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

10/24/2024

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 | : Matthew L. H | arvey | |
|--|---|------------------------------------|--|
| Office Sought: Prosec | rper | District/0 | Circuit: Jafferson |
| Committee's Treasurer: | | | |
| Treasurer's Mailing Address: | | | |
| Treasurer's Daytime Phone: | | | |
| First Quarter | Second Quarter | Third Quarter | Fourth Quarter |
| Due April 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 | Due January 1-7 Final Report Zero balance required |

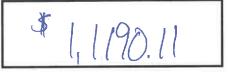
REPORT TOTALS

CASH BALANCE SUMMARY

| Beginning Balance (ending balance from previous report) | 1. | |
|---|----|-----|
| Total Contributions | | |
| (from page 2) | | + + |
| Subtotal | | |
| (lines 1+2) | 3. | = |
| Total Expenditures | | > |
| (from page 2) | | |
| Ending Balance | | (× |
| (line 3-4) | | |

TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE

(Add line 2 from all reports)



TOTAL EXPENDITURES ELECTION YEAR-TO-DATE

(Add line 4 from all reports)

\$ 1,1190.11

^{*}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 | Conti | ibutor Information | Election Check One | Amount |
|--|--|-----------------------|---------|---|--|-------------------------------|-----------------------|-----------|
| | | ☐ Primary ☐ General | | | Full Name: | | | |
| | | | | | Address: | | ☐ Primary | |
| | | ☐ Primary ☐ General | | | Contributor's job: (individual) Employer (individual) | | General | |
| | | ☐ Primary | | | Affiliation: (bolitical committee) Full Name: | | | |
| | | ☐ General | | | Address: | | ☐ Primary | |
| | | ☐ Primary | | Contributor's job: (individual) | | | | |
| | | ☐ General | | | Employer: (individual) Affiliation: (political committee) Full Name: Address: | | General | |
| | | ☐ Primary ☐ General | | | | | Primary | |
| \vdash | | □ Primary | | ł | Contributor's job: (individual) Employer: (individual) Affiliation: (political committee) Full Name: | | | |
| | | General | | | | | | |
| | | ☐ Primary | | <u> </u> | | | | |
| | | ☐ General | | | Address: Contributor's job: (individual) | | ☐ Primary | |
| | | ☐ Primary | | 1 | | | General | |
| | | ☐ General | | 4 | Employer: (individual) Affiliation: (political committee) | | | |
| | | | | | TATITIALION: (POINTCAL | otal Contributions: | | |
| | | | | | | (add both columns) | 1 | |
| | | | | | | ` ' | | |
| | Date Full name, residence address (if person); business address (if vendor) | | | | 700 | Purpose | | nount |
| | | | | | | | + | |
| | | | | | | | | |
| | | | | | | | | |
| | 4 1 6 1 | | OATH OR | ΔFFIRN | | xpenditures: | 8 | |
| . / | latthew L. Harvey | | | | | hed statement is true and | correct. to | o the |
| best | of my knowledge, of all financial t | ransaction | | | | | | |
| | nia Code §3-8-5a. | | | *************************************** | period cove | . a.a. by and statement, as f | equired b | 7 *** 631 |
| * B | -ML N 1 | | | | | | | |
| - | | | Signatu | ire of Ca | ndidate, Treasu | ırer, or Agent | | |
| | | | | | | | | |
| Date 10/24/2024 | | | | Office Use Only | | | | |
| | | | | | | _ | | |
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