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? No
- 2. Has your committee held any fundraisers? and
- 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? ightharpoonup
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Has your committee given or received	ed a transfer of excess campaign funds 200	
Committee or Candidate Name:	Andrew Conlson	
Committee's Treasurer:	<i>N</i> ^	
Treasurer's Mailing Address:	NA	
Treasurer's Daytime Phone:	NA	
	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
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

Beginning Balance (ending balance from previous report) 1.	0
Total Contributions	0
(from page 2) 2.	+
Subtotal (lines 1+2) 3.	<i>6</i>
Total Expenditures	0
(from page 2) 4.	
Ending Balance (line 3-4)	0

lan.	(Add line 2 from all reports)	(Add line 2 from all reports)			
	0				
	TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE (Add line 4 from all reports)				
	9				

TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE

^{*}Cannot have a negative ending balance

CONTRIBUTIONS

\$250 or Less

More than \$250

Date	Full Name	Amount	Date		Amoun	
				ull Name: Address:		
				iontributor's jab: (individual)		
) [8	mployer: (individual) iffiliation: (political committee) uli Name:		
***************************************				ulí Name: .ddress:		
				ontributor's job: (individual)		
			A	mployer: (individual) ffiliation: (political committee)		
			; ;	ull Name: ddress:		
				ontributor's Job: (individual)		
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			F	Jil Name: ddress:		
				ontributor's job: (individual)		
			Ε	mployer: (individual) ffiliation: (political committee)		
				Total Contributions:		
				(add both columns)	\mathcal{L}	
		Otto to the second seco				
		ITEMIZED E	XPENDIT	URES		
Date	Full name, residence address	if person); business ad	dress (if ven-	Purpose	Amount	
		, ,,		l "urpose	Amount	

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				Total Expenditures:		
1 A	bedow Conker		AFFIRMATI			
		, swear	or affirm tha	t the attached statement is	true and correct, to the	
Virginia₁C	ny knowledge, of all financial tr øde §3- <u>8-5</u> a.	ansactions occurring	within the pi	eriod covered by this staten	nent, as required by Wes	
T		Signatu	re of Candida	te, Treasurer, or Agent		

Date	Date			Offic	Office Use Only	
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