

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: CONRAD L. CAIN

Committee's Treasurer: _____

Treasurer's Mailing Address: _____

Treasurer's Daytime Phone: _____

PLEASE SELECT REPORTING PERIOD

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

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

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

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

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

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

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

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

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

REPORT TOTALS

CASH BALANCE SUMMARY

Beginning Balance (ending balance from previous report) 1.	
Total Contributions (from page 2) 2.	+ 25.00
Subtotal (lines 1+2) 3.	= 25.00
Total Expenditures (from page 2) 4.	25.00
Ending Balance (line 3-4)	0

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

25.00

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

25.00

*Cannot have a negative ending balance

CONTRIBUTIONS

\$250 or Less

Date	Full Name	Amount
6/28	CONRAD L. CAIN	25.00

More than \$250

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

Total Contributions:
(add both columns)

25.00/x

ITEMIZED EXPENDITURES

Date	Full name, residence address (if person); business address (if ven-	Purpose	Amount
6/28	POTNAM COUNTY CLERK	FILING FEE	25.00/x

Total Expenditures:

25.00/x

I, CONRAD L. CAIN, OATH OR AFFIRMATION
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.

Conrad L. Cain Signature of Candidate, Treasurer, or Agent

Date 9-28-18

Office Use Only

Received by: _____