Wood County

# 04/02/2024 @ 03:45:08 PM State of West Virginia Campaign Financial Statement (Short Form) in Relation to 2024 Election Year

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?

Committee or Candidate Name:	Comm to Elect 1	narjann "MUR"	Copeland Magistrale
Office Sought: Magnsty	ate	District/Circ	uit: <u>5</u>
	Stina L. Spacler		
Treasurer's Mailing Address:	2813 17th Ave	· Vienna, WV	26105
Treasurer's Daytime Phone:	304) 210-4477		
SELECT REPORT TYPE (Filing d	eadlines falling on Saturday, .	Sunday or a legal holiday will	be extended to the next business day.
First Quarter Due April 1-8, 2024	Primary Report Due Apr 29-May 3, 2024	Second Quarter Due July 1-8, 2024	Third Quarter Due October 1-7, 2024
General Report Due October 21-25, 2024	Fourth Quarter  Due January 1-7, 2025	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.	Ø
Total Contributions		
(from page 2)	2.	+ 3855.40
Subtotal		
(lines 1+2)	3.	=
Total Expenditures		\$20CC IN
(from page 2)	4.	#3,855.40
Ending Balance	Ä	$\propto$
(line 3-4)		9

**TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE** 

(Add line 2 from all reports)

**TOTAL EXPENDITURES ELECTION YEAR-TO-DATE** 

(Add line 4 from all reports)

<sup>\*</sup>Cannot have a negative ending balance

### **CONTRIBUTIONS**

## \$250 or Less

MAKE AS MANY COPIES OF THIS PAGE AS NEEDED

# More than \$250

Received by:

		F1				C1	
Date	Full Name	Election	Amount	Date	Contributor Information	Election	Amount
0010		Check One				Check One	1 1
2/.		<b>€</b> CPrimary	الله الله	AL /	Full Name: Chad Cook land	1	
712	Drug Jackson	☐ General	200	101/1-1	Address:	Primary	
724	D VOUS JOCKSIN			1/5/	Full Name: Chad Cope land Address: 20159thSt Venne W Contributor's job: (individual) Employer: (individual) Physical Therapst		142M2
*		☐ Primary		61	Contributor's job: (individual)	General	
		☐ General		2	Employer: (individual)		
		☐ Primary					
		☐ General		3/4	Address: PKB Area Labor Concil (A Address: PKB Area Labor Concil (A Contribute 1) (and the	La Primary	n do
				1 119.	Pr Box 102 Bahershove	192	PH50001
		☐ Primary		124	Contributor a job: (individual)	Conoral	
		☐ General		- '	Employer: (individual)	General	1 1
		☐ Primary			Affiliation: (political committee)	<del></del>	
		☐ General			Address:	Primary	
				ı	A00/633.	Primary	1 1
		☐ Primary			Contributor's job: (individual)		
	464.0	☐ General			Employer: (individual)	General	1 1
		☐ Primary			Affiliation: (political committee)		
			l		Full Name: Varyant Coertain	L	1 11
		☐ General		1 1/	Jana 13m Are Vierne	Primary	IVECTI
		☐ Primary		1 7.1		ſ	1000
		☐ General		1/01/	Contributor's Job: (individual) Employer: (individual)	General	l'
				173	Affiliation: (political committee)	1	1 1
				1	Total Contributions:		100
					( ) ( ) ( ) ( ) ( ) ( ) ( )	1205	T40
					(add both columns)		S
					ı.		

## **ITEMIZED EXPENDITURES**

Date	Full name, residence address (if person);	Purpose	Amount		
	business address (if vendor)	, ,			
0/29	Mid Atlantic Haintingca PC Box 3405 Parlandons	Election Barrers	256.80		
2/08	120 Charleston Rd Poca W 20159	Billbourds	1771.6		
3/15	THE Transformation Media	Bilbounds	11950		
•		L 107 - 10	-		
126/24	1 Cout Sign 201 Parlows bull	Filing Lee	632.60		
Total Expenditures: \$2,855 40					
OATH OR AFFIRMATION					
I, Kristing L. Spader swear or affirm that the attached statement is true and correct, to the					
best of m	y knowledge, of all financial transactions occurring within the p	eriod covered by this statement, as	required by West		
Virginja C	ode §3-8-5a. \				
Lin	Signature of Candid	ate, Treasurer, or Agent			
Date	4/2/2024	Office Use Only			