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?

Has your committee given or received a	transfer of excess campaign funds?					
Committee or Candidate Name:	PAN C. YOWERS					
Committee's Treasurer: NONC						
Treasurer's Mailing Address: べっノe						
Treasurer's Daytime Phone: _ べんし						
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.	TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE (Add line 2 from all reports)
Total Contributions	
(from page 2) 2. + Z CRO	
Subtotal	
(lines 1+2) 3. =	TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE
Total Expenditures	(Add line 4 from all reports)
(from page 2) 4.	
, Ending Balance	0
(line 3-4)	

*Cannot have a negative ending balance

CONTRIBUTIONS

\$250 or Less

Date	Full Name	Amount
	NONE -	

MAKE AS MANY COPIES OF THIS PAGE AS NEEDED

More than \$250

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

Received by: _

Total Contributions: (add both columns)



ITEMIZED EXPENDITURES

Date	Full name, residence address (if person); business address (if ven-	e, residence address (if person); business address (if ven-		Amount		
	None -			ZERO		
Total Expenditures: Zelo						
I, PAN C. Souch Souch Souch Souch Souch Souch Souch Souch South 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			Office Use Only			