

# State of West Virginia Campaign Financial Statement (Short Form) in Relation to 2024 Election Year

**received**  
10/10/24

**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: Walch For County Commissioner

Office Sought: County Commissioner District/Circuit: Jefferson

Committee's Treasurer: Antoinette Ringgold

Treasurer's Mailing Address: 105 Limited Drive, Ranson, WV 25438

Treasurer's Daytime Phone: 304-218-4629

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

- |                                                                                                                              |                                                                                                                              |                                                                             |                                                                       |
|------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------|-----------------------------------------------------------------------|
| <input type="checkbox"/> <b>First Quarter</b><br>Due April 1-7                                                               | <input type="checkbox"/> <b>Second Quarter</b><br>Due July 1-7                                                               | <input checked="" type="checkbox"/> <b>Third Quarter</b><br>Due October 1-7 | <input type="checkbox"/> <b>Fourth Quarter</b><br>Due January 1-7     |
| <input type="checkbox"/> <b>Primary Report</b><br>Due 15 days prior to Primary Election or within 4 business days thereafter | <input type="checkbox"/> <b>General Report</b><br>Due 15 days prior to General Election or within 4 business days thereafter | <input type="checkbox"/> <b>Amendment</b><br>May be filed at any time       | <input type="checkbox"/> <b>Final Report</b><br>Zero balance required |

### REPORT TOTALS

#### CASH BALANCE SUMMARY

<b>Beginning Balance</b> (ending balance from previous report) 1.				429.31
<b>Total Contributions</b> (from page 2) 2.	+			4,155.00
<b>Subtotal</b> (lines 1+2) 3.	=			4,584.31
<b>Total Expenditures</b> (from page 2) 4.	-			2,550.32
<b>Ending Balance</b> (line 3-4)	=			2,033.99

**TOTAL CONTRIBUTIONS  
ELECTION YEAR-TO-DATE**  
(Add line 2 from all reports)

4,515.22

**TOTAL EXPENDITURES  
ELECTION YEAR-TO-DATE**  
(Add line 4 from all reports)

2,033.99

*\*Cannot have a negative ending balance*

# CONTRIBUTIONS

**\$250 or Less**

**More than \$250**

Date	Full Name	Election Check One	Amount	Date	Contributor Information	Election Check One	Amount
6/13	Wanda Perry	<input type="checkbox"/> Primary <input type="checkbox"/> General	100.00		Full Name: Address:	<input type="checkbox"/> Primary	
6/13	Rhonda Lehman	<input type="checkbox"/> Primary <input type="checkbox"/> General	200.00		Contributor's job: Employer: (individual) Affiliation: (political committee)	<input type="checkbox"/> General	
6/13	R. Kenneth Hunter	<input type="checkbox"/> Primary <input type="checkbox"/> General	150.00		Full Name: Address:	<input type="checkbox"/> Primary	
6/13	Ashley Robinson	<input type="checkbox"/> Primary <input type="checkbox"/> General	150.00		Contributor's job: (individual) Employer: (individual) Affiliation: (political committee)	<input type="checkbox"/> General	
6/13	James Hilton	<input type="checkbox"/> Primary <input type="checkbox"/> General	100.00		Full Name: Address:	<input type="checkbox"/> Primary	
6/13	Renny Smith	<input type="checkbox"/> Primary <input type="checkbox"/> General	50.00		Contributor's job: (individual) Employer: (individual) Affiliation: (political committee)	<input type="checkbox"/> General	
6/13	Lanae Johnson	<input type="checkbox"/> Primary <input type="checkbox"/> General	40.00		Full Name: Address:	<input type="checkbox"/> Primary	
6/13	Andrew Clark	<input type="checkbox"/> Primary <input type="checkbox"/> General	110.00		Contributor's job: (individual) Employer: (individual) Affiliation: (political committee)	<input type="checkbox"/> General	
<b>Total Contributions:</b> (add both columns)							<u>900.00</u>

## ITEMIZED EXPENDITURES

Date	Full name, residence address (if person);	Purpose	Amount
6/18	Signs on The Cheap	Advertisement	530.29
6/20	Amazon MarketPlace	<i>Yard Stakes</i>	25.67
6/21	Austin Peer Photography	Website	212.00
6/27	Amazon MarketPlace	<i>Magnetic Signs</i>	61.29
7/8	Austin Peeer Photography	Video	530.00

**Total Expenditures:** 1,359.25

**OATH OR AFFIRMATION**

I, Antoinette Ringgold, 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.

Antoinette Ringgold Signature of Candidate, Treasurer, or Agent

Date 10/10/24

**Office Use Only**

  
  

Received by: \_\_\_\_\_

## CONTRIBUTIONS

**\$250 or Less**

**More than \$250**

Date	Full Name	Election Check One	Amount	Date	Contributor Information	Election Check One	Amount
8/12	Rebecca Phipps	<input type="checkbox"/> Primary <input type="checkbox"/> General	50.00		Full Name: Address:	<input type="checkbox"/> Primary	
8/12	Jan G. Hafer	<input type="checkbox"/> Primary <input type="checkbox"/> General	50.00		Contributor's job: Employer: (individual) Affiliation: (political committee)	<input type="checkbox"/> General	
8/12	William Senseney	<input type="checkbox"/> Primary <input type="checkbox"/> General	100.00		Full Name: Address:	<input type="checkbox"/> Primary	
8/12	Robyn M Harrison-Toff	<input type="checkbox"/> Primary <input type="checkbox"/> General	150.00		Contributor's job: (individual) Employer: (individual) Affiliation: (political committee)	<input type="checkbox"/> General	
8/12	Bruce/Carolyn Thomas	<input type="checkbox"/> Primary <input type="checkbox"/> General	30.00		Full Name: Address:	<input type="checkbox"/> Primary	
8/12	Mary Carlson Ruos	<input type="checkbox"/> Primary <input type="checkbox"/> General	30.00		Contributor's job: (individual) Employer: (individual) Affiliation: (political committee)	<input type="checkbox"/> General	
8/14	James Bauman	<input type="checkbox"/> Primary <input type="checkbox"/> General	50.00		Full Name: Address:	<input type="checkbox"/> Primary	
8/15	Marshall McCormick	<input type="checkbox"/> Primary <input type="checkbox"/> General	100.00		Contributor's job: (individual) Employer: (individual) Affiliation: (political committee)	<input type="checkbox"/> General	

**Total Contributions:**  
(add both columns) 560.00

## ITEMIZED EXPENDITURES

Date	Full name, residence address (if person);	Purpose	Amount
8/14	Austin Peer Photography	Photo Shoot	212.00
8/19	Facebook Ad	Advertisement	20.00
8/26	Signs on the Cheap	Advertisement Signs	404.51
9/4	Act Blue	JC HTTPSSecure	33.00
9/9	Home Depot	Sign Installation Equipment	208.72
<b>Total Expenditures:</b>			880.23

**OATH OR AFFIRMATION**

I, \_\_\_\_\_, 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 \_\_\_\_\_

**Office Use Only**

## CONTRIBUTIONS

**\$250 or Less**

**More than \$250**

Date	Full Name	Election Check One	Amount	Date	Contributor Information	Election Check One	Amount
7/26	Gregory Vaugh	<input type="checkbox"/> Primary <input type="checkbox"/> General	100.00		Full Name: Address:	<input type="checkbox"/> Primary	
7/31	David Battiera	<input type="checkbox"/> Primary <input type="checkbox"/> General	100.00		Contributor's job: Employer: (individual) Affiliation: (political committee)	<input type="checkbox"/> General	
8/2	Lisa Payne	<input type="checkbox"/> Primary <input type="checkbox"/> General	15.00		Full Name: Address:	<input type="checkbox"/> Primary	
8/6	Tracey Riorden	<input type="checkbox"/> Primary <input type="checkbox"/> General	25.00		Contributor's job: (individual) Employer: (individual) Affiliation: (political committee)	<input type="checkbox"/> General	
8/9	Barbara Huyett	<input type="checkbox"/> Primary <input type="checkbox"/> General	25.00		Full Name: Address:	<input type="checkbox"/> Primary	
8/12	Zach Holland	<input type="checkbox"/> Primary <input type="checkbox"/> General	20.00		Contributor's job: (individual) Employer: (individual) Affiliation: (political committee)	<input type="checkbox"/> General	
8/12	Rie Wilson	<input type="checkbox"/> Primary <input type="checkbox"/> General	40.00		Full Name: Address:	<input type="checkbox"/> Primary	
8/12	Alan Engleberger	<input type="checkbox"/> Primary <input type="checkbox"/> General	40.00		Contributor's job: (individual) Employer: (individual) Affiliation: (political committee)	<input type="checkbox"/> General	

**Total Contributions:**  
(add both columns)

**365.00**

## ITEMIZED EXPENDITURES

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

**Total Expenditures:**

### OATH OR AFFIRMATION

I, \_\_\_\_\_, 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 \_\_\_\_\_

**Office Use Only**

## CONTRIBUTIONS

**\$250 or Less**

**More than \$250**

Date	Full Name	Election Check One	Amount	Date	Contributor Information	Election Check One	Amount
7/3	Margaret Twice	<input type="checkbox"/> Primary <input type="checkbox"/> General	50.00	7/3	Full Name: James Walch Address: Contributor's job: Retired Employer: (individual) Affiliation: (political committee)	<input type="checkbox"/> Primary <input type="checkbox"/> General	530.00
7/3	Christopher Craig	<input type="checkbox"/> Primary <input type="checkbox"/> General	100.00				
7/3	Laurie Potteiger	<input type="checkbox"/> Primary <input type="checkbox"/> General	50.00				
7/3	Christine Scott Huddle	<input type="checkbox"/> Primary <input type="checkbox"/> General	50.00				
7/3	Warren McKinney	<input type="checkbox"/> Primary <input type="checkbox"/> General	50.00				
7/3	E. Jeremy Hutton	<input type="checkbox"/> Primary <input type="checkbox"/> General	50.00				
7/3	The Tenfold Fairtrade Collection	<input type="checkbox"/> Primary <input type="checkbox"/> General	50.00				
7/3	Steve Parabis	<input type="checkbox"/> Primary <input type="checkbox"/> General	25.00		Full Name: Address: Contributor's job: (individual) Employer: (individual) Affiliation: (political committee)	<input type="checkbox"/> Primary <input type="checkbox"/> General	

**Total Contributions:**  
(add both columns) 955.00

## ITEMIZED EXPENDITURES

Date	Full name, residence address (if person);	Purpose	Amount
7/19	Facebook Ad	Advertisement	8.94
8/1	Shepherd University Foundation	Ticket	150.00
8/6	Facebook Ad	Advertisement	25.00
8/8	Aldi	Refreshments	32.81
8/12	Facebook Ad	Advertisement	25.00

**Total Expenditures:** 241.75

**OATH OR AFFIRMATION**

I, \_\_\_\_\_, 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 \_\_\_\_\_

**Office Use Only**

## CONTRIBUTIONS

**\$250 or Less**

**More than \$250**

Date	Full Name	Election Check One	Amount	Date	Contributor Information	Election Check One	Amount
8/21	Wes Dilley	<input type="checkbox"/> Primary <input type="checkbox"/> General	250.00		Full Name: Address:	<input type="checkbox"/> Primary <input type="checkbox"/> General	
7/31	James Grantham	<input type="checkbox"/> Primary <input type="checkbox"/> General	25.00		Contributor's job: Employer: (individual) Affiliation: (political committee)	<input type="checkbox"/> Primary <input type="checkbox"/> General	
8/22	Robin Tribble	<input type="checkbox"/> Primary <input type="checkbox"/> General	25.00		Full Name: Address:	<input type="checkbox"/> Primary <input type="checkbox"/> General	
8/22	Rebecca Phipps	<input type="checkbox"/> Primary <input type="checkbox"/> General	20.00		Contributor's job: (individual) Employer: (individual) Affiliation: (political committee)	<input type="checkbox"/> Primary <input type="checkbox"/> General	
8/22	Robyn Schneiderman	<input type="checkbox"/> Primary <input type="checkbox"/> General	25.00		Full Name: Address:	<input type="checkbox"/> Primary <input type="checkbox"/> General	
8/21	Nancy McCormack	<input type="checkbox"/> Primary <input type="checkbox"/> General	100.00		Contributor's job: (individual) Employer: (individual) Affiliation: (political committee)	<input type="checkbox"/> Primary <input type="checkbox"/> General	
8/21	Lisa Payne	<input type="checkbox"/> Primary <input type="checkbox"/> General	15.00		Full Name: Address:	<input type="checkbox"/> Primary <input type="checkbox"/> General	
8/28	John Snead	<input type="checkbox"/> Primary <input type="checkbox"/> General	20.00		Contributor's job: (individual) Employer: (individual) Affiliation: (political committee)	<input type="checkbox"/> Primary <input type="checkbox"/> General	

**Total Contributions:**  
(add both columns) 480.00

## ITEMIZED EXPENDITURES

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

**Total Expenditures:**

**OATH OR AFFIRMATION**

I, \_\_\_\_\_, 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 \_\_\_\_\_

**Office Use Only**

## CONTRIBUTIONS

**\$250 or Less**

**More than \$250**

Date	Full Name	Election Check One	Amount	Date	Contributor Information	Election Check One	Amount
8/22	Alan Engleberg	<input type="checkbox"/> Primary <input type="checkbox"/> General	5.00		Full Name: Address:	<input type="checkbox"/> Primary <input type="checkbox"/> General	
8/22	Andrew W. Mollohan	<input type="checkbox"/> Primary <input type="checkbox"/> General	100.00		Contributor's job: Employer: (individual) Affiliation: (political committee)	<input type="checkbox"/> Primary <input type="checkbox"/> General	
8/22	Randall Tremba	<input type="checkbox"/> Primary <input type="checkbox"/> General	10.00		Full Name: Address:	<input type="checkbox"/> Primary <input type="checkbox"/> General	
8/22	Neal Barkus	<input type="checkbox"/> Primary <input type="checkbox"/> General	20.00		Contributor's job: (individual) Employer: (individual) Affiliation: (political committee)	<input type="checkbox"/> Primary <input type="checkbox"/> General	
8/22	Pamela Parziale	<input type="checkbox"/> Primary <input type="checkbox"/> General	50.00		Full Name: Address:	<input type="checkbox"/> Primary <input type="checkbox"/> General	
8/22	Bob Smith	<input type="checkbox"/> Primary <input type="checkbox"/> General	200.00		Contributor's job: (individual) Employer: (individual) Affiliation: (political committee)	<input type="checkbox"/> Primary <input type="checkbox"/> General	
8/22	Suellen Myers	<input type="checkbox"/> Primary <input type="checkbox"/> General	20.00		Full Name: Address:	<input type="checkbox"/> Primary <input type="checkbox"/> General	
8/22	Eleanor Fehr	<input type="checkbox"/> Primary <input type="checkbox"/> General	20.00		Contributor's job: (individual) Employer: (individual) Affiliation: (political committee)	<input type="checkbox"/> Primary <input type="checkbox"/> General	

**Total Contributions:**  
(add both columns)

425.00

## ITEMIZED EXPENDITURES

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

**Total Expenditures:**

**OATH OR AFFIRMATION**

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\_\_\_\_\_  
Signature of Candidate, Treasurer, or Agent

Date \_\_\_\_\_

**Office Use Only**

## CONTRIBUTIONS

**\$250 or Less**

**More than \$250**

Date	Full Name	Election Check One	Amount	Date	Contributor Information	Election Check One	Amount
9/3	Linda Romero	<input type="checkbox"/> Primary <input type="checkbox"/> General	5.00		Full Name: Address:	<input type="checkbox"/> Primary	
9/3	Susanna O'Koenig	<input type="checkbox"/> Primary <input type="checkbox"/> General	50.00		Contributor's job: Employer: (individual) Affiliation: (political committee)	<input type="checkbox"/> General	
9/5	Lisa Payne	<input type="checkbox"/> Primary <input type="checkbox"/> General	15.00		Full Name: Address:	<input type="checkbox"/> Primary	
8/4	Sara Martin	<input type="checkbox"/> Primary <input type="checkbox"/> General	50.00		Contributor's job: (individual) Employer: (individual) Affiliation: (political committee)	<input type="checkbox"/> General	
8/4	Shawn McGowen	<input type="checkbox"/> Primary <input type="checkbox"/> General	100.00		Full Name: Address:	<input type="checkbox"/> Primary	
8/4	Patricia Fiori	<input type="checkbox"/> Primary <input type="checkbox"/> General	250.00		Contributor's job: (individual) Employer: (individual) Affiliation: (political committee)	<input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General			Full Name: Address:	<input type="checkbox"/> Primary	
		<input type="checkbox"/> Primary <input type="checkbox"/> General			Contributor's job: (individual) Employer: (individual) Affiliation: (political committee)	<input type="checkbox"/> General	

**Total Contributions:**  
(add both columns) 470.00

## ITEMIZED EXPENDITURES

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

**Total Expenditures:**

I, Antoinette Ringgold, 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.

Antoinette Ringgold Signature of Candidate, Treasurer, or Agent

Date 10/10/24

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