State of West Virginia Campaign Financia 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 City of Charleston Democratic Executive Committee	• • • • • • • • • • • • • • • • • • •	Candidate or Committee's Treasurer Bob Redman Treasurer's Mailing Address (Street, Floute or P.O. Box) 932 Central Avenue			
Political Party (for candidates)	· ·				
Office Sought (for candidates) District/Divis	city, State, Zip Code Charleston, WV 25302 (304)437-36	Daytime Phone #			
Election Cycle Reporting Period Primary - First Report Due March 29 - April 4, 2008 General - First Report Due Sept. 22 - 26, 2008 Pre-general R Due Oct. 20 -	Report Post-primary Report Due May 26 - 30, 2008 Report Post-general Report	Check if Applicable: Amended Report You must also check box of appropriate reporting period Final Report			
Reporting Period:	I Report Due in Calendar Year st Saturday in March or within 6 nereafter	Zero balance require PAC must also file Form F-6 Dissolution			

REPORT TOTALS

(Fill in totals after you have completed page 2)

CASH BALANCE SUMMARY

Beginning Balance (ending balance from previous report)	1.		411.19	
Total Contributions (from Page 2)	2.	+	0.00	
Subtotal (lines 1+2)	3.	=	411.19	
Total Expenditures (from Page 2)	4.		0.00	
Ending Balance (lines 3-4)		=	411.19	
*Cannot have a negative ending balance				

ELF	TAL CONTRIBUTIONS CTION YEAR-TO-DATE Id line 2 from all reports)	
ELE	TAL EXPENDITURES CTION YEAR-TO-DATE ld line 4 from all reports)	
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CONTRIBUTORS OF:

\$250 or less

More than \$250

Date	Full Name	Amount	Date		A In In	Amount
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			Affiliation: (Poli	Contributor's job: (Individ Where contributor work Affiliation: (Political comr	dual) s: (Individual mittee)	
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				Full Name: Address:		
			Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)		(s: (Individual)	
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Data	ITEMIZED EXPENDIT					A
Date	Full name, residence address	(If person); business a	address	(it tirm)	Purpose	Amount
				and the state of t		
	MANY COPIES AGE AS YOU NEED.				Total Expenditures:	0.00
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	the best of my knowled			ansactions occurrir	ng within the period cover	ered by this
	t, as required by West Vir `	ginia Code 95-6	-oa.			
36)	Lid			Signatu	re of Candidate Agent (or Treasurer
	- -			Signature of Candidate, Agent, or Tr		n measurer
Date		≥ 8 ·		1	Office Use Only	
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				720	and Demonstrate Control	