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? NO
- 3. Has your committee received any miscellaneous receipts, such as refunds or checking account interest? NO
- 4. Does your committee have any unpaid bills? NO
- 5. Have you or anyone else given an in-kind contribution to your campaign? NO

6. Has your committee given or received a trans	ofer of excess campaign funds? NO		
Committee or Candidate Name:	Charles Power	25	
Committee's Treasurer: None	***************************************		
Treasurer's Mailing Address: None			
Treasurer's Daytime Phone: NONC			
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.		ZER0
Total Contributions			
(from page 2)	2.	+	ZORO
Subtotal			
(lines 1+2)	3.	=	ZERO
Total Expenditures			
(from page 2)	4.		ZeRO
Ending Balance			
(line 3-4)			Zelo

TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE

(Add line 2 from all reports)

TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE

(Add line 4 from all reports)

-0

*Cannot have a negative ending balance

CONTRIBUTIONS

\$250	orles

	7250 Of EG33	
Date	Full Name	Amount
NA	NA	NA

More than \$250

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

Total Contributions: ZCRO

ITEMIZED EXPENDITURES

Date	Full name, residence address (if person); business address (if ven-	Purpose	Amount
NA	NA	NA	NA

Total Expenditures: OATH OR AFFIRMATION I, YAN CONCES 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.			
Signature of Candidate, Treasurer, or Agent			
Date <u>Z</u>	2-8 Sept 2018	Office Use On	ily
MAKE AS M	1ANY COPIES OF THIS PAGE AS NEEDED	Received by:	