State of West Virginia Campaign Financial Statement (Short Form) in Relation to 2011 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	Candidate or Committee's Treasure Theresa A. Waxyy	
Political Party (for candidates)	Treasurer's Mailing Address (Stree	t, Route or P.O. Box)
Office Sought (for candidates) District/Division	30 Diarnord Cove City, State, Zip Code Bridgeport, WV 24330	Daytime Phone #
Election Cycle Reporting Period (chemotric Primary - First Report Due March 26-April 1,2011 Pre-primary Report Due April 29-May 3, 2011 General - First Report Due Aug. 22-26, 2011 Pre-general Report Due Sept. 19-23, 2011	J 7 ,	Check if Applicable: Amended Report You must also check box of appropriate reporting period Final Report
	ort Due In Calendar Year turday in March or within 6 after	Zero balance required. PAC must also file Form

REPORT TOTALS

(Fill in totals after you have completed page 2)

CASH BALANCE SUMMARY

Beginning Balance (ending balance from previous report)	1.		233,55	
Total Contributions (from Page 2)	2.	+	Ø	Overbonness of
Subtotal (lines 1+2)	3.		233.55	
Total Expenditures (from Page 2)	4.		Ø	
Ending Balance (lines 3-4)			233.55	
*Cannot have a ne	gativ	e end	ling balance	

	TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE (Add line 2 from all reports)	
	Ø	
	TOTAL EXPENDITURES ELECTION YEAR-TO-DATE (Add line 4 from all reports)	
	D	September 1
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CONTRIBUTORS OF:

\$250 or Less

More than \$250

		Amount	Date	Amoui			CALCULATE WHITE HER CONTROL OF THE C	
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				Affiliation: (Political	committee)			
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	ITEMIZED EXPENDI	TURES (Item	nize 3	rd pary exp	enditur	es/ reimburs	ements)	
Date	Full name, residence address (if per	son); business ad	dress (if	firm)		Purpose		Amount
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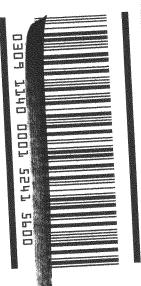


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