10/31/2005 10 : 07

**FEC FORM 3**

# REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) — USE FEC MAILING LABEL OR TYPE OR PRINT ▼ — Example: If typing, type over the lines

FRIENDS OF MARGARET WORKMAN

ADDRESS (number and street) ▼ POST OFFICE BOX 325

Check if different than previously reported. (ACC)

CITY ▲ CHARLESTON STATE ▲ WV ZIP CODE ▲ 25337

2. FEC IDENTIFICATION NUMBER ▼ C00370908

3. IS THIS REPORT NEW (N) OR X AMENDED (A)

STATE ▼ WV DISTRICT 02

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

X April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on in the State of

(c) 30-Day POST-Election Report for the:

General (30G) Runoff (30R) Special (30S)

Election on in the State of

5. Covering Period 01 01 2005 through 03 31 2005

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. Albert Mays

Signature of Treasurer Electronically Filed by Mr. Albert Mays Date 10 31 2005

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

| Office Use Only | | | | | | | | FEC FORM 3 (Revised 02/2005) |
|---|---|---|---|---|---|---|---|---|