State of West Virginia Campaign Financial Statement (Short Form) in Relation to <u>2020</u> 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	DAVID C.	IAbb	
Committee or Candidate Name Office Sought: 45 Se S	Sor	District/	circuit: County of Jefferson
Committee's Treasurer:			,
Treasurer's Mailing Address:			
Treasurer's Daytime Phone:			
ELECT REPORT TYPE (Filing	deadlines falling on Saturda	y, 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	t) 1.		-0-
Total Contributions			
(from page 2)	2.	+	502.66
Subtotal			
(lines 1+2)	3.	=	502.66
Total Expenditures			502.66
(from page 2)	4.	-	00 8.66
Ending Balance			-0-
(line 3-4)		=	

TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE

(Add line 2 from all reports)

502.66

TOTAL EXPENDITURES ELECTION YEAR-TO-DATE

(Add line 4 from all reports)

502.66

^{*}Cannot have a negative ending balance

CONTRIBUTIONS

\$250 or Less

More than \$250

Date	Full Name	Election Check One	Amount	Date	Contributor Information		Electio Check Or	Amount		
		☐ Primary ☐ General ☐ Primary ☐ General		1/25/20	Full Name: DAVID C. TABB Address: 107 TABB Lane Harpers Ferry NV 25425 Contributor's job: Employer: (individual)		Prima ☐Genei	502.6		
		☐ Primary			Affiliation: (political committee) Full Name:					
		☐ General			Address:		Prima	ry		
	7977	General			Contributor's job: (individual) Employer: (individual)		Gene	al		
		☐ Primary ☐ General			Affiliation: (political committee) Full Name: Address:		Prima	ry		
		☐ Primary ☐ General			Contributor's job: (individual) Employer: (individual)		Gene	al		
		☐ Primary			Affiliation: (political committee)					
		☐ General			Address:		Prima	гу		
		☐ General	1		Contributor's job: (individual) Employer: (individual)		□Gene	rai		
		-			Affiliation: (political c	ommittee) tal Contributions	•			
(add both columns)				F-0	502.66					
ITEMIZED EXPENDITURES										
Da	te Full name, reside	Full name, residence address (if person);				Purpose		Amount		
1/2	120 DAVID C. TABB 107 TABBLANE Harpers Ferry, W				15425 Fil	filing fee		266		
				34.00						

						<u></u>				
						502.0	06			
OATH OR AFFIRMATION Swear or affirm that the attached statement is true and correct, to the								t. to the		
	t of my knowledge, of all financial	transaction								
	inia Code §3-8-5a.				•					
Signature of Candidate, Treasurer, or Agent										
-			5,6,10.		arraraace, rreada	,				
Date 10-6-20 Office Use Or post marked						e Only				
	10/6/20					100				
MAKE AS MANY COPIES OF THIS PAGE AS NEEDED Received by:						laur to	un law A:			