

State of West Virginia Campaign Financial Statement (Short Form) in Relation to 2016 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 Michael J. Bais	Candidate or Committee's Tre	Dayı's
Political Party (for candidates)	Treasurer's Mailing Address (Street, Route or P.O. Box)
Kepublican	PO BOX 45	
Office Sought (for candidates) Distri	et/Division City, State, Zip Code	Daytime Phone # 15676 30 4-475-4835
Election Cycle Reporting	Perlod (check one):	Check if Applicable:
Primary - First Report Due March 26 - April 1, 2016 Pre-Prima Due April 26	Post-Primary Report 5-29, 2016 Due May 23 - June 21, 201	1
General - First Report Due September 26 - 30, 2016 Due Octobe	ral Report Post-General Report Due Nov. 21 - Dec. 19, 201	box of appropriate
Reporting Period:	Annual Report Due In Calendar Year Due last Saturday in March or within 6 days thereafter	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 (anding balance from previous report)	1.		O	
Total Contributions (from Page 2)	2.	+	10 -	
Subtotal (lines 1+2)	3.	=	10 -	
Total Expenditures (from Page 2)	4.	-	10-	
Ending Balance (lines 3-4)		=	-D -	
*Cannot have a negative ending balance				

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

10,00

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

10.00

Official Form F-7A

Issued by the WV State Election Commission

Revised 05/15

	 		

More than \$250

_ P≎ge 2

CONTRIBUTORS OF:

2E0 orl occ			

Date	Full Name	Amount	Date		Amount
	Michael J. Baisden	10-		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)	
				Full Name: Address; Contributor's Job: (Individual) Where contributor works: (Individual) Affiliation: (Polltical committee)	
				Full Name: Address: Contributor's job: (Individual) Vinere contributor works: (Individual) Aftiliation: (Political committee)	
			4	Total Contributions: (add both columns)	10-

ITEMIZED EXPENDITURES (Itemize 3rd party expenditures/reimbursements)

Date	Full name, residence address (If person); business address (If firm)	Purpose	Amount		
	WV Sec. of State	Filing Fee-	10-		
-			<u>.</u>		
	AC MANY CODIES		12 -		
	AS MANY COPIES S PAGE AS YOU NEED.	Total Expenditures:			

OATH OR AFFIRMATION

correct, to the best of my knowledge, of all financial transaction	r affirm that the attach ons occurring within th	ed statement is true and e period covered by this	
statement, as required by West Virginia Code §3-8-5a.			
Date 4/28/20/620		idate, Agent, or Treasuret	
	Office (Jse Only	
		ST SEP 22 PH 2: 45	50
	Received By:	THAIDI	Martine Promi

2