State of West Virginia Campaign Financial Statement (Short Form) in Relation to 2006 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?

Non-Election Cycle Reporting Period:		tCalendar Year Irday in March or thereafter	Zero balance required PAC must also file Form F-6 Dissolution
General - First Report Due Sept. 2- 8, 2006	Pre-general Report Due Oct. 21- 28, 20	Post-general Report Due Dec 2- 8, 2006	box of appropriate reporting period Final Report
Primary - First Report Due March 25-31, 2006	Pre-primary Report Due April 22-29, 20	Post-primary Report	Check if Applicable: Amended Report You must also check
Office Sought (for candidate	s) District/Division Reporting Period (che	City, State, Zip Code Clarksburg, WV263	1
Political Party (for candidates		Treasurer's Mailing Address (Street Rt. I, Box 352	t, Route or P.O. Box)
Candidate or Committee Nam	ne	Candidate or Committee's Treasure Theresa A. Waxma	

REPORT TOTALS

(Fill in totals after you have completed page 2)

CASH BALANCE SUMMARY

Beginning Balance (ending balance from previous report)	1.	133.55	TOTALCO
Total Contributions (from Page 2)	2.	+ 0	ELECTION (Add line 2
Subtotal (lines 1+2)	3.	= /33.55	TOTALES
Total Expenditures (from Page 2)	4.	- 0	TOTALEX ELECTION (Add line 4
Ending Balance (lines 3-4)		= /33.55	
*Cannot have a neg	ativ	ve ending balance	

TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE (Add line 2 from all reports)
0
TOTAL EXPENDITURES ELECTION YEAR-TO-DATE (Add line 4 from all reports)
0

CONTRIBUTIONS

Less than \$250

\$250 or more

Date	Full Name	Amount	Date				Amount
				Full Name: Address:			
				Contributor's job: (Individual) Where works: (Individual) Affiliation: (Political committe	e)		
				Full Name: Address:			
				Contributor's job: (Individual) Where works: (Individual) Affiliation: (Political committee)			
				Full Name: Address:			
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correc	ct, to the best of my knowledge nent, as required by West Virgii	e, of all financ nia Code 83-8	cial tra i-5a.	ansactions occurring w	vitnin the p	епоа соче	rea by this
State							
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