State of West Virginia Campaign Financial Statement (Short Form) in Relation to 2010 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?

| Non-Election Cycle Reporting Period: | | Zero balance required PAC must also file Form F-6 Dissolution | | | |
|---|---|--|-----|---|--|
| General - First Report Due Sept. 20-24, 2010 | Pre-general Report Due Oct. 18-22, 2010 | Post-general Report Due Nov 15-Dec 15, 2010 | | box of appropriate reporting period Final Report | |
| Election Cycle R Primary - First Report Due March 27-April 2,2010 | eporting Period (che Pre-primary Report Due April 26-30, 2010 | Post-primary Report Due May 24-June 23, 2010 | Che | eck if Applicable: Amended Report You must also check | |
| | District Division | Charlisten WY 25302 | 32 | 4-437-3975 | |
| Political Party (for candidates) Office Sought (for candidates) | | Treasurer's Mailing Address (Street, Route or P.O. Box) 932 Cyntral Avenue City, State, Zip Code Daytime Phone # | | | |
| Candidate or Committee Name | you Exel Comm | Candidate or Committee's Treasurer | | | |

LASH BALANCE SUMMARY

| Beginning Balance (ending balance from previous report) | 1. | 414.69 | TOTAL CONTRIBUTIONS |
|---|----|----------|---|
| Total Contributions (from Page 2) | 2. | + 0 | ELECTION YEAR-TO-DATE (Add line 2 from all reports) |
| Subtotal (lines 1+2) | 3. | = 416.09 | TOTAL EXPENDITURES |
| Total Expenditures (from Page 2) | 4. | - 0 | ELECTION YEAR-TO-DATE (Add line 4 from all reports) |
| Ending Balance (lines 3-4) | | = 416,09 | |
| *Cannot have a negative ending balance | | | |

CONTRIBUTORS OF:

\$250 or Less

More than \$250

| Date | Full Name | Amount | Date | | | Amount |
|---------------------------------------|--|-------------------------|--|--|------------------|-------------|
| | | V () | | 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) | | | |
| | | | | Full Name: Address: | | |
| | | | | Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee) | | |
| Che | eck if additional pages | | | Total Contributions: (add both_columns) | | |
| | e been utached. | | | (444444 | | |
| | ITEMIZED EXPEN | DITURES (Itemi | ize 3r | rd pary expenditures/ reimburs | sements) | |
| Date | Full name, residence address | (if person); business a | ddress | (if firm) Purpose | | Amount |
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| | | | | | ANY WINE RESERVE | |
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| MAKE AS | MANY COPIES | | | | | |
| | PAGE AS YOU NEED. | | | Total Expend | ditures: | |
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| · · · · · · · · · · · · · · · · · · · | to the best of my knowled | dae of all finance | , SV | wear or affirm that the attached subsections occurring within the p | statement is | s true and |
| statemer | nt he best of my knowled of as required by West Vir | ginia Code §3-8- | iai iia 5a. | insactions occurring within the p | enoa coven | ed by this |
| F | | | | | | |
| - | | | ···· | Signature of Candidate | e, Agent, or | Treasurer |
| Date | | | | | | |
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