

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

Candidate or Committee Name <i>Roane County Democrat 100 club</i>		Candidate or Committee's Treasurer <i>Doris Webb, Treas</i>	
Political Party (for candidates)		Treasurer's Mailing Address (Street, Route or P.O. Box) <i>1077 Boggs Fork</i>	
Office Sought (for candidates)	District/Division	City, State, Zip Code <i>Spencer WV 25276 304927-3073</i>	Daytime Phone #

Reporting Period (check one)

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> Annual Report _____ Calendar Year
(Due last Saturday in March or within 6 days thereafter. This report filed for old campaigns or year following most recent election) | <input type="checkbox"/> First Primary
(Due last Saturday in March or within 6 days thereafter. This is the first report for current election year reporting) | <input type="checkbox"/> Pre-primary Report
(Due 10 to 17 days before primary election) | <input type="checkbox"/> Post-primary Report
(Due 25 to 31 days after primary election) |
| <input type="checkbox"/> First General Report
(Due first Saturday in September or within 6 days thereafter) | <input checked="" type="checkbox"/> Pre-general Report
(Due 10 to 17 days before general or special election) | <input type="checkbox"/> Post-general Report
(Due 25 to 31 days after general or special election) | <input type="checkbox"/> 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)	- 0 -
EXPENDITURES	
2. Total Expenditures (Schedule 1B)	2042.40

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

2752.00

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

3981.07

CASH BALANCE SUMMARY

A. Beginning Balance (ending balance from previous report)	<i>219509</i>
B. Total Receipts (Line 1)	- 0 -
C. Subtotal (Add lines A & B)	<i>219509</i>
D. Total Expenditures (Line 2)	<i>204240</i>
E. Ending Balance (Subtract line D from line C)	<i>15269</i>

**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
TOTAL (both columns)					

Schedule 1B

ITEMIZED EXPENDITURES

Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount
9/22	Martha Cerpel 345 Market St Spencer WU 25276	donation	250 ⁰⁰
9/22	Jay Flint 1649 Charleston Rd Spencer WU 25276	donation	250 ⁰⁰
9/22	Russ Goodwin 4946 Anna Rd Anna WU 25005	donation	250 ⁰⁰
9/22	Gerald W Horver River Rd Walton WU 25286	donation	250 ⁰⁰
	Eugene May 3353 Silk Fork Spencer WU 25276	donation	250 ⁰⁰
TOTAL			

MAKE AS MANY COPIES OF THIS PAGE AS YOU NEED.

OATH OR AFFIRMATION

I, Steve, 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.

Signature of Candidate, Agent, or Treasurer

Date _____, 200__

Office Use Only

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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
				Full Name: Address: Contributor's job: (Individual) Where works: (Individual) Affiliation: (Political committee)	
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				Full Name: Address: Contributor's job: (Individual) Where works: (Individual) Affiliation: (Political committee)	
TOTAL					
(both columns)					

Schedule 1B

ITEMIZED EXPENDITURES

Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount
9/22	Eric Wells wells comm. to elect wells for Congress 2545 Charleston WU 85329	donation	250 ⁰⁰
9/22	David Malin 606 Tennessee Ave Charleston WU 253620770	donation	250 ⁰⁰
9/22	Todd Cole Arnoldsburg Rd. Spencer WU 25276	donation	250 ⁰⁰
9/22	Taylor Floral 148 Main St. Spencer WU 25276	flowers for Don York funeral	4240
TOTAL			204240

MAKE AS MANY COPIES OF THIS PAGE AS YOU NEED.

OATH OR AFFIRMATION

I, Doris Webb, 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.

Doris Webb

Signature of Candidate, Agent, or Treasurer

Date 11/12/04, 20004.

Office Use Only
