		QUESTIONS, YOU CANNOT USE THIS FORM. FILE YOUR CAMPAIGN FINANCE REPORT.	
1. Has your committee rec	•		
2. Has your committee held	•		
•	eived any miscellaneous receipts, such as re	funds or checking account interest?	
4. Does your committee ha	•		
	given an in-kind contribution to your campa		
6. Has your committee give	n or received a transfer of excess campaign		
	Steve Stephens for Sheriff of Wo	od County	
	ne:		
Sheriff Office Sought:		District/Circuit:	
	id R. Hines		
Committee's Treasurer:			
<u>.</u>	5301 11th Ave., Vienna, WV 26105		
Treasurer's Mailing Address:			
-	304-966-5520		
Treasurer's Daytime Phone:			

SELECT REPORT TYPE (Filing deadlines falling on Saturday, Sunday or a legal holiday will be extended to the next business day.)

First Quarter Due April 1-7	Second Quarter Due July 1-7	Third Quarter Due October 1-7	Fourth Quarter Due January 1-7			
Primary Report Due 15 days prior to Primary Election or within 4 business days thereafter	General Report Due 15 days prior to General Election or within 4 business days thereafter	Amendment May be filed at any time	Final Report Zero balance required			

REPORT TOTALS

CASH BALANCE SUMMARY					
Beginning Balance (ending balance from previous report)	1.	2761.59			
Total Contributions		0			
(from page 2)	2.	+			
Subtotal		2761.59			
(lines 1+2)	3.	=			
Total Expenditures		0			
(from page 2)	4.	-			
Ending Balance		2761.59			
(line 3-4)		=			

*Cannot have a negative ending balance

(Add line 2 from all reports) 350.00

TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE

TOTAL EXPENDITURES ELECTION YEAR-TO-DATE

(Add line 4 from all reports)

1305.16

CONTRIBUTIONS

More than \$250

Date	Full Name	Election Check One	Amount	Date	Contributor Information	Election Check One	Amount
		□ Primary □ General			Full Name: Address:	Primary	
		🗌 Primary 🔲 General			Contributor's job: Employer: (individual)	General	
		□ Primary □ General			Affiliation: (political committee) Full Name: Address:	Primary	
		Primary			Contributor's job: (individual) Employer: (individual) Affiliation: (political committee)	General	
		🗆 Primary 🗀 General			Full Name: Address:	Primary	
		 Primary General 			Contributor's job: (individual) Employer: (individual)	General	
		🗇 Primary 🗋 General			Affiliation: (political committee) Full Name: Address:	Primary	
		□ Primary □ General			Contributor's job: (individua!) Employer: (individua!) Affiliation: (political committee)	General	
					Total Contributions: (add both columns)		L <u></u>

ITEMIZED EXPENDITURES

Date	Full name, residence address (if person);	Purpose	Amount			
	Total Expenditures:					

OATH OR AFFIRMATION

١,

DAVIN 1. HINES , 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 10/1/2020

Office Use Only

\$250 or Less

Received by: