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 CANNO" 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 DREMA Dems Caulition PAC	Candidate or Committee's Treasure Terry Pick					
Political Party (for candidates) Democrat		Treasurer's Mailing Address (Stree', Route or P.O. Box) 5300 Kanawka A.e Chas. UV 25304				
Office Sought (for candidates) District/Division		Daytime Phone # ၀૫) 925-4426				
Election Cycle Reporting Period	(check one):	Check if Applicable:				
Primary - First Report Due March 29 - April 4, 2008 Pre-primary Re Due April 28 - M		Amended Report You must also check				
General - First Report Due Sept. 22 - 26, 2008 Pre-general Re Due Oct. 20 - 24		box of appropriate reporting period				
Reporting Period: Due last	Election Cycle Annual Report Due in Calendar Year Due lest Saturday in March or within 6					

REPORT TOTALS

(Fill in totals after you have completed page 2)

CASH BALANCE SUMMARY

Beginning Balance (ending balance from previous report) 1.	# 00·co	TCTAL CONTRIBUTIONS			
Total Contributions (from Page 2) 2.	+ #00·co	ELECTION YEAR-TO-DATE (Add line 2 from all reports)			
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(lines(152)) 8	= 31 00.60	TOTAL EXPENDITURES			
Total Expenditures (from Page 2) 4.	- dl ov . 60	ELECTION YEAR-TO-DATE (Add line 4 from all reports)			
Ending Balance (lines3-4)	= \$00.00				
*Cannot have a negati	ive ending balance				

CONTRIBUTORS OF:

\$250 or less

More than \$250

	Full Name	Amount	Date					Amount
				Full Name: Address:				
				Contributor's job: (Individent Where contributor works Affiliation: (Political comm	s: (Individ	ual)		
- · · · - - i			<u> </u>	Full Name: Address:				
- · 				Contributor's job: (Individual Where contributor work Affiliation: (Political comi	dual) s: (Indivíd nittee)	∵al)		
				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)				
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	ave been atached.			(ddd bo				
	ITEMIZED EXPENDIT	JRES (Itemize	3rd p	party expenditures	s/ reim	ourser	nents)	
Date	Full name, residence address (i	f person); business	address	(if firm)	ı	urpose		Amount
MAKE	AS MANY COPIES		*******		· 1	Evnon	ditures:	II
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