

COUNTY CLERK

# State of West Virginia Campaign Financial Statement (Short Form) in Relation to 2018 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 an in-kind contribution to your campaign?
6. Has your committee given or received a transfer of excess campaign funds?

Committee or Candidate Name: HELEN MARTIN, Town of PoCA (Council)

Committee's Treasurer: \_\_\_\_\_

Treasurer's Mailing Address: PO Box 512 PoCA, WV 25159

Treasurer's Daytime Phone: 304-206-10835

### PLEASE SELECT REPORTING PERIOD

**FIRST-PRIMARY**  
Due March 31-April 6, 2018

**PRE-PRIMARY**  
Due April 23-27, 2018

**POST-PRIMARY**  
Due May 21-June 1, 2018

**FIRST-GENERAL**  
Due September 24-28, 2018

**PRE-GENERAL**  
Due October 22-26, 2018

**POST-GENERAL**  
Due Nov. 19-Dec. 18, 2018

**ANNUAL REPORT**  
Due in \_\_\_\_\_ calendar year  
Due last Saturday in March or  
within 6 days thereafter.

**FINAL REPORT**  
Zero balance required PAC must file  
Dissolution (Form F-6)

**AMENDED REPORT**  
Must also check box of appropriate  
reporting period.

### REPORT TOTALS

### CASH BALANCE SUMMARY

<b>Beginning Balance</b> (ending balance from previous report) 1.			0
<b>Total Contributions</b> (from page 2) 2.	+		0
<b>Subtotal</b> (lines 1+2) 3.	=		0
<b>Total Expenditures</b> (from page 2) 4.			0
<b>Ending Balance</b> (line 3-4)			0

### TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE

(Add line 2 from all reports)

\_\_\_\_\_

### TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE

(Add line 4 from all reports)

\_\_\_\_\_

*\*Cannot have a negative ending balance*

## CONTRIBUTIONS

### \$250 or Less

### More than \$250

Date	Full Name	Amount

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

**Total Contributions:**  
(add both columns)

## ITEMIZED EXPENDITURES

Date	Full name, residence address (if person); business address (if ven-	Purpose	Amount
	0		

**Total Expenditures:**

0

**OATH OR AFFIRMATION**

I, HELEN L MARTIN 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.

Helen L Martin Signature of Candidate, Treasurer, or Agent

Date 10/22/18

**Office Use Only**

Received by: \_\_\_\_\_