Beginning in 2018, all candidates that file Campaign Finance reports with the Secretary of State must file electronically. W. Va. Code 63-8-5b

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:	tndy Skidmore							
Committee's Treasurer:	H"							
Treasurer's Mailing Address:	2 Poca River Rd N	Poca, WV 25159						
Treasurer's Daytime Phone: 3	04-545-1372	(
PLEASE SELECT REPORTING PERIOD								
Due March 31-April 6, 2018	POST-PRIMARY Due May 21-June 1, 2018							
Due September 24-28, 2018	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 BALAI	NCE SUMMARY							
Beginning Balance (ending balance from previous report)	1.	TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE (Add line 2 from all reports)						
Total Contributions (from page 2)	2. +	Ø						
Subtotal								
		TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE						
Total Expenditures		(Add line 4 from all reports)						
(from page 2)	4. (/)							

*Cannot have a negative ending balance

Official Form F-7A

Ending Balance

"fline 3 4)

Issued by the WV State Election Commission

Revised 9/17

				minim permit Aware		
Date	Full Name	Amount	Date		Amount	
				Full Name: Address:		
 				Contributor's job: (individual)	AAA muunnannanna	
				Employer: (individual)		
				Affiliation: (political committee) Full Name:		
				Address:		
				Contributor's job: (individual)		
				Employer: (individual) Affiliation: (political committee)		
				Full Name: Address:		
				Contributor's job: (individual)	77777	
				Employer: (individual)	Standard Control of the Control of t	
				Affiliation: (political committee) Full Name:		
				Address:		
				Contributor's job: (individual) Employer: (individual)		
				Affiliation: (political committee)		
				Total Contributions:	⋌	
				(add both columns)	\mathcal{L}	
··········		ITEMIZED EX	(PENDI	TURES		
Date	Full name, residence address (if	person); business add	lress (if ven-	Purpose	Amount	
			······································			
objektivation of the state of t						
				Total Expenditures:		
CATH OR ACCURACY						
	dy Skidmore	, swear (or affirm th	at the attached statement is	rue and correct, to the	
best of m	y knowledge, of all financial trai	nsactions occurring v	within the p	period covered by this statem	ent, as required by West	
Virginia Ço	ode,§3-8-5a.					
L.a	44 261	6° 5				
		signatur	e or Candid	ate, Treasurer, or Agent		
Date				Office	e Use Only	
					was was y	

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