State of West Virginia Campaign Financial Statement
(Short Form) in Relation to 2004 Election Year

For political committees, list the current election year. For candidates, list the current campaign or the year of an open past campaign.

Supply all information requested. It is required by WV Code §3-8-5a.

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. Have you made or accepted any loans to your campaign?
2. Have you had any fundraisers?
3. Have you received any miscellaneous receipts, such as refunds, checking account interest or transferred funds from a previous campaign?
4. Do you have any unpaid bills?
5. Have you or anyone else given an in-kind contribution to your campaign?

W.V. CWA STATE COUNCIL **Candidate or Committee Name**	STELLA BARNETT **Candidate or Committee's Treasurer**
Political Party (for candidates)	270 E. MAIN ST ~~CLARK~~ **Treasurer's Mailing Address (Street, Route or P.O. Box)**
Office Sought (for candidates) **District/Division**	CLARKSBURG WV 304 622-2011 **City, State, Zip Code** **Daytime Phone #**

Reporting Period (check one)

☐ **Annual Report_____Calendar Year** (Due last Saturday in March or within 6 days thereafter. This report filed for old campaigns or year following most recent election)

☐ **First Primary** (Due last Saturday in March or within 6 days thereafter. This is the first report for current election year reporting)

☐ **Pre-primary Report** (Due 10 to 17 days before primary election)

☒ **Post-primary Report** (Due 25 to 31days after primary election)

☐ **First General Report** (Due first Saturday in September or within 6 days thereafter)

☐ **Pre-general Report** (Due 10 to 17 days before general or special election)

☐ **Post-general Report** (Due 25 to 31 days after general or special election)

☐ **Final Report** **(Zero balance required.** PAC must also file Form F-6 Dissolution)

☐ ***Amended Report*** *(check if applicable) You must also check box of appropriate reporting period*

**post general may also be final report if "0"balance*

REPORT TOTALS

(Fill in totals after you have completed page 2)

	Totals for this period
RECEIPTS 1. Total Contributions (Schedule 1A)	N/A
EXPENDITURES 2. Total Expenditures (Schedule 1B)	N/A

TOTAL RECEIPTS ELECTION YEAR-TO-DATE
(Add line B from all reports)

NONE

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

NONE

CASH BALANCE SUMMARY

A. Beginning Balance (ending balance from previous report	N/A
B. Total Receipts (Line 1)	N/A
C. Subtotal (Add lines A & B)	N/A
D.Total Expenditures (Line 2)	N/A
E. Ending Balance (Subtract line D from line C)	N/A

**Cannot be negative balance*

SCHEDULE 1A — CONTRIBUTIONS

$250 or less			$250 or more		
Date	Full Name	Amount	Date		Amount
				Full Name: Address: Contributor's job: (Individual) Where works: (Individual) Affiliation: (Political committee)	
				Full Name: Address: Contributor's job: (Individual) Where works: (Individual) Affiliation: (Political committee)	
				Full Name: Address: Contributor's job: (Individual) Where works: (Individual) Affiliation: (Political committee)	
				Full Name: Address: Contributor's job: (Individual) Where works: (Individual Affiliation: (Political committee)	
				TOTAL (both columns)	

Schedule 1B — ITEMIZED EXPENDITURES

Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount
MAKE AS MANY COPIES OF THIS PAGE AS YOU NEED.		**TOTAL**	

OATH OR AFFIRMATION

I,_____, swear or affirm that the attached statement is true and correct, to the best of my knowledge, of all financial transactions occurring within the period covered by this statement.

_____ Signature of Candidate, Agent, or Treasurer

Date_____, 200_____ .

Office Use Only

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SECRETARY OF STATE