

State of West Virginia Campaign Financial Statement (Short Form) in Relation to 2016 Election Year For Nonpartisan Offices Elected on the Primary Ballot

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?

Candidate or Committee Name		Candidate or Committee's Treasurer	
Political Party (for candidates)		Treasurer's Mailing Address (Street, Route or P.O. Box)	
Office Sought (for candidates)	District/Division	City, State, Zip Code	Daytime Phone #

Reporting Period (check one):

General-First Report
Due March 26 - April 1, 2016

Pre-General Report
Due April 25 - 29, 2016

Post-General Report
Due May 25 - June 21, 2016

Annual Report Due in
_____ Calendar Year
Due last Saturday in March or
within 6 days thereafter

Amended Report
You must also check box of appropriate
reporting period

Final Report (zero balance required)
PACs must also file Statement
of Dissolution (Form F-6)

REPORT TOTALS

(Fill in totals after you have completed page 2)

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 (lines 3-4)	=	
*Cannot have a negative ending balance		

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

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

CONTRIBUTORS OF:

\$250 or Less

More than \$250

Date	Full Name	Amount	Date	Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	Amount
				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)	

**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

**MAKE AS MANY COPIES
OF THIS PAGE AS YOU NEED.**

Total Expenditures:

--

OATH OR AFFIRMATION

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 Code §3-8-5a.

_____ Signature of Candidate, Agent, or Treasurer

Date _____, 20____ .

<p>Office Use Only</p> <p>Received By: _____</p>
