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

For political committees, list the current election year. For Supply all information re			ppen past campaign.	
IF YOUR ANSWER TO ANY OF THE FOLLOWING QUE MUST USE THE LONG FORM (FORM F-7) TO FILE YOU. Have you made or accepted any loans to your campain 2. Have you had any fundraisers? 3. Have you received any miscellaneous receipts, such a second control of the control	YOUR CAMPAIGN F	INANCE REPORT.	erred funds	
from a previous campaign?		Town A Cit	cchirillo	
4. Do you have any unpaid bills?5. Have you or anyone else given an in-kind contribution	to your campaign?	408 Heath	or Moor Drive	
C. Flave year of arryone clos given arriving contribution	To your campaign.	James A Cicchirillo 408 Houther Moor Drive Follonsbee, WV- 26037		
Candidate or Committee Name	Candidate or Committee's Treasurer of Teacher Treasurer's Mailing Address (Street Route or P.O. Box)			
Political Party (for candidates)	Treasurer 5 maining Address (Greek, Route 617.6. Box)			
Office Sought (for candidates) District/Division	City, State, Zip Co	ode	Daytime Phone #	
filed for old campaigns or year following most recent election) First General Report (Due first Saturday in September or within 6 days thereafter) Amended Report (check if applicable) You must also check box of appropriate reporting period First report for or reporting) Pre-general II (Due 10 to 17 before general special election)	days al or ion)	before primary election) Post-general Report (Due 25 to 31 days after general or special election) post general may also be fine the second second election and the second election before the second election and the second election elec	after primary election) Final Report (Zero balance required. PAC must also file Form F-6 Dissolution) all report if "0"balance	
Totals	s for this period	CASH BALANC	E SUMMARY	
RECEIPTS 1. Total Contributions (Schedule 1A) EXPENDITURES	0	A. Beginning Balance (ending balance from previous report	\$ 1,668.25	
2. Total Expenditures (Schedule 1B)	0	B. Total Receipts (Line 1)	0	
TOTAL RECEIPTS		C. Subtotal (Add lines A & B)	0	
ELECTION YEAR-TO-DATE (Add line B from all reports)		D.Total Expenditures (Line 2)	0	
TOTAL EXPENDITURES ELECTION YEAR-TO-DATE (Add line D from all reports)		E. Ending Balance (Subtract line D from line C) *Cannot be neg	#1,668,25	
		Cannot be neg	unve valance	

CONTRIBUTIONS

\$250 or less

\$250 or more

Date	Full Name	Amount	Date			Amount			
				Full Name: Address:					
				Contributor's job: (Individu Where works: (Individual) Affiliation: (Political comm					
				Full Name: Address:					
				Contributor's job: (Individual Affiliation: (Political comm					
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				Full Name: Address:					
				Contributor's job: (Individual) Where works: (Individual Affiliation: (Political committee)					
			- R		TOTA	AL 🔿			
(both columns)									
		TEMIZED E		DITURES					
Date	Full name, residence address (if person); bu	siness address	(if firm)		Purpose	Amount			
	AS MANY COPIES				TOTAL	0			
OF THIS CASE AS TOO NEED.									
OATH OR AFFIRMATION I,									
-				Signature	e of Candidate, Agent,	or Treasurer			
Date_	Date Oug. 13 , 200 4 . Office Use Only								
	Office Use Only								
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