

State of West Virginia Campaign Financial Statement (Short Form) in Relation to 2006 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 <i>Executive Comm.</i> <i>Hancock County Democratic</i>		Candidate or Committee's Treasurer <i>Ann Moss</i>	
Political Party (for candidates) <i>D</i>		Treasurer's Mailing Address (Street, Route or P.O. Box) <i>526 North 10th St.</i>	
Office Sought (for candidates)	District/Division	City, State, Zip Code <i>New River Westmtn</i>	Daytime Phone # <i>304-748-3687</i>

Election Cycle Reporting Period (check one):

- | | | |
|---|--|---|
| <input type="checkbox"/> Primary - First Report
Due March 25- 31, 2006 | <input checked="" type="checkbox"/> Pre-primary Report
Due April 22- 29, 2006 | <input type="checkbox"/> Post-primary Report
Due June 3- 9, 2006 |
| <input type="checkbox"/> General - First Report
Due Sept. 2- 8, 2006 | <input type="checkbox"/> Pre-general Report
Due Oct. 21- 28, 2006 | <input type="checkbox"/> Post-general Report
Due Dec. 2- 8, 2006 |

Check if Applicable:

- Amended Report
You must also check box of appropriate reporting period
- Final Report
Zero balance required.
PAC must also file Form F-6 Dissolution

Non-Election Cycle Reporting Period:

- Annual Report Due in ___ 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

Beginning Balance (ending balance from previous report) 1.		<i>498.98</i>
Total Contributions (from Page 2) 2.	+	<i>0</i>
Subtotal (lines 1+2) 3.		<i>= 498.98</i>
Total Expenditures (from Page 2) 4.	-	<i>0</i>
Ending Balance (lines 3-4)		<i>= 498.98</i>
<i>*Cannot have a negative ending balance</i>		

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

\$1,300.00

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

\$2617.75

CONTRIBUTIONS

Less than \$250

\$250 or more

Date	Full Name	Amount	Date	Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	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)	

Check if additional pages have been attached.

Total Contributions: (add both columns)

0

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 Expenditures:

0

OATH OR AFFIRMATION

I, *Jamara Crown*, 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.

Jamara Crown Chair

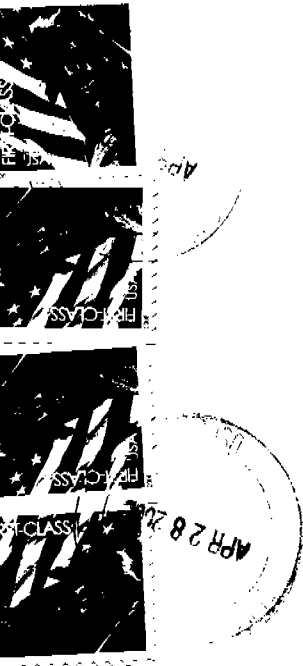
Signature of Candidate, Agent, or Treasurer

Date *April 24*, 200*4*

Due to the illness of our treasurer who is in critical care-

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MAY 02 2006
WV SECRETARY OF STATE

Five Corners
4426
WV
26034



Office of the Secretary of State
Election Office
State Capitol
Parade Blvd E
Charleston, WV 25305

Finance
Report