

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

For political committees, list the 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.

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. 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?

Wetzel County Democratic Exec. Committee		D Pamela Racer	
Candidate or Committee Name		Candidate or Committee's Treasurer	
Political Party (for candidates)		735 5th St	
		Treasurer's Mailing Address (Street, Route or P.O. Box)	
Office Sought (for candidates)		New Martinsville WV 26155	
District/Division		City, State, Zip Code	
		740-483-2725	
		304-771-0812	
		Daytime Phone #	

- ☒ Annual Report 1 _____ Calendar Year
(Due last Saturday in March or within 6 days thereafter. This report filed for old campaigns or year following most recent election)
- ☒ Reporting Period (check one)
☒ First Primary
(Due last Saturday in March or within 6 days thereafter. This is the first report for current election year reporting)
- ☐ Pre-primary Report
(Due 10 to 17 days before primary election)
- ☐ Post-primary Report
(Due 25 to 31 days after primary election)
- ☐ First General Report
(Due first Saturday in September or within 6 days thereafter)
- ☐ Pre-general Report
(Due 10 to 17 days before general or special election)
- ☐ Post-general Report
(Due 25 to 31 days after general or special election)
- ☐ Final Report
(Zero balance required. PAC must also file Form F-6 Dissolution)
- ☐ Amended Report (check if applicable)
You must also check box of appropriate reporting period
- *post general may also be final report if "0" balance

REPORT TOTALS

(Fill in totals after you have completed page 2)

Totals for this period	
RECEIPTS	
1. Total Contributions (Schedule 1A)	2,460.65
EXPENDITURES	
2. Total Expenditures (Schedule 1B)	1,130.21

TOTAL RECEIPTS
ELECTION YEAR-TO-DATE
(Add line B from all reports)

2,460.65

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

1,130.21

CASH BALANCE SUMMARY

A. Beginning Balance (ending balance from previous report)	9,114.14
B. Total Receipts (Line 1)	2,460.65
C. Subtotal (Add lines A & B)	11,574.79
D. Total Expenditures (Line 2)	1,130.21
E. Ending Balance (Subtract line D from line C)	10,444.58

*Cannot be negative balance

SCHEDULE 1A

CONTRIBUTIONS

\$250 or less

\$250 or more

Date	Full Name	Amount	Date	Full Name: Address: Contributor's job: (Individual) Where works: (Individual) Affiliation: (Political committee)	Amount
5/23	Proceeds from Raffle	867.00		Full Name: Alan Mollahan Address: Contributor's job: (Individual) Congressman Where works: (Individual) Affiliation: (Political committee)	300.00
6/5	Proceeds from Raffle	202.00			
9/4	Proceeds from Raffle	625.00		Full Name: Address: Contributor's job: (Individual) Where works: (Individual) Affiliation: (Political committee)	
10/6	Proceeds from Raffle	250.00			
12/11	Proceeds from Dem. Social	216.65		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)					2460.65

Schedule 1B

ITEMIZED EXPENDITURES

Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount
6/4	RCS Printing Main St New Martinsville WV 26155	Tickets	50.00
6/4	Robert Gorby New Martinsville WV 26155	Reimbursement Hotel Dem. Chairs Meeting	50.00
6/4	Steve Snyder 235 Virginia St New Martinsville WV 26155	Tickets for Football (WVU) Raffle	403.00
8/14	Town & Country Days	Fair Booth	85.00
9/8	WV Federation of Democratic Women	Ad in Program 1/2 Page	50.00
TOTAL			—

MAKE AS MANY COPIES
OF THIS PAGE AS YOU NEED.

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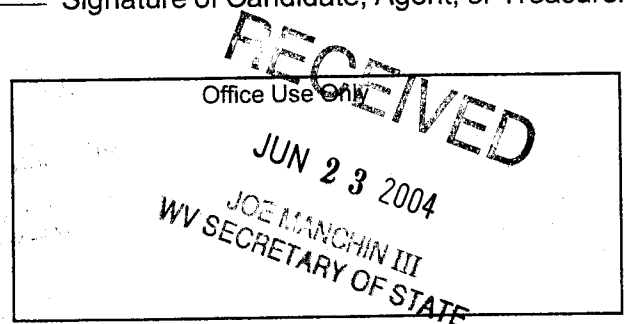
OATH OR AFFIRMATION

I, Pamela Racer, 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.

Pamela Racer

Signature of Candidate, Agent, or Treasurer

Date 6-21, 2004



SCHEDULE 1A

CONTRIBUTIONS

\$250 or less

\$250 or more

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

TOTAL

(both columns)

Continued . . . Page 2 of 3

Schedule 1B

ITEMIZED EXPENDITURES

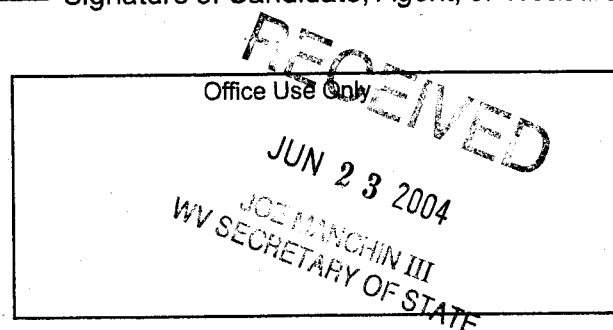
Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount
10/26	Fee Assessed by People's Bank. Check for Raffle Ticket purchase (donation) had I.S.F.	Bank Fee	26.00
10/31	RCS Printing Main St New Martinsville WV 26155	Democrat Social Tickets/Flyers	68.90
11/10	Postmaster	Postage to Mail Dem. Social Flyers	14.80
11/22	Witschey's Shop n Save North St New Martinsville WV 26155	Food for Democrat Social	118.69
11/22	ABC Store North St New Martinsville WV 26155	Beverages for Democrat Social	157.99
MAKE AS MANY COPIES OF THIS PAGE AS YOU NEED. PAGE 2 OF 3			TOTAL <u> </u>

OATH OR AFFIRMATION

I, Pamela Racer, 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.

Pamela Racer Signature of Candidate, Agent, or Treasurer

Date 6-21, 2004



SCHEDULE 1A

CONTRIBUTIONS

\$250 or less

\$250 or more

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

TOTAL

(both columns)

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Schedule 1B

ITEMIZED EXPENDITURES

Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount
2/21	Wetzel County Clerk Main St New Martinsville WV 26155	LIST OF REG. VOTERS	83.79
11/22	Wal Mart New Martinsville WV 26155	Plates/Cups for Dem Social	22.04
MAKE AS MANY COPIES OF THIS PAGE AS YOU NEED. PAGE 3 OF 3			TOTAL 1130.21

OATH OR AFFIRMATION

I, Pamela Racer, 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.

Pamela Racer

Signature of Candidate, Agent, or Treasurer

Date 6-21, 2004

