR AFFIRMATION

State of West Virginia, County of Wood

I, D. MICHAEL McPECK 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.

Signature of Candidate, Agent or Treasurer

Subscribed and sworn to before me this 2 day of October, 2002



My Commission Expires

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.