State of West Virginia Campaign Financial Statement (Long Form) in Relation to 2004 Election Year

For political committees, list current election year. For candidates, list the current campaign or the year of an open past campaign.

Supply all information requested. It is required by WV Code \$3-8-5a.

Reporting Period - First Primary

| Monongalia - Preston Area COPE | Dale P. McCray |
|--|---|
| Candidate or Committee Name | Candidate or Committee's Treasurer |
| | Rt. 1, Box 152 |
| Political Party (for candidates) | Treasurer's Mailing Address (Street, Route or P.O. Box) |
| | Terra Alta, WV 26764 304-329-0956 |
| Office Sought (for candidates) District/Division | City, State, Zip Code Daytime Phone # |

REPORT TOTALS

Fill in totals after you complete pages for contributions, fundraisers, other income, in-kind contributions, loans, expenditures, unpaid bills.

| Contributions of Money | Totals for this Period | Cash Balance Summary | | |
|--|------------------------|---|------------|--|
| 1. Contributions - Schedule 1A | \$0.00 | A. Beginning Balance | \$667.23 | |
| 2. Fund-raising Events - Schedule 2A | \$0.00 | (ending balance from previous report) | | |
| 3. Total Contributions (Add Lines 1 and 2) | \$0.00 | B. Total Receipts (Add | \$720.00 | |
| 4. Other Income - Schedule 3A | \$720.00 | lines 3 & 6) | | |
| 5. Loans Received - Schedule 1B | \$0.00 | C. Subtotal (Add lines A & B) | \$1,387.23 | |
| 6. Total Other Income (Add lines 4 and 5) | \$720.00 | D. Total Expenditures | \$0.00 | |
| 7. In-Kind (non-cash) Contributions - Schedule | \$0.00 | (Line 10) | | |
| Expenditures | | E. Ending Balance (Subtract line D from Line C) | \$1,387.23 | |
| 8. Itemized Expenditures - Schedule 2B | \$0.00 | TOTAL RECEIPTS | | |
| 9. Loan Repayment - Schedule 1B | \$0.00 | ELECTION YEAR | | |
| 10. Total Expenditures (Add Lines 8 and 9) | \$0.00 | (Add line B from all reports) \$720.00 | | |
| Outstanding Loans/Debts | | TOTAL EXPEN | DITURES | |
| 11. Unpaid Bills - Schedule 3B | \$0.00 | ELECTION YEAR-TO-DATE | | |
| 12. Outstanding Loans - Schedule 1B | \$0.00 | (Add line D from all reports) | | |
| 13. Total Debts (Add lines 11 and 12) | \$0.00 | \$0.00 | | |

CONTRIBUTIONS \$250.00 OR LESS

| Date | Individual Contributor or Committee's Name | Amount |
|------|--|--------|
| | Total | \$0.00 |

CONTRIBUTIONS OVER \$250.00

| Date | Individual Contributor or Committee's Name | Amount |
|------|--|--------|
| | Subtotal contributions of more than \$250.00 | \$0.00 |
| | Subtotal contributions of \$250.00 or less | \$0.00 |
| | Total | \$0.00 |

Schedule 2A

Fund-Raising Events

Event Summary

| Date of Even Name of Place Address of P Total Receipt NET RECEIF | ce Heldlace Held | xpenditures | m total receipts) | <u> </u> | |
|--|------------------|-------------|-------------------|----------|--------|
| Date | Full Name | Amount | Date | | Amount |

SCHEDULE 3A

OTHER INCOME: INTEREST, REFUNDS, MISCELLANEOUS RECEIPTS

| Date | Source of Income | Type of Receipt | Amount |
|------------|-----------------------------|-----------------|----------|
| 12/15/2003 | dues from affiliated locals | 2003 dues | \$720.00 |
| | | Total | \$720.00 |

SCHEDULE 4A

IN-KIND CONTRIBUTIONS

| Date | Description of Contribution | Value |
|------|-----------------------------|--------|
| | Total | \$0.00 |

LOANS

| Bank Loans: List name & address of | Column A | Column B | Column C | Column D |
|---|------------------|---------------|---------------|----------------|
| financial institution. | Balance of | Amount of new | Repayments | Balance |
| Candidate or Candidate's Spouse Loans: | previous loan at | loan received | during period | outstanding at |
| List name, residence and mailing address of | end of period | during period | | end of period |
| person(s) making or cosigning the loan. | | - ' | | |
| | Amount | Date Amount | Date Amount | Amount |

| SCHEDULE 2B | | | | |
|-----------------------|---------|--------|--|--|
| ITEMIZED EXPENDITURES | | | | |
| Date | Purpose | Amount | | |
| | Total | \$0.00 | | |

| SCHEDULE 3B | | |
|-------------|--------------|--------|
| | JNPAID BILLS | |
| Date | Purpose | Amount |
| | Total | \$0.00 |

Office Use Only

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