State of West V (Short Form	'irginia (n) in Rel	Campaign Fation to 201	inancial 4 Election	Statement Year	## 2 6	
IF YOUR ANSWER TO ANY OF THE F	OLLOWING QU RM (FORM F-7) ns ? ers? cellaneous rece bills? ind contribution	JESTIONS IS "YES," TO FILE YOUR CAM pipts, such as refunds	YOU CANNOT UP AIGN FINANCE W.V.	JSE THIS FORM. YOU MUS EREPORT A. VOTER REGISTRATION	a J. McCormick, County	
Candidate or committee Name	Capplidate or Committee's Treasurer					
Political Party (for candidates)						
Office Sought (for candidates) Dia	trict/Division	City, State, Zip Code	/	Paytime Phone #	lerk, Kan	
Due March 29-April 4, 2014 Due April General - First Report Pre-Ger	nary Report 28-May 2, 2014 neral Report ber 20-24, 2014	Ck one): Post-Primary Due May 26-Jui Post-Genera Due Nov. 17-De	i Report ec. 15, 2014	Check if Applicable: Amended Report You must also check box of appropriate reporting period Final Report Zero balance required	Kanawha County, WU	
Reporting Period:	nin 6 RAC must also file					
	REP (Fill in totals after	ORT TOTALS	page 2)	-2 E		
CASH BALA			• ,	AM 11: 1	, , , , , , , , , , , , , , , , , , ,	
Beginning Balance (ending balance from previous report) 1.	00	, 00	TOTA	전 도	0 7 0	
Total Contributions (from Page 2) 2.	+ /7	40	ELECT	TION YEAR-TO-DATE ine 2 from all reports)	الم 1943 الم	
Subtotal (lines 1+2) 3.	= 17	40		1740.00	ה ה	
Total Expenditures (from Page 2) 4.	- 92	70.88	ELECT	AL EXPENDITURES FION YEAR-TO-DATE THE A from all reports	9.889. 7	
Ending Balance (lines 3-4)		19,12		920.75] e. gg	

*Cannot have a negative ending balance

CONTRIBUTORS OF

CANREP

524

age 2.	CONTR	KIBUT	ORS OF:		41 961	
\$250 or Less			Mo	re than \$250		
ate Full Name	Amount	Date		٠,		Amount
LARRY SION		2/29	Full Name: Address: Contributor's job: (Individual Where contributor works Affiliation: (Political comm	ual) Charles : (Individual)	STONE OF	300
			Full Name: Address: Address: Contributor's job: (Individual Where contributor works Affiliation: (Political comm	Porman	0 d pve 4 m bV 25 814	1000
			Full Name: Address: Contributor's job: (Individ Where contributor works Affiliation: (Political comm	ual) : (Individual)		
			Full Name: Address:	nittee)		
			Contributor's job: (Individ Where contributor works Affiliation: (Political comm	ual) : (Individual) iittee)		
Check if additional pages have been atached.			Total Co.	ntributions: n columns)	174	0 =
ITEMIZED EXPENDITU	JRES (Itemiz	ze 3r	d pary expenditur	es/ reimburse	ements)	
/	son); business ad	dress (f firm)	Purpose		Amount
KAN. Co. Clops	Fee 2		5=			
p Political Signia Lucus				Signs 8		95- 21
			*		4	
KE AS MANY COPIES THIS PAGE AS YOU NEED.			Ţ	otal Expendi	tures: 9	201
	OATH OP	AFE	IRMATION			
PETE Thouw	k - 1 - 1	. sw	ear or affirm that th	ne attached sta	atement is	true an
rect, to the best of my knowledge, of the sement, as required by West Virginia	or all financia Code §3-8-5	al tran	sactions occurring	within the per	iod covered	d by thi
The second secon						
2/29 2014			——— Signature	of Candidate,	Agent, or T	reasure
2/29 20/4			Signature	of Candidate, Office Use Only	Agent, or T	reasure

Received By:_