

State of West Virginia Campaign Financial Statement (Short Form) in Relation to the 2008 Election Year

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. 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 else given an in-kind contribution to your campaign?
6. Has your committee given or received a transfer of excess campaign funds?

Candidate or Committee Name KANAWHA CO. REPUBLICAN WOMAN		Candidate or Committee's Treasurer JUANN KEADLE	
Political Party (for candidates)		Treasurer's Mailing Address (Street, Route or P.O. Box) 819 WILLOWOOD CIRCLE	
Office Sought (for candidates)	District/Division	City, State, Zip Code ST ALBANS WV 25177	Daytime Phone # 727-9955

Election Cycle Reporting Period (check one):

- | | | |
|---|--|--|
| <input type="checkbox"/> Primary - First Report
Due March 29 - April 4, 2008 | <input checked="" type="checkbox"/> Pre-primary Report
Due April 28 - May 2, 2008 | <input type="checkbox"/> Post-primary Report
Due May 26 - 30, 2008 |
| <input type="checkbox"/> General - First Report
Due Sept. 22 - 26, 2008 | <input type="checkbox"/> Pre-general Report
Due Oct. 20 - 24, 2008 | <input type="checkbox"/> Post-general Report
Due Nov. 17 - 21, 2008 |

Check if Applicable:

- Amended Report
You must also check box of appropriate reporting period
- Final Report
Zero balance required. PAC must also file Form F-6 Dissolution

Non-Election Cycle Reporting Period:

- Annual Report Due in ___ Calendar 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 Balance (ending balance from previous report) 1.		15,503
Total Contributions (from Page 2) 2.	+	* 791.00
Subtotal (lines 1+2) 3.	=	94603
Total Expenditures (from Page 2) 4.	-	1835
Ending Balance (lines 3-4)	=	92768
<i>*Cannot have a negative ending balance</i>		

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

791.00

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

18.35

5-9-08 * \$604.00 DETAILS NOT AVAILABLE
WILL RESEARCH AND SUBMIT ASAP

CONTRIBUTORS OF:

\$250 or less

More than \$250

Date	Full Name	Amount	Date	Full Name: Address:	Amount
12/10/07	VERN MCCORMICK	37.00		Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
12/16/07	ANN CALVERT	3.00		Full Name: Address:	
	PAT FISHER	5.00		Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
	PHYLLIS HAYDEN	11.00		Full Name: Address:	
	EVELYN DODDILL	7.00		Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
	MARIE CARLSON	13.00		Full Name: Address:	
	CAROLYN FITCHER	10.00		Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
	RETTA WILLIS	5.00		Full Name: Address:	

Total Contributions:
(add both columns)

91.00

Check if additional pages
have been attached.

ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/ reimbursements)

Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount
4/22/08	CITY NATIONAL BANK - CHECKS	BANK WITHDRAWS	1835

MAKE AS MANY COPIES
OF THIS PAGE AS YOU NEED.

Total Expenditures:

1835

OATH OR AFFIRMATION

I, JOANN KEADLE, 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, as required by West Virginia Code §3-8-5a.

Joann Keadle Signature of Candidate, Agent, or Treasurer

Date 5-9, 2008.

Office Use Only
Received By: _____

CONTRIBUTIONS

Less than \$250

\$250 or more

Date	Full Name	Amount	Date	Full Name: Address:	Amount
12/16/07	JANICE BAILS	11.50		Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
	GOLDA RAINES	6.00		Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
	EVA KAY CARPER	2.00		Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
	FREDA BURDETTE	5.00		Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
	NABILA NAJAR	10.00		Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
	JUDY SMART	6.00		Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
4/19/08	LAURA HAYES	5.00		Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
	ROUDA FALIK	9.00		Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	

Total Contributions:
(add both columns)

53.50

Check if additional pages have been attached.

ITEMIZED EXPENDITURES

Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount

MAKE AS MANY COPIES OF THIS PAGE AS YOU NEED.

Total Expenditures:

0

OATH OR AFFIRMATION

I, _____, 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

Date _____, 200_____.

Office Use Only

CONTRIBUTORS OF:

\$250 or less

More than \$250

Date	Full Name	Amount	Date	Full Name: Address:	Amount
4/21/08	DOROTHY YOUNG	5.00		Full Name: Address:	
..	WENDY SUMMERS	4.50		Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
..	JEAN ANN REID	1.00		Full Name: Address:	
..	RITA WILLIS	5.00		Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
..	NANCY MYERS	2.00		Full Name: Address:	
..	HAZEL LILLY	5.00		Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
..	JEAN ANN REID	2.00		Full Name: Address:	
..	MARY HAZLETTE	10.00		Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
..	LAURA HAYES	8.00			
				Total Contributions: (add both columns)	42.50

Check if additional pages have been attached.

ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/ reimbursements)

Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount

MAKE AS MANY COPIES OF THIS PAGE AS YOU NEED.

Total Expenditures: **0**

OATH OR AFFIRMATION

I, _____, 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, as required by West Virginia Code §3-8-5a.

Signature of Candidate, Agent, or Treasurer

Date _____, 20____.

Office Use Only
 RECEIVED
 2008 MAY -9 PM 4:21
 Received By: _____