State of West Virginia Campaign Financia Statement (Short Form) in Relation to 2016 Election Year

(Short Form) in Relation to 2016 Election Year

IF YOUR ANSWER TO ANY OF THE FOLLOWING QUUSE THE LONG FORM (FORM F-7): 1. Has your committee received any loans? 2. Has your committee held any fundraisers? 3. Has your committee received any miscellaneous received. Does your committee have any unpaid bills? 5. Have you or anyone else given an in-kind contribution. 6. Has your committee given or received a transfer of exceived.	TO FILE YOUR CAMPAIGN FINANCE: bipts, such as refunds or checking accord to your campaign?	REPORT.			
Candidate or Committee Name	Candidate or Committee's Treasure	- Constitution Constitution Constitution Constitution Constitution Constitution Constitution Constitution Const			
DAUTO C. Nohe	DAVID C. NORE				
Political Party (for candidates)	Treasurer's Mailing Address (Street, Ro	oute or P.O. Box)			
RepublicaN	1906-56 th Street				
Office Sought (for candidates) District/Division		kytime Phone#			
	VIENNA NV 26/23	304-295-4860			
Election Cycle Reporting Period (check one): Primary - First Report Due March 26 - April 1, 2016 General - First Report Due April 25 - 29, 2016 Pre-General Report Due Nov. 21 - Dec. 19, 2016 Non-Election Cycle Report Due In Calendar Year Due last Saturday in March or within 6 days thereafter Check if Applicable: Check if Applicable: Amended Report You must also check box of appropriate reporting period Final Report Zero balance required. PAC must also file Form F-6 Dissolution					
	PORT TOTALS Ter you have completed page 2) MARY	·			
Beginning Balance (ending balance from previous report) 1. 65		AL CONTRIBUTIONS			
Total Contributions (from Page 2) 2. +	(Add I	TION YEAR-TO-DATE ine 2 from all reports)			
Subtotal (lines 1+2) 3. = 65	.64	,300.22			
Total Expenditures (from Page 2) 4	ELEC.	AL EXPENDITURES FION YEAR-TO-DATE ine 4 from all reports)			

*Cannot have a negative ending balance

Ending Balance (lines 3-4)

	\$250 Of Less	•		Of the state of th	े50
Date	Fuli Name	Amount	Date	2667 /	Amount
]				Full Name: Address:	
				Contributor's Job: (fedic do) Where contributes the state of the fed Affiliation: (Political de difference)	
	₩			FullName; Address;	
	T 10	************		Contributor's Job: (1946) Where contributor to the Affiliation: (Political contributor to the Affiliation: (Political contributor)	
				Full Name: Address:	
				Contributor's job; (forfiled of of the Whare contributor vol. of the form Affiliation; (Political co. where)	
				Full Name; Address:	
				Contributor's job: (1866	\
				Total Contribut (add both color)	
	ITEMIZED EXPENDIT	URES (Item	ize 3ı	rd party expendite 14/900	ucsements)
Date	Full name, residence address (if per	rson); business a	ddress	(if firm)	Amount
	1			The second section of the	
	,		*	- Company Company of the Company of	a attended the comment of the commen
	····		~~~		· mada ji ka
					1 y complete growth and a growth a growth and a growth a growth and a growth a growth and a growth and a growth and a growth and a growth a growth and a growth a growth and a growth and a growth and a growth and a growth a gro
			· · · · · · · · · · · · · · · · · · ·		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
		,			
	AS MANY COPIES IS PAGE AS YOU NEED,			Total	onditures:
	0 1 1872/01	OATH O	RAF	FIRMATION	
,	DAVID & NOHE		01	wear or affirm that the att	est etamont le true enc
'——	ct, to the best of my knowledge,	of all\financ	ial tra	ensactions occurring within	an period covered by this
staten	nent√as required by West Virginia	a C/ode §3-8-	5a.		
	11/ 10	Wo			
	Spaint to y			Signature of Ca	sdate, Agent, or Treasure
	10/21	Į.			
Date_	110124 20/10	•		× 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1, 1,	Use Only OCT 24 2016
	<i>V</i>			Q(In.	JEE CHRY MEDIC - MIR
					Mily in I John John
					OCI.

Received B