

State of West Virginia Campaign Financial Statement (Short Form) in Relation to the 2008 Election Year

IF YOUR ANSWER TO ANY OF THE FOLLOWING QUESTIONS IS "YES," 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?

Candidate or Committee Name RALPH LORENZETTI	Candidate or Committee's Treasurer RALPH LORENZETTI
Political Party (for candidates) DEMOCRAT	Treasurer's Mailing Address (Street, Route or P.O. Box) 161 CLARK CRT
Office Sought (for candidates) District/Division PROSECUTING ATTORNEY	City, State, Zip Code Daytime Phone # HARPERS FERRY, WV 304-671-1966

Election Cycle Reporting Period (check one):

- | | | |
|---|--|--|
| <input type="checkbox"/> Primary - First Report
Due March 29 - April 4, 2008 | <input checked="" type="checkbox"/> Pre-primary Report
Due April 28 - May 2, 2008 | <input type="checkbox"/> Post-primary Report
Due May 26 - 30, 2008 |
| <input type="checkbox"/> General - First Report
Due Sept. 22 - 26, 2008 | <input type="checkbox"/> Pre-general Report
Due Oct. 20 - 24, 2008 | <input type="checkbox"/> Post-general Report
Due Nov. 17 - 21, 2008 |

- Non-Election Cycle Reporting Period:**
- Annual Report Due in ____ Calendar Year
Due last Saturday in March or within 6 days thereafter

Check if Applicable:

- Amended Report
You must also check box of appropriate reporting period
- Final Report
Zero balance required.
PAC must also file Form F-6 Dissolution

REPORT TOTALS

(Fill in totals after you have completed page 2)

CASH BALANCE SUMMARY

Beginning Balance (ending balance from previous report) 1.		0	
Total Contributions (from Page 2) 2.	+	3949 <u>76</u>	
Subtotal (lines 1+2) 3.	=	3949 <u>76</u>	
Total Expenditures (from Page 2) 4.	-	3949 <u>76</u>	
Ending Balance (lines 3-4)	=	0	
<i>*Cannot have a negative ending balance</i>			

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

10621 56

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

10621 56

CONTRIBUTORS OF:

\$250 or less

More than \$250

Date	Full Name	Amount	Date	Amount
			Full Name: RALPH LORENZETTI Address: 101 CLARK CRT HARPER'S FERRY, WV 25415 Contributor's job: (Individual) ATTORNEY Where contributor works: (Individual) JEFFERSON CO Affiliation: (Political committee) NA CANDIDATE	3949.76
			Full Name: ROSIE CANNARELLA LORENZETTI Address: 101 CLARK CRT HARPER'S FERRY, WV 25415 Contributor's job: (Individual) DOCTOR - MD Where contributor works: (Individual) HARPER'S FERRY Affiliation: (Political committee) NA WIFE OF CANDIDATE	
			Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
			Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	

Check if additional pages have been attached.

Total Contributions: (add both columns)

ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/ reimbursements)

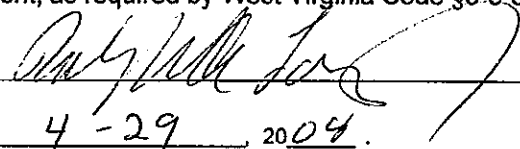
Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount
3-25	STAPLES	ENVELOPES	33.13
4-1		COPIES	11.64
4-10	24 CHARLES TOWN PLAZA	TRI-FOLDS	92.75
4-17	CHARLES TOWN, WV	TRI-FOLDS	68.90
4-29	25414	TRI-FOLDS	76.85
4-1	ALBERT + ARNOLD	FOOD + BEVERAGE	79.33
4-4	S. WASHINGTON AV CHARLES TOWN, WV 25414	FOOD	26.08
4-4	VITAL SIGNS	WIRE POSTS	20.00
4-9	32 FEDERAL WAY	SIGNS	514.39
4-21	CHARLES TOWN, WV 25414	STAKES	35.97
4-4	JEFFERSON COUNTY CLERK - COURT HOUSE CHARLES TOWN, WV 25414	CD-VOTERS LIST	90.56

MAKE AS MANY COPIES OF THIS PAGE AS YOU NEED.

Total Expenditures:

OATH OR AFFIRMATION

I, RALPH A. LORENZETTI JR, swear or affirm that the attached statement is true and correct, to the best of my knowledge, for all financial transactions occurring within the period covered by this statement, as required by West Virginia Code §3-8-5a.



Signature of Candidate, Agent, or Treasurer

Date 4-29, 2004.

Office Use Only

Received By: _____

CONTRIBUTORS OF:

\$250 or less

More than \$250

Date	Full Name	Amount	Date	Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	Amount
				Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
				Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
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Check if additional pages have been attached.

Total Contributions: (add both columns)

ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/ reimbursements)

Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount
4-1	FOOD LION	FOOD MEET	40.74
4-5	SOMERSET VILLAGE CHARLES TOWN, WV 25414	FOOD + GREET	57.15
4-6	ANVIL REST./CATERING 1290 WASHINGTON HARPER'S FERRY, WV 25425	FOOD MEET + GREET	310.00
4-11	HOME DEPOT	POSTS	8.36
4-14	17 OAKLEE DR RANSON, WV 25438	POSTS	8.36
4-16	HERALD - MAIL 400 S. CANNON AV. HAGERSTOWN, MD 21740	AD	586.08
4-18	THE JOURNAL	AD	240.00
4-24	207 W. KING ST. MARTINSBURG, WV 25401	E-AD	25.00

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Total Expenditures:

OATH OR AFFIRMATION

I, RALPH A. LORENZETTI, JR., swear or affirm that the attached statement is true and correct, to the best of my knowledge, for all financial transactions occurring within the period covered by this statement, as required by West Virginia Code §3-8-5a.

Ralph A. Lorenzetti, Jr.

Signature of Candidate, Agent, or Treasurer

Date 4-29, 2008

Office Use Only

Received By: _____

CONTRIBUTORS OF:

\$250 or less

More than \$250

Date	Full Name	Amount	Date	Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	Amount
				Full Name: Address: Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)	
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Check if additional pages have been attached.

Total Contributions: (add both columns)

ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/ reimbursements)

Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount
4-24	SIR SPEEDY 1351 EDWIN MILLER BLVD. MARTINSBURG, WV 25404	POST CARDS	799.87
4-24	POSTMASTER - USPS EDWIN MILLER BLVD MARTINSBURG, WV 25404	POSTAGE	819.60

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Total Expenditures:

OATH OR AFFIRMATION

I, RALPH A. LORENZETTI, JR., swear or affirm that the attached statement is true and correct, to the best of my knowledge, for all financial transactions occurring within the period covered by this statement, as required by West Virginia Code §3-8-5a.

Ralph A. Lorenzetti, Jr. Signature of Candidate, Agent, or Treasurer

Date 4-29 2008.

Office Use Only

Received By: _____