

State of West Virginia Campaign Financial Statement (Short Form) in Relation to 2007 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 2007		Candidate or Committee's Treasurer	
Political Party (for candidates) WV DEMOCRATIC COUNTY CHAIRS ASSN		Treasurer's Mailing Address (Street, Route or P.O. Box) PO BOX 280	
Office Sought (for candidates)	District/Division	City, State, Zip Code ELIZABETH, WV 26143	Daytime Phone # 304-275-4314

Election Cycle Reporting Period (check one):

- | | | |
|---|---|---|
| <input type="checkbox"/> Primary - First Report
(Due last Saturday in March or within 6 days thereafter) | <input type="checkbox"/> Pre-primary Report
(Due 15 days before Primary election or within 4 business days) | <input type="checkbox"/> Post-primary Report
(Due 13 days after Primary election or within 4 business days) |
| <input type="checkbox"/> General - First Report
(Due 43 days prior to the General election or within 4 business days) | <input type="checkbox"/> Pre-general Report
(Due 15 days before General election or within 4 business days) | <input type="checkbox"/> Post-general Report
(Due 13 days after Primary election or within 4 business days) |

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 2007 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.					3,918.31
Total Contributions (from Page 2) 2.	+				1,875.00
Subtotal (lines 1+2) 3.	=				5,793.31
Total Expenditures (from Page 2) 4.	-				405.00
Ending Balance (lines 3-4)	=				5,388.31
<i>*Cannot have a negative ending balance</i>					

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

1,875.00

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

405.00

CONTRIBUTORS OF:

\$250 or Less

More than \$250

Date	Full Name	Amount	Date	Full Name: Address:	Amount
6/9	Wood Co. D.E.C.	100.		Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
6/9	Jefferson " "	100.		Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
6/9	Hardy " "	100.		Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
6/9	Jackson " "	100.		Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
6/9	Mingo " "	100		Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
6/9	Upshur " "	100.00		Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
6/9	Pleasants " "	75.		Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
cont next page					

Total Contributions: 675.00
(add both columns)

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
8/1/07	BB&T	BANK CHARGE	5.00
11/8/07	WV SECR OF STATE	NONE	400.00

MAKE AS MANY COPIES OF THIS PAGE AS YOU NEED.

Total Expenditures: 405.00

OATH OR AFFIRMATION

I, Jerry Brookover, 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.

Jerry Brookover Signature of Candidate, Agent, or Treasurer

Date 5/5 2008

Office Use Only
Received By: _____

CONTRIBUTORS OF:

\$250 or Less

More than \$250

Date	Full Name	Amount	Date	Full Name: Address:	Amount
6/9	Randolph Co. D.E.C.	100.		Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
6/9	Taylor Co. "	100.		Full Name: Address:	
6/9	Wirt " "	100.		Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
10/12	Mercer " "	100.		Full Name: Address:	
10/12	Greenbrier " "	100.		Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
10/12	Marion " "	100.00		Full Name: Address:	
10/12	Berkeley " "	100.		Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
	cont next page				

Total Contributions: 700.00
(add both columns)

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:

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 _____, 20____.

Office Use Only
Received By: _____

CONTRIBUTORS OF:

\$250 or Less

More than \$250

Date	Full Name	Amount	Date	Full Name: Address:	Amount
10/12	Reane Co. D.E.C	100.		Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
11/30	Taylor " "	100.		Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
11/30	Boone " "	100.		Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
11/30	Tyler " "	100.		Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
11/30	Hardy " "	100.		Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
				Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
				Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	

Total Contributions: 500.00
(add both columns)

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:

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 _____, 20____.

Office Use Only

2008 MAY -7 AM 11:52

Received By: _____



Mr. Jerry Brookover
PO Box 280
Elizabeth, WV 26143-0280

"LET US DARE TO RE
THINK, SPEAK AND
John Adams, 1765
POWEROFFICE LLC

CLARKSBURG WV 263

06 MAY 2008 PM 2 T

WV SECRETARY OF STATE
ATTN: ~~GENERAL~~ *Elections*
1900 KANAWHA BLVD E, W-139
CHARLESTON, WV 25305-0770

25305+0012

