State of West Virginia Campaign Financial Statement (Short Form) in Relation to 2024 Election Year

IF YOU ANSWER "YES" TO ANY OF THE FOLLOWING QUESTIONS, 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?

Committee or Candidate Name:	Barry A. Murphy		
Office Sought: Wood County	District/Circu	it: Wood County	
Committee's Treasurer:	ff and Heather Burrell		***************************************
Treasurer's Mailing Address: _5	600 Old St. Marys Pike,	Parkersburg, WV 26101	
Treasurer's Daytime Phone:	304-615-7006		
SELECT REPORT TYPE (Filing o	deadlines falling on Saturday, :	Sunday or a legal holiday will	be extended to the next business day
Due April 1-8, 2024	Primary Report Due Apr 29-May 3, 2024	Second Quarter Due July 1-8, 2024	Third Quarter Due October 1-7, 2024
General Report Due October 21-25, 2024	Fourth Quarter Due January 1-7, 2025	Amendment May be filed at any time	Final Report Zero balance required

REPORT TOTALS

CASH BALANCE SUMMARY

Beginning Balance (ending balance from previous report)) 1.	0.00
Total Contributions		0.00
(from page 2)	2.	+
Subtotal		
(lines 1+2)	3.	= 0.00
Total Expenditures		0.00
(from page 2)	4.	
Ending Balance		0.00
(line 3-4)		

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

TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE

*Cannot have a negative ending balance

CONTRIBUTIONS

\$250 or Less

More than \$250

Date	Full Name	Election Check One	Amount	Date	Contri	butor Information	Election Check One	Amount
		☐ Primary			Full Name:	· · · · · · · · · · · · · · · · · · ·	CHECK ONE	<u> </u>
		☐ General		l	Address:		☐ Primary	
		☐ Primary			Contributor's job: (in		□General	
		☐ General			Employer: (individua Affiliation: (political o			
		☐ General			Full Name: Address:		Driman	
		☐ Primary		l		adhidalaa 0	Primary	
		☐ General		l	Contributor's job: (ir Employer: (individua		□General	
		☐ Primary		ļ	Affiliation: (political Full Name:	committee)		
		☐ General			Address:		Primary	
		☐ Primary			Contributor's job: (in	dividual)	(Con)	
		☐ General			Employer: (individual Affiliation: (political o		General	
		☐ Primary			Full Name:	ommittee)		
		☐ General		l	Address:		Primary	
		☐ Primary ☐ General	Contribu			ntributor's job: (individual)		
				ŀ	Employer: (individua Affiliation: (political		General	
					To	otal Contributions	:	
						(add both columns)	0	
							0	
		ITEN	IIZED E	XPEN	DITURES			
Date	Full name, resi	dence address	(if person);			Purpose		nount
	business	address (if ve	ndor)					
						······································		
								
i .								
					Total E	xpenditures:		
			OATH OR	AFFIRM	/ATION	0		
I, Barn	y A. Murphy		, swear	r or affir	m that the attac	hed statement is true a	and correct, 1	to the
_	my knowledge, of all financia	al transaction						
	Code §3-8-5a.			,		i da a j ama acacamana, i	an required is	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
VII 611114	code 35 0 5d.							
Bar	ry A. Murphy	<u> </u>	Signate	ure of Ca	andidate, Treasu	irer, or Agent		
			•		·	•		
Date07/12/2024					Office Use Only			
- W.C.							,	
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