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. rias your committee given or received a t | ransier of excess campaign funds: | |
|--|--|--|
| Committee or Candidate Name: | , Beth Echols they | Z |
| Committee's Treasurer: | | |
| Treasurer's Mailing Address: | | |
| Treasurer's Daytime Phone: | | |
| F | PLEASE SELECT REPORTING PERIOD | |
| FIRST-PRIMARY 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. | D | | TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE |
|---|------|---|---------------------------------------|---|
| Total Contributions | | | · · · · · · · · · · · · · · · · · · · | (Add line 2 from all reports) |
| | 2. + | D | | |
| Subtotal | | | | <u>\</u> |
| | 3. = | 0 | | TOTAL CONTRIBUTIONS |
| Total Expenditures | | *************************************** | | ELECTION YEAR-TO-DATE (Add line 4 from all reports) |
| (from page 2) | 4. | 0 | | |
| Ending Balance | | | | 7 |
| (line 3-4) | | \Diamond | | |

^{*}Cannot have a negative ending balance

CONTRIBUTIONS

\$250 or Less

More than \$250

Amount

| Date | Full Name | Amount | | Date | |
|------|-----------|--------|---|------|--|
| | | 0 | ľ | | Full Name: Address: |
| | | 0 | | | Contributor's job: (individual) Employer: (individual) Affiliation: (political committee) Full Name: |
| | | 0 | | | Address: |
| | | 0 | | | Contributor's job: (individual) Employer: (individual) Affiliation: (political committee) |
| | | 0 | | | Full Name: Address: |
| | | 0 | | | Contributor's job: (individual) Employer: (individual) Affiliation: (political committee) |
| | | 0 | | | Full Name: Address: |
| | | 5 | | | Contributor's job: (individual) Employer: (individual) Affiliation: (political committee) |
| | | | | | Total Contributions |

| mation: (political committee) | |
|-------------------------------|---------------|
| Total Contributions: | |
| (add both columns) | \mathcal{D} |

ITEMIZED EXPENDITURES

| | | UNES | |
|-----------|---|----------------------------------|---------------------|
| Date | Full name, residence address (if person); business address (if ven- | Purpose | Amount |
| | | | |
| | | | |
| | | | |
| I, | OATH OR AFFIRMATION Swear or affirm that the property control of the property | t the attached statement is true | |
| | ode §3-8-5a. | ate, Treasurer, or Agent | as required by West |
| Date | 12/28/16 | Office Us | e Only |
| 1AKE AS N | MANY COPIES OF THIS PAGE AS NEEDED | Received by: | |