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?

Co	ommittee or Candidate Name:	BrendaKI	havshall						
0	ffice Sought: Wood . Ool	unty Magistrate	District/Circ	uit:					
Co	ommittee's Treasurer:	JULIE W. Jones							
Tr	easurer's Mailing Address:	5507 3rd Av	enue, Viennal	NV 26105					
Tı	reasurer's Daytime Phone:	304-615-96	89						
SEI	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 1-8, 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.		# 632.50
Total Contributions			
(from page 2)	2.	+	0
Subtotal			Ц
(lines 1+2)	3.	=	\$ 632.50
Total Expenditures			11 / - 2
(from page 2)	4.		# 632.50
Ending Balance			6
(line 3-4)	est y		-0

TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE

(Add line 2 from all reports)

632.50

TOTAL EXPENDITURES ELECTION YEAR-TO-DATE

(Add line 4 from all reports)

632.50

*Cannot have a negative ending balance

CONTRIBUTIONS

\$250 or Less

MAKE AS MANY COPIES OF THIS PAGE AS NEEDED

More than \$250

Date	Full Name	Election Check One	Amount	Date	Contributor Information	Election Check One	Amount
		☐ Primary ☐ General			Full Name: Torendak Mayshall Address: Torendak Mayshall Contributor's job: (Individual) Magastrati	Primary	632.5
		☐ Primary ☐ General			Contributor's job: (Individual) Magastratic Employer: (Individual) Affiliation: [political committee]	General	
		☐ Primary ☐ General			Full Name: Address:	Primary	
		☐ Primary ☐ General			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	
	5000	☐ Primary ☐ General		Affiliation: (political committee) Full Name: Address:	☐ Primary		
		☐ Primary ☐ General			Contributor's job: {individual} Employer: (individual)	General	
					Affiliation: (political committee) Total Contributions: (add both columns)	\$ 630	2.50

ITEMIZED EXPENDITURES

Date	Full name, residence address (if person); business address (if vendor)	Purpose	Amount			
1/16/24	Unos County Clerk	Jiling Fee	632.50			
Total Expenditures: # 432. So OATH 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 Wirginia Code §3-8-5a. Signature of Candidate, Treasurer, or Agent						
Date 💆	april 29, 2024	Office	ice Use Only			
BAAVE AS I	MANY CODIES OF THIS PAGE AS NEEDED	Received by:				