## State of West Virginia Campaign Financial Statement (S hort Form) in Relation to 2006 Election Year

IF YOUR ANSWER TO A INY OF THE FOLLOWING QUESTIONS IS "YES," YOU CANNOT USE THIS FORM. YOU MUST USE TIME LONG FORM (FORM F-7) TO FILE YOUR CAMPAIGN FINANCE REPORT.

- 1. Has your committee received any loans?
- 2. Has your committee held any fundraisers?
- 3. Has your committee received any miscellaneous receipts, such as refunds or checking account interest?
- 4. Does your committee have any unpaid bills?
- 5. Have you or anyone els e given an in-kind contribution to your campaign?
- 6. Has your committee given or received a transfer of excess campaign funds?

Candidate or Committee Nan	ounty COPE	Stacey Strawd	l man	
Political Party (for candiclates		Treasurer's Malling Address (Street	St	
Office Sought (for candic ates	s) District/Division	City, State, Zip Code	3667533	
Election Cyc i e Reporting Period (check one):			Check if Applicable:	
Primary - First Report Due March 25- 31, 200 6	Pre-primary Report Due April 22- 29, 20	Post-primary Report Due June 3- 9, 2006	Amended Report You must also check	
General - First Report Due Sept. 2- 8, 2006	Pre-general Report Due Oct. 21- 28, 20	Post-general Report Due Dec 2- 8, 2006	box of appropriate reporting period Final Report	
Non-Election Cycle Reporting Period:	Due last Satu	Annual ReportCalendar Year Due last Saturday in March or within 6 days thereafter		

## REPORT TOTALS

(Fill in totals after you have completed page 2)

## CASH BALANCE SUMMARY

Beginning Ballance (ending balance from previous report)		258.54		
Total Contributions (from Page 2)		+ 0		
Subtotal (lines 1+2)	3.	= 258,54		
Total Expenditures (from Page 2)		_ ()		
Ending Balænce (lines 3-4)		=258,54		
*Cannot Frave a negative ending balance				

TOTAL CONTRIBUTIONS
ELECTION YEAR-TO-DATE
(Add line 2 from all reports)

54/

TOTAL EXPENDITURES
ELECTION YEAR-TO-DATE
(Add line 4 from all reports)

1130,44

## CONTRIBUTIONS

\$250 or less \$250 or more 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: Contributor's job: (Individual) Where works: (Individual Affiliation: (Political committee) Total Contributions: (add both columns) Check if additional pages have been atached. ITEMIZED EXPENDITURES Date Full name, residence address (if person); business address (if firm) Purpose Amount MAKE AS MANY COPIES **Total Expenditures:** OF THIS PAGE AS YOUNEED. OATH OR AFFIRMATION Levn 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, as required by West Virginia Code §3-8-5a. Signature of Candidate, Agent, or Treasurer Office Use Only

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CLARKSBURG WW 263 UNIT

Secretary of State

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