

State of West Virginia Campaign Financial Statement (Long 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.

MARSHALL Co Democrat Com		Robert F BAKER Treasurer	
Candidate or Committee Name		Candidate or Committee's Treasurer	
Political Party (for candidates)		1009 5th St	
Office Sought (for candidates)		Treasurer's Mailing Address (Street, Route or P.O. Box)	
District/Division		MORGANTOWN, WV 26041	
City, State, Zip Code		Daytime Phone #	

Reporting Period (check one)

- ☐ **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)

☐ **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 complete pages for contributions, fundraisers, other income, in-kind contributions, loans, expenditures, unpaid bills.

CONTRIBUTIONS OF MONEY

Totals for this Period

1. Contributions - Schedule 1A	1000
2. Fund-raising Events - Schedule 2A	878
3. TOTAL CONTRIBUTIONS (Add lines 1 and 2)	1878
4. Other Income - Schedule 3A	0
5. Loans received - Schedule 1B	0
6. TOTAL OTHER INCOME (Add lines 4 and 5)	0
7. In-kind (non-cash) contributions - Schedule 4A	1878

EXPENDITURES

8. Itemized Expenditures - Schedule 2B	5363
9. Loan Repayment - Schedule 1B	0
10. TOTAL EXPENDITURES (Add lines 8 and 9)	5363

OUTSTANDING LOANS/DEBTS

11. Unpaid Bills - Schedule 3B	0
12. Outstanding Loans - Schedule 1B	0
13. TOTAL DEBTS (Add lines 11 and 12)	0

CASH BALANCE SUMMARY

A. Beginning Balance (ending balance from previous report)	9029
B. Total Receipts (Add lines 3 & 6)	1878
C. Subtotal (Add lines A & B)	10907
D. Total Expenditures (Line 10)	5363
E. Ending Balance (Subtract line D from line C)	5534

*Cannot be negative balance

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

11143

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

6737

SCHEDULE 1A
**CONTRIBUTIONS
OVER \$250.00**

(For information about contributions, see General Instructions, Page 3.)

DATE	INDIVIDUAL CONTRIBUTOR OR COMMITTEE'S NAME <small>By law, you must report an individual contributor's occupation and business affiliation. For a committee, you must report the affiliation (the group, association, corporation, or union with which it is connected.)</small>	AMOUNT
	Full Name: <i>International Brotherhood of Electric</i> Address: <i>Washington, DC</i> <i>worker</i> Contributor's job: (individual contributor only) Where contributor works: (individual contributor only) Affiliation: (political committee only)	1000
	Full Name: Address: Contributor's job: (individual contributor only) Where contributor works: (individual contributor only) Affiliation: (political committee only)	
	Full Name: Address: Contributor's job: (individual contributor only) Where contributor works: (individual contributor only) Affiliation: (political committee only)	
	Full Name: Address: Contributor's job: (individual contributor only) Where contributor works: (individual contributor only) Affiliation: (political committee only)	
	Full Name: Address: Contributor's job: (individual contributor only) Where contributor works: (individual contributor only) Affiliation: (political committee only)	
	Full Name: Address: Contributor's job: (individual contributor only) Where contributor works: (individual contributor only) Affiliation: (political committee only)	1000

**MAKE AS MANY COPIES
OF THIS PAGE AS YOU NEED**

Subtotal contributions of more than \$250.00

Subtotal contributions of \$250.00 or less

(Enter Total on Page 1, line 1)

Total

SCHEDULE 2A

FUND-RAISING EVENTS

EVENT SUMMARY

Date of Event _____	Type of Event _____
Name of Place Held _____	
Address of Place Held _____	
Total Receipts _____	Total Expenditures _____
NET RECEIPTS (Subtract total expenditures from total receipts) _____	

WARNING: ALL monies received by fundraisers must be reported under Schedule 2A, regardless of the type of fundraiser. If contributors and amounts are not listed, WV Code §3-8-5a requires that the money be turned over to the West Virginia General Revenue Fund. The only exception to this is detailed in West Virginia Code §3-8-5a and applies only to political party committees. (For additional information, see General Instructions, Page 4.)

\$250.00 OR LESS

OVER \$250.00

Date	Full Name	Amount	Date	Full Name: Address: Contributor's job: (Individual only) Where works: (Individual only) Affiliation: (Political committee only)	Amount
11/4	Political Badges	210			
11/5	Tea Shirts	230			
11/5	Badge & set	243			
11/5	flasher & donkey	195			
Subtotal contributions of less than \$250.00			Subtotal contributions of more than \$250.00		
878			Subtotal contributions of \$250.00 or less		
			(Enter Total on Page 1, Line 2) TOTAL		

MAKE COPIES OF THIS PAGE TO LIST ADDITIONAL CONTRIBUTIONS. ATTACH ADDITIONAL PAGES TO REPORT.

SCHEDULE 2B

ITEMIZED EXPENDITURES

(For information on Expenditures, see General Instructions, Page 5.)

Date	Full name, residence address (if a person) or business address (if a firm)	Purpose	Amount expenditure
10/15	Verizon	telephone	400
10/17	Comcast	Cable TV	62
10/25	Food & etc	opening of headquarter	156
10/24	Young Democrat	Charleston	100
10/25	Green Tab	advertising	1202
11/3	Moundville Echo	"	3383
11/9	Food	for head quarter	60

MAKE AS MANY COPIES
OF THIS PAGE AS YOU NEED.

(Enter Total on Page 1, line 8)

Total

5363

SCHEDULE 3B

UNPAID BILLS

(For information, see General Instructions, Page 5.)

Date	Full name, residence address (if a person) or business address (if a firm)	Purpose	Amount
(Enter Total on Page 1, Line 11)			Total

OATH OR AFFIRMATION

I, Robert F Baker, swear or affirm that the attached statement is true and correct, to the best of my knowledge, for all financial transactions occurring within the period covered by this statement.

Signature of Candidate, Financial Agent or Treasurer

Date December 23, 2004

Office Use Only

RECEIVED
01, DEC 28 AM 9:48