## 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?

o. Has your committee given or received	a transier of excess cambaign intins:	
Committee or Candidate Name:		
Committee's Treasurer: Recore	Billips	
Treasurer's Mailing Address:		
Treasurer's Daytime Phone:		
	PLEASE SELECT REPORTING PERIOD	^
Due March 31-April 6, 2018	PRE-PRIMARY Due April 23-27, 2018	POST-PRIMARY Due May 21-June 1, 2018
PIRST-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**

Beginning Balance (ending balance from previous report) 1.		850	00
Total Contributions			00
(from page 2) <b>2.</b>	+	D	
Subtotal			00
(lines 1+2) 3.	=	750	) 00
Total Expenditures		6/2/	) 00
(from page 2) 4.		750	
Ending Balance (line 3-4)		\$ O.	00

## TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE

(Add line 2 from all reports)

1,750-00

### TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE

(Add line 4 from all reports)

1,750 00.

<sup>\*</sup>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:	
1	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:	
Ì		
	Contributor's job: (individual)	
	Employer: (individual)	
	Affiliation: (political committee)	

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

#### **ITEMIZED EXPENDITURES**

Date	Full name, residence address (if person); business address (if ven-	Purpose		Amount
\$ 5/30	Valante New	Reinburse man	<b>)</b>	G50 €
,	/ / // // OATH OR AFFIRMATI	Total Expenditures:	S.	5000
, <del></del>	1.3.2 11.12. 1	it the attached statement is t		

Virginia Code §3-8-5a. Signature of Candidate, Treasurer, or Agent

Office Use Only

Received by: \_\_\_