State of West Virginia Campaign Financial Statement Non's Held in 2004 Relating to Efect

Short Form %

(Supply all information requested. It is required by WY Oode

DU CANNOT USE THIS FORM. YOU IF YOUR ANSWER TO ANY OF THE FOLLOWING QUESTIONS IS "NES!" MUST USE THE LONG FORM (FORM F-7) TO FILE YOUR CAMPAGE

- 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?

	Reporting	Period (chec	ck c	one)		
First or Annual Due last Saturday in March or within 15 days thereafter.	a primar	10 days before y election.		Post-primary Due 25 - 30 days after a primary election.		Final Report (Campaign has zero balance, no loans or outstanding bills. Political committees
First General Report Due last Saturday in September or within 15 days thereafter preceding a general election.		neral 10 days before a or special election.		Post-General Due 25 - 30 days after general or special electi	on.	must also file State- ment of Dissolution (Form F-6). with this report.)
Candidate or Committee Name Mingo Co. Democratic Ex	Comm.	Treasurer France	25	L. Crawf	ore	4
Political Party (for candidates)	•	Treasurer's Mai	ilina			
Office (for candidates)	. 4. 1	Willia	an	son, WV 3	257	ole 1
District/Circuit/Division (for candidates)		Treasurer's Day	/time	Phone # 5 - 81 8 7		

REPORT SUMMARY

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

Totals for this reporting period

	CC		UM	N E	3
•	Totals	for	elec	ction	cvcle

Receipts 1. Total Contributions (Schedule 1A)	1,000.00
Expenditures 2. Total Expenses (Schedule 1B)	650.00

CASH BALANCE SUMMARY

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

3. Beginning Balance (from previous report)	30.70
4. Total Contributions (from line 1)	1000.00
5. Subtotal (add lines 3 and 4)	1030.70
6. Total Expenses (from line 2)	650.00
7. Ending Balance (subtract line 6 from line 5) (This number is incorrect if it reflects a negative balance.)	38070

*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.

CONTRIBUTIONS

Date

Amount

\$250 or less

Full Name

\$250 or more

Amount

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:		
		-0-	1	Contributor's job: (Individual) Where works: (Individual Affiliation: (Political committee)		
L			\		TAL	-0-
				(both colum	nns) L	
Sche	dule 1B IT	EMIZED E	XPEN	DITURES		
Date	Full name, residence address (if person); bus	,		Purpose	An	nount
					-	
					-	
_					 	
1					1	^
	L E AS MANY COPIES HIS PAGE AS YOU NEED.			TOTA	L —a	<u> </u>
		OATH O	R AF	TOTA	L <u>- a</u>	<u> </u>
OF TI	HIS PAGE AS YOU NEED.		R AF		L - a	<u> </u>
OF TH	of West Virginia, County of	Z	· · · · · · · · · · · · · · · · · · ·	FIRMATION		best of m
OF THE State	HIS PAGE AS YOU NEED.	, swear	or affir	FIRMATION m that the attached statement is true and correct		best of m
OF THE State	of West Virginia, County of Mine	, swear	or affir	m that the attached statement is true and correct overed by this statement. Transwaw L. Chaw	, to the	L
State	of West Virginia, County of Menery Lawy ford ledge, of all financial transactions occurring	, swear g within the pe	or affir	m that the attached statement is true and correctovered by this statement. Signature of Candidate, Agen	, to the	L_
State	of West Virginia, County of Mine	, swear g within the pe	or affir	m that the attached statement is true and correct overed by this statement. Transwaw L. Chaw	, to the	L_
State	of West Virginia, County of Ment Virginia, Cou	, swear g within the pe	or affir	m that the attached statement is true and correct overed by this statement. Signature of Candidate, Agent	, to the	easurer
State I State knowl	of West Virginia, County of Municipal Action of Medical Law ford ledge, of all financial transactions occurring cribed and sworn to before me this OFFICIAL SEAL NOTARY PUBLIC STATE OF WEST VIRGINIA	, swear g within the pe	or affir	m that the attached statement is true and correct overed by this statement. Signature of Candidate, Agent	, to the You Yor Tre	easurer
State	of West Virginia, County of Municipal Action Accordance of all financial transactions occurring cribed and sworn to before me this OFFICIAL SEAL NOTARY PUBLIC	, swear g within the pe	or affir	FIRMATION In that the attached statement is true and correct overed by this statement.	, to the You Yor Tre	easurer