

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

received
11/4/2024

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: Daniel P. Lutz Jr
Office Sought: Conservation Dist. Supervisor District/Circuit: Jefferson
Committee's Treasurer: SELF
Treasurer's Mailing Address: 175 WHEATLAND ROAD Charles Town WV
Treasurer's Daytime Phone: 304 725 0966 254/14

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 1-7
- ☐ **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) 1.		328 51
Total Contributions (from page 2) 2.	+	— 0 —
Subtotal (lines 1+2) 3.	=	328 51
Total Expenditures (from page 2) 4.		328 51
Ending Balance (line 3-4)		— 0 —

TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE

(Add line 2 from all reports)

758 25

TOTAL EXPENDITURES ELECTION YEAR-TO-DATE

(Add line 4 from all reports)

758 25

*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
		<input type="checkbox"/> Primary <input type="checkbox"/> General	0-		Full Name: Address:	<input type="checkbox"/> Primary <input type="checkbox"/> General	0-
		<input type="checkbox"/> Primary <input type="checkbox"/> General			Contributor's job: (individual) Employer: (individual) Affiliation: (political committee)	<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General			Full Name: Address:	<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General			Contributor's job: (individual) Employer: (individual) Affiliation: (political committee)	<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General			Full Name: Address:	<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General			Contributor's job: (individual) Employer: (individual) Affiliation: (political committee)	<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General			Full Name: Address:	<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General			Contributor's job: (individual) Employer: (individual) Affiliation: (political committee)	<input type="checkbox"/> Primary <input type="checkbox"/> General	
				Total Contributions: (add both columns)			

ITEMIZED EXPENDITURES

Date	Full name, residence address (if person); business address (if vendor)	Purpose	Amount
16 July 2024	Meet and Greet		328 ⁵¹
	175 Westland Rd CT av	Thank you	
Total Expenditures:			328 ⁵¹

I, Daniel P. Lutz Jr, **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
Virginia Code §3-8-5a.

[Signature] Signature of Candidate, Treasurer, or Agent

Date 30 Oct 2024

Office Use Only

Received by: _____