State of West Virginia Campaign Financial Statement (Short Form) in Relation to _____ Election Year

Beginning in 2018, all candidates that file Campaign Finance reports with the Secretary of State must file electronically. W. Va. Code §3-8-5b

IF YOU ANSWER "YES" TO ANY OF THE FOLLOWING QUESTIONS, 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 your campaign an in-kind contribution?
- 6. Has your committee given or received a transfer of excess campaign funds?

PRE-PRIMARY Due 15 days preceding primary election or within 4 business days thereafter. PRE-GENERAL Due 15 days preceding general election or within 4 business days thereafter. FINAL REPORT Zero balance required PAC must file Dissolution (Form F-6)	POST-PRIMARY Due 13 days following primary election or within 20 business days thereafter. POST-GENERAL Due 13 days following primary election or within 20 business days thereafter. AMENDED REPORT Must also check box of appropriate reporting period.
	PLEASE SELECT REPORTING PE PRE-PRIMARY Due 15 days preceding primary election or within 4 business days thereafter. PRE-GENERAL Due 15 days preceding general election or within 4 business days thereafter. FINAL REPORT Zero balance required PAC must

REPORT TOTALS

CASH BALANCE SUMMARY

Beginning Balance (ending balance from previous report)	1.	
Total Contributions		
(from page 2)	2.	+
Subtotal		
(lines 1+2)	3.	=
Total Expenditures		
(from page 2)	4.	-
Ending Balance		
(line 3-4)		=

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

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

^{*}Cannot have a negative ending balance

CONTRIBUTIONS

\$250 or Less

Date Full Name Amount

More than \$250

Date		Amount
	Full Name:	
	Address:	
	Contributor's job: (individual)	
	Employer: (individual)	
	Affiliation: (political committee)	
	Full Name:	
	Address:	
	Contributor's job: (individual)	
	Employer: (individual)	
	Affiliation: (political committee)	
	Full Name:	
	Address:	
	Contributor's job: (individual)	
	Employer: (individual)	
	Affiliation: (political committee) Full Name:	
	Address:	
	Addi C33.	
	Contributor's job: (individual)	
	Employer: (individual)	
	Affiliation: (political committee)	

Received by: __

Total Contributions: (add both columns)

ITEMIZED EXPENDITURES

Date	Full name, residence address (if person); business address (if vendor)		Purpose		Amount
Total Expenditures:					
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 Co	ode §3-8-5a.				
Signature of Candidate, Treasurer, or Agent					
Date			Offi	ce Use Onl	у

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