## State of West Virginia Campaign Financial Statement (Short Form) in Relation to 2012 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 Wirt County Republican Women	Candidate or Committee's Treasurer Susan A. Baileys			
Political Party (for candidates) N/A	Treasurer's Mailing Address (Street, Route or P.O. Box) Rt. 2 Box 123			
Office Sought (for candidates)  District/Division  N/A	City, State, Zip Code Daytime Phone # Elizabeth WV 26143 (304) 275-4369			
Election Cycle Reporting Period (che Primary - First Report Due March 31-April 6,2012  General - First Report Due Sept. 24-28, 2012  Pre-general Report Due Oct. 22-26, 2012	Post-primary Report Due May 21-June 19, 2012  Post-general Report Due Nov 19-Dec 19, 2012  Check if Applicable: Amended Report You must also check box of appropriate reporting period  Final Report			
MON-CIECTION CACIG ME-	ort Due In Calendar Year			

## REPORT TOTALS

(Fill in totals after you have completed page 2)

## **CASH BALANCE SUMMARY**

Beginning Balance (ending balance from previous report)	1.	\$ 135.46		
Total Contributions (from Page 2)	2.	\$ 0.00		
Subtotal (lines 1+2)	3.	= \$ 135.46		
Total Expenditures (from Page 2)	4.	\$ 0.00 -		
Ending Balance (lines 3-4)		= \$ 135.46		
*Cannot have a negative ending balance				

TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE (Add line 2 from all reports)	
\$ 0.00	
TOTAL EXPENDITURES ELECTION YEAR-TO-DATE (Add line 4 from all reports)	
\$ 0.00	

## **CONTRIBUTORS OF:**

\$250 or Less

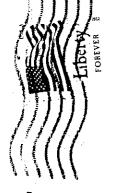
More than \$250

Date	Full Name	Amount	Date	Amount					
		<del>-   -   -   -   -   -   -   -   -   -  </del>	+	Full Name:					
-			-	Address:  Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)					
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			_	Address:					
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			ľ	Full Name: Address:					
				Contributor's job: (Individual) Where contributor works: (Individual) Affiliation: (Political committee)					
	Check if additional pages have been atached.			Total Contributions: \$ 0.00 (add both columns)					
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Date	Full name, residence address (if person	on): business add	lize 3r	rd pary expenditures/ reimbursements)					
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MAKE	AS MANY COPIES								
	S PAGE AS YOU NEED.			Total Expenditures: \$ 0.00					
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Susa	an Baileys			<u>.</u>					
and co		e, of all finar	ncial tr	_, swear or affirm that the attached statement is to ransactions occurring within the period covered by t	rue Ihis				
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	Dusan Barers			Signature of Candidate, Agent, or Treasu	ırer				
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At 2 Box 123
Elizabeth, Wy 26143

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WV Secretary of State's office State Capitol Building 1, Suite 157 1900 Kanawha Biva East Charleston, wy 25305

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