State of West Virginia Campaign Financial Statement **Election Year**

(Short Form) in Relation to 2024



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	e: Hansen for Sheriff		100	
Office Sought: Sheriff		District/Circuit:O		
Committee's Treasurer: Jenn	ifer Hansen			
Treasurer's Mailing Address:	ihansen68@comcast.net			
Treasurer's Daytime Phone:	304-279-8698			
SELECT REPORT TYPE (Filing	g deadlines falling on Saturday	r, Sunday or a legal holiday	will be extended to the next business da	
First Quarter Due April 1-7	Second Quarter Due July 1-7	Third Quarter Due October 1-7	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.	232.07	
Total Contributions	\$ 0.00	
(from page 2) 2	+	
Subtotal (lines 1+2) 3.	= \$232.07 =	
Total Expenditures (from page 2) 4.	0.00	
Ending Balance (line 3-4)	\$232.07	

TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE

(Add line 2 from all reports)

800.00		

TOTAL EXPENDITURES ELECTION YEAR-TO-DATE

(Add line 4 from all reports)

^{*}Cannot have a negative ending balance

CONTRIBUTIONS

\$250 or Less

More than \$250

Received by: _

		Election			T		Election	
Date	Full Name	Check One	Amount	Date	Contributor Information		Check One	Amount
		☐ Primary		├──	Full Name: Address: Contributor's job: (individual)		-	_
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		☐ Primary		1			General	
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		☐ Primary ☐ General			Affiliation: (political committee Full Name: Address:		1	
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		☐ General		ı	Full Name: Address:		Primary	
		☐ Primary		1				
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		☐ Primary		 	Affiliation: (political committee) Full Name:		-	-
		☐ General			Address:		Primary	
		☐ Primary			Contributor's job: (individual)			
		☐ General		Į	Employer: (individual)		General	
					Affiliation: (political committe	ontributions:	ļ	
	(add both columns)							
					land	L		
Date	Date Full name, residence address (if person); Purpose			urpose	Am	nount		
Date	Date Full name, residence address (if person); business address (if vendor)		"	urpose	Arr	iount		
	business	address (ii ve	1001)					
					Total Expend	litures:		
			OATH OR	AFFIRM	/ATION			
_I Jenn	nifer Hansen				m that the attached sta	tement is true and	correct. t	o the
-	f my knowledge, of all financia	l transaction						
	,	cransaction	- occurring	** 1611111	the period tovered by	ans statement, ds i	equired b	7 ****
_	a Code §3-8-5a.	areas or esti-						
Jenr	nifer A Hansen Digitally signed Date: 2024.05	d by Jennifer A Har .03 23:38:50 -04'00	nsen Signati	ure of Ca	andidate, Treasurer, or	Agent		
	05/02/2024							
Date	Date05/03/2024				Office Use (Only		