# 10/28/2016 o 01 56 00 P

## State of West Virginia Campaign Financial Statement (Short Form) in Relation to 2016 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?

Non-Election Cycle Reporting Period		ort Due In Calendar Year urday in March or within 6 ter	Zero balance required PAC must also file Form F-6 Dissolution	
	Pre-General Report Due October 24 28 2016	Post-Primary Report Due May 23 June 21 2016  Post-General Report Due Nov 21 - Dec 19 2016	Check if Applicable  Amended Report You must also check box of appropriate reporting period  Final Report	
Political Party (for candidate Nepublicand) Office Sought (for candidate in cut for cut for candidate in cut for cut for candidate in cut for cut fo	tes)  District/Division	Treasurer's Marling Address (Street 3/6 Gerald & Bake City, State, Zip Code	t, Route or P O Box)  S Dr  Daytime Phone #	
Candidate or Committee Name		Candidate or Committee's Treasurer		

#### REPORT TOTALS

(Fill in totals after you have completed page 2)

#### **CASH BALANCE SUMMARY**

Beginning Balance (ending balance from previous report)	1		0 00
Total Contributions (from Page 2)	2	+	1138.18
Subtotal (lines 1+2)	3.	=	/138 18
Total Expenditures (from Page 2)	4	-	//38.18
Ending Balance (lines 3-4)		=	0 00
*Cannot have a negative ending balance			

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

4310.64

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

4310 64

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#### CONTRIBUTORS OF

-5-	_			
)		\$250	or Le	ess:

More than \$250

7	¥=====================================				A a a 4
Date	Full Name	Amount	Date		Amount
				Full Name Gree Skidmore Address 3/6 Berald 2 Bakes Dr. Clarksburg Will, 26381 Contributor's job (Individual) Where contributor works (Individual) Affiliation (Political committee)	//38.18
				Fuli 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 (add both columns)

#### ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/reimbursements)

Date	Full name residence address (if person) business address (if firm)	Purpose	Amount
19/5	South Harrison Class of 1967	Elimination Dinner	40 00
10/10	Shop & Save 540 & Pike 54, Shianston, WV 26431	Candy for Promotional Items	182.00
	Advertising & Supply 7630 CASS St. Omaha, NE 68/14	Promotional Pons, Note Pads, Poly Bass	866.18
<b>4</b>	Charlestony 1 to the State of	Filmen Park	
10/21	Lumberport Fire Department	Elimination Dynner	50 00
	AS MANY COPIES S PAGE AS YOU NEED	Total Expenditures	1138 18

#### OATH OR AFFIRMATION

	_ swear or affirm that the attached statement is true and I transactions occurring within the period covered by this a
Date 10/27/2016	Signature of Candidate, Agent, or Treasurer
Date	Office Use Only
	Received By