

State of West Virginia Campaign Financial Statement (Long Form) in Relation to the 2014 Election Year

| | | | |
|---------------------------------------|-------------------|--|-----------------------------------|
| Candidate or Committee Name WESPAC | | Candidate or Committee's Treasurer Steve Brown | |
| Political Party (for candidates) | | Treasurer's Mailing Address (Street, Route or P.O. Box) PO Box 4106 | |
| Office Sought (for candidates) | District/Division | City, State, Zip Code Charleston, WV 25364 | Daytime Phone # (304) 925-0342 |

Election Cycle Reporting Period (check one):

- | | | |
|--|--|--|
| <input type="checkbox"/> Primary - First Report Due March 29-April 4, 2014 | <input type="checkbox"/> Pre-Primary Report Due April 28-May 2, 2014 | <input type="checkbox"/> Post-Primary Report Due May 26-June 23, 2014 |
| <input checked="" type="checkbox"/> General - First Report Due September 22-26, 2014 | <input type="checkbox"/> Pre-General Report Due October 20-24, 2014 | <input type="checkbox"/> Post-General Report Due Nov. 17-Dec. 15, 2014 |

Check if Applicable:

- Amended Report**
You must also check box of appropriate reporting period
- Final Report**
Zero balance required. PAC must also file Form F-6 Dissolution

Non-Election Cycle Reporting Period:

- Annual Report Due In _____ Calendar Year**
Due last Saturday in March or within 6 days thereafter

REPORT TOTALS

Fill in totals at the completion of the report.

RECEIPTS OF FUNDS:

Totals for this Period

| | |
|--|--------------------|
| Contributions (Page 3) | 12,410.00 |
| Monetary Contributions from all Fund-Raising Events (Page 4) | + |
| Receipt of a Transfer of Excess Funds (Page 8) | + |
| Total Monetary Contributions | = 12,410.00 |
| In-Kind Contributions (Page 5) | + |
| Total Contributions | = 12,410.00 |

| | |
|---------------------------|---------------|
| Other Income (Page 5) | |
| Loans Received (Page 6) | + |
| Total Other Income | = 0.00 |

OUTSTANDING LOANS & DEBTS:

| | |
|----------------------------|---------------|
| Unpaid Bills (Page 9) | |
| Outstanding Loans (Page 6) | + |
| Total Debts | = 0.00 |

CASH BALANCE SUMMARY

| | |
|---|--------------------|
| Beginning Balance (ending balance from previous report) | 3,193.57 |
| Total Monetary Contributions | + 12,410.00 |
| Total Other Income | + |
| Subtotal a | = 15,603.57 |

| | |
|--|-------------------|
| Total Expenditures (Page 7) | 1,374.67 |
| Total Disbursements of Excess Funds (Page 8) | + |
| Repayment of Loans (Page 6) | + |
| Subtotal b | = 1,374.67 |

| | |
|---|--------------------|
| Ending Balance: (Subtotal a. - Subtotal b.) <i>*Cannot be negative balance</i> | = 14,228.90 |
|---|--------------------|

**TOTAL CONTRIBUTIONS
ELECTION YEAR-TO-DATE**
(Add total contributions from all reports)

24,165.00

**TOTAL EXPENDITURES
ELECTION YEAR-TO-DATE**
(Add total expenditures from all reports)

19,945.63

**Contributors of
More than \$250**



*Check if additional pages
have been attached.*

| DATE | INDIVIDUAL CONTRIBUTOR OR COMMITTEE'S NAME SEE ATTACHED | AMOUNT |
|------|---|--------|
| | Full Name: Address: (residential and mailing if they are different) Contributor's job: (individual contributor only) Where contributor works: (individual contributor only) Affiliation: (political committee only) | |
| | Full Name: Address: (residential and mailing if they are different) Contributor's job: (individual contributor only) Where contributor works: (individual contributor only) Affiliation: (political committee only) | |
| | Full Name: Address: (residential and mailing if they are different) Contributor's job: (individual contributor only) Where contributor works: (individual contributor only) Affiliation: (political committee only) | |
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| | Full Name: Address: (residential and mailing if they are different) Contributor's job: (individual contributor only) Where contributor works: (individual contributor only) Affiliation: (political committee only) | |
| | Full Name: Address: (residential and mailing if they are different) Contributor's job: (individual contributor only) Where contributor works: (individual contributor only) Affiliation: (political committee only) | |

**MAKE AS MANY COPIES
OF THIS PAGE AS YOU NEED**

Subtotal of all contributors of more than \$250
Subtotal of all contributors of \$250 or less (From page 2)

| | |
|---|-----------|
| | 10,960.00 |
| + | 1,450.00 |
| = | 12,410.00 |

Total Contributions:

FUND-RAISING EVENTS

Check if additional pages have been attached.

All monetary contributions received at a fundraiser must be reported in the Event Summary below. If contributor's name and amount are not listed, the contribution must be turned over to the West Virginia General Revenue Fund.

The only exception to this rule may apply to political party executive committees. (WV Code §3-8-5a)

EVENT SUMMARY

| | | | | | | | | | |
|--|--|--------------------------------------|--|---|---|----------------------|---|---|--|
| Date of Event _____ Type of Event _____ Name of Place Held _____ Address of Place Held _____ _____ | <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%;">Total Monetary Contributions:</td> <td style="width:40%; border: 1px solid black; height: 20px;"></td> </tr> <tr> <td>Total Expenditures: (Itemized on pg. 7)</td> <td style="border: 1px solid black; text-align: center;">-</td> </tr> <tr> <td>NET RECEIPTS:</td> <td style="border: 1px solid black; text-align: center;">=</td> </tr> <tr> <td>Total In-Kind Contributions Related to the Fund-raiser (Itemized on pg. 5)</td> <td style="border: 1px solid black; height: 20px;"></td> </tr> </table> | Total Monetary Contributions: | | Total Expenditures: (Itemized on pg. 7) | - | NET RECEIPTS: | = | Total In-Kind Contributions Related to the Fund-raiser (Itemized on pg. 5) | |
| Total Monetary Contributions: | | | | | | | | | |
| Total Expenditures: (Itemized on pg. 7) | - | | | | | | | | |
| NET RECEIPTS: | = | | | | | | | | |
| Total In-Kind Contributions Related to the Fund-raiser (Itemized on pg. 5) | | | | | | | | | |

Contributors of \$250 or less

Contributors of more than \$250

| Date | Full Name | Amount | Date | Full Name: Address: (residential and mailing if they are different) | Amount |
|--|-----------|--------|--|--|--------|
| | | | | Contributor's job: (Individual only) | |
| | | | | Where contributor works: (Individual only) | |
| | | | | Affiliation: (Political committee only) | |
| | | | | Full Name: Address: (residential and mailing if they are different) | |
| | | | | Contributor's job: (Individual only) | |
| | | | | Where contributor works: (Individual only) | |
| | | | | Affiliation: (Political committee only) | |
| | | | | Full Name: Address: (residential and mailing if they are different) | |
| | | | | Contributor's job: (Individual only) | |
| | | | | Where contributor works: (Individual only) | |
| | | | | Affiliation: (Political committee only) | |
| | | | | Full Name: Address: (residential and mailing if they are different) | |
| | | | | Contributor's job: (Individual only) | |
| | | | | Where contributor works: (Individual only) | |
| | | | | Affiliation: (Political committee only) | |
| Subtotal of contributors of \$250 or less: | | | Subtotal of contributors of more than \$250: | | |
| Subtotal of contributors of \$250 or less: | | | Subtotal of contributors of \$250 or less : | | + |
| Subtotal of contributors of \$250 or less: | | | Total Contributions: | | |

MAKE COPIES OF THIS PAGE TO LIST ADDITIONAL CONTRIBUTIONS. ATTACH ADDITIONAL PAGES TO REPORT.

OTHER INCOME: INTEREST, REFUNDS, MISCELLANEOUS RECEIPTS

| Date | Source of Income | Type of Receipt | Amount |
|------|------------------|-----------------|--------|
| | | | |
| | | | |
| | | | |
| | | | |

Total Other Income:

0.00

Check if additional pages have been attached.

IN-KIND CONTRIBUTIONS

| Date | Name and Contributor Information | Description of Contribution | Value |
|------|----------------------------------|-----------------------------|-------|
| | | | |
| | | | |
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MAKE AS MANY COPIES OF THIS PAGE AS YOU NEED.

Total In-Kind Contributions:

0.00

LOANS

Check if additional pages have been attached.

West Virginia Code: §3-8-5f. Loans to candidates, organizations or persons for election purposes.

"Every candidate, financial agent, person or association of persons or organization advocating or opposing the nomination or election of any candidate or the passage or defeat of any issue or item to be voted upon may not receive any money or any other thing of value toward election expenses except from the candidate, his or her spouse or a lending institution. All loans shall be evidenced by a written agreement executed by the lender, whether the candidate, his or her spouse, or the lending institution. Such agreement shall state the date and amount of the loan, the terms, including interest and repayment schedule, and a description of the collateral, if any, and the full names and addresses of all parties to the agreement. A copy of the agreement shall be filed with the financial statement next required after the loan is executed."

The loan agreement **must** include all items asked for in the statute. (See above.) The loan agreement does not have to follow a certain format; generally, if all the required information is listed, any format is acceptable.

Candidates or political committees that take out a loan for the campaign through a bank or other commercial lending institution must include a copy of the loan agreement executed with that bank or institution. Candidates should not take out loans which are partially for personal use and partially for the campaign. It is almost impossible to keep reporting straight in this case.

Any money a candidate contributes to his or her campaign committee with the hope of repayment must be treated as a loan and reported in this section. When a candidate determines that no further repayment can be expected, the loan can be reported as repaid in this section by entering the amount left to repay in the repayments column and reporting the same amount as a contribution from the candidate on Page 2. **These loans must be executed in writing. Caution: Candidates may not carry outstanding loans from one campaign to the next. Each campaign is separate. Funds from a current campaign cannot be used to repay a loan from a previous campaign.**

How to report loans

1. Each loan for your campaign should be listed on a separate line. (Each time you loan money to the campaign or get a loan, it is considered to be a separate loan.) Include the following information on the form below:
 - a. loan(s) from prior reporting periods and the balance of each loan (Col. A.) If a payment was made on the loan, list that in Col. C. **Any loan that was repaid in previous reporting periods does not need to be listed.**
 - b. new loans, the amount (Col. B), any repayments (Col. C), and the balance (Col. D.)
2. **Attach a copy of the loan agreement for each loan received during the reporting period.**

LOANS

(A copy of the loan agreement for each loan secured during this filing period must accompany this report)

| Bank Loans: List name & address of financial institution Candidate or Candidate's Spouse Loans: List name, residence and mailing address of person(s) making or cosigning loan | Column A Balance of previous loan at end of period Amount | Column B Amount of new loan received during period Date Amount | | Column C Repayments during period Date Amount | | Column D Balance outstanding at end of period Amount |
|---|--|--|---------------------------|---|--|---|
| 1. | none | | | | | |
| 2. | | | | | | |
| 3. | | | | | | |
| 4. | | | | | | |
| 5. | | | | | | |
| Totals: | | | | | | |
| | | Loans Received | Repayment of Loans | Outstanding Loans | | |
| | | | | | | |

Receipt of a Transfer of Excess Funds

Check if additional pages have been attached.

| Date | Candidate Committee Name and Year | Amount |
|---|-----------------------------------|--------|
| | | |
| | | |
| | | |
| | | |
| | | |
| Total Receipts of Transfers of Excess Funds: | | 0.00 |

Disbursements of Excess Funds

| Date | Name of candidate committee and election year disbursing excess funds | Purpose of Disbursement | Amount |
|---|---|-------------------------|--------|
| | | | |
| | | | |
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| | | | |
| Total Disbursements of Excess Funds: | | | 0.00 |

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UNPAID BILLS

Check if additional pages have been attached.

| Date | Owed to Whom | Affiliated with what Company or Group | Purpose | Amount |
|------|--------------|---------------------------------------|---------|--------|
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Total Unpaid Bills: 0.00

OATH OR AFFIRMATION

I, Steve Brown, WESPAC Treasurer, swear or affirm that the attached statement is true and correct, to the best of my knowledge, for all financial transactions occurring within the period covered by this statement, as required by West Virginia Code §3-8-5a.

Steve Brown Signature of Candidate, Financial Agent or Treasurer

Date Sept. 23, 2014

Office Use Only

SECRETARY OF STATE
STATE OF WEST VIRGINIA

2014 SEP 24 PM 2:23

Received By: _____

WESPAC

Donations Received 5/26/14 through 9/21/14
Secretary of State Report

Contributions over \$250.00

| Date Receive | Donor | Occupation | Practice Name | Total \$ Amount |
|-----------------|--|------------|---|--------------------|
| 8/12/2014 | Gina R Busch MD #9 Courtney Drive Charleston WV, 25304 | Physician | Gina Busch MD Inc | \$500.00 |
| 8/20/2014 | Marion H Drews MD 58 16th Street Suite 500 Wheeling WV, 26003 | Physician | Nephrology Associates Inc | \$365.00 |
| 8/22/2014 | Bonhomme J Prud'homme MD 4117 Cove Point Drive Morgantown WV, 26508 | Physician | WVU Faculty | \$1,000.00 |
| 8/22/2014 | Charles F Whitaker III MD 600 18th Street Suite 304 Parkersburg WV, 26101 | Physician | Affiliated Specialists Charles F Whitaker MD Inc | \$1,000.00 |
| 8/23/2014 | Greenbrier D Almond MD 48 S Kanawha Street Buckhannon WV, 26201 | Physician | Total Life Clinicians LLC | \$365.00 |
| 8/23/2014 | David L Waxman MD 49 Diamond Diamond Cove R Bridgeport WV, 26330 | Physician | David L Waxman MD | \$1,000.00 |

| | | | | |
|-----------|--|-----------|-------------------------------------|------------|
| 8/23/2014 | Joseph B Selby MD 301 South High Street Morgantown WV, 26501 | Physician | WVU Faculty | \$365.00 |
| 8/23/2014 | Generoso D Durendes MD PO Box 1719 Princeton WV, 24740 | Physician | Princeton Surgical Group | \$500.00 |
| 8/23/2014 | Phillip R Stevens MD #3 Stonecrest Drive Huntington WV, 25701 | Physician | TSHONS | \$1,000.00 |
| 8/23/2014 | Paula F Taylor MD 205 Cooperhawk Lane Cross Lanes WV, 25313-1868 | Physician | St. Francis Emergency Medicine | \$1,000.00 |
| 8/23/2014 | James P Tierney DO #11 Courtney Drive Charleston WV, 25304 | Physician | Urological Surgical Center | \$1,000.00 |
| 8/23/2014 | Samuel R Davis MD PO Box 1107 Montgomery WV, 25136-110 | Physician | Montgomery General Hospital | \$365.00 |
| 8/23/2014 | Craig M Morgan MD 1611 13th Avenue Huntington WV, 25701 | Physician | Eye Consultants Of Huntington | \$500.00 |
| 8/23/2014 | M Barry Loudon Jr MD 5503 River Road Vienna WV, 26105 | Physician | Parkersburg Neurological Associates | \$1,000.00 |

| | | | | |
|---------------------|--|-----------|-----------------------------------|--------------------|
| 8/26/2014 | Marsha L Bailey MD 1203 Hospital Drive Suite 1203 Hurricane WV, 25526 | Physician | Occupational & Env Health PLLC | \$500.00 |
| 9/10/2014 | John A Wade Jr MD 340 Snowcrest Lane Point Pleasant WV, 25550 | Physician | John A Wade MD Inc | \$500.00 |
| Total Donors | 16 | | Total Amounts | \$10,960.00 |

WESPAC

Donations Received 5/26/14 through 9/21/14
Secretary of State Report

Contributions \$250.00 or Less

| Date | Donor | Occupation | Practice Name | Total \$ |
|-----------|---|------------|--|----------|
| Receive | | | | Amount |
| 8/12/2014 | Fred T Pulido MD 1213 Virginia Street East Third Floor Charleston WV, 25301 | Physician | Fred T Pulido Jr MD PC | \$100.00 |
| 8/15/2014 | Tony Majestro MD 415 Morris Street Suite 104 Charleston WV, 25301 | Physician | Orthopedic Healthcare Associates Inc | \$100.00 |
| 8/17/2014 | Ellen L Kitts MD 1305 National Road Wheeling WV, 26003 | Physician | Easter Seal Rehabilitation Center | \$100.00 |
| 8/17/2014 | John E Dudich MD 40 Orchard Road Wheeling WV, 26003 | Physician | Medical Park Anesthesiologists Inc | \$100.00 |
| 8/17/2014 | Phillip Bradley Hall MD 680 Genesis Boulevard Suite 201 Bridgeport WV, 26330 | Physician | WV Medical Professionals Health Program | \$150.00 |
| 8/18/2014 | Carl A Liebig Sr MD PO Box 206 Keyser WV, 26726 | Physician | Carl A Liebig Sr MD | \$100.00 |

| | | | | |
|---------------------|---|-----------|--|-------------------|
| 8/19/2014 | Roger E King MD 2022 Georgia Lane Morgantown WV, 26508 | Physician | Heiskell King Burns & Tallman Surgical Associates Inc | \$100.00 |
| 8/19/2014 | James D Felsen MD 1369 Orleans Road Great Cacapon WV, 25422 | Physician | James D Felsen MD | \$100.00 |
| 8/23/2014 | Kenneth Hilsbos MD 403 Virginia Avenue Suite 202 Fairmont WV, 26554 | Physician | Hilsbos Family Care PLLC | \$100.00 |
| 8/23/2014 | Gregory B Krivchenia MD 611 Second Street Marietta OH, 45750 | Physician | First Settlement Orthopedics | \$100.00 |
| 8/27/2014 | Tony Majestro MD 415 Morris Street Suite 104 Charleston WV, 25301 | Physician | Orthopedic Healthcare Associates Inc | \$100.00 |
| 9/3/2014 | Stephen H Bush MD 830 Pennsylvania Avenue Suite 304 Charleston WV, 25302 | Physician | WVU Physicians of Charleston | \$100.00 |
| 9/10/2014 | John W Wylie III MD Weston ENT 456 Suite C Market Place Weston WV, 26452 | Physician | Stonewall Jackson Hospital | \$100.00 |
| 9/10/2014 | Patsy P Cipoletti MD 1421 Commerce Street Wellsburg WV, 26070 | Physician | Patsy P Cipoletti Jr MD | \$100.00 |
| Total Donors | 14 | | Total Amounts | \$1,450.00 |

Total Donors 30

Grand Total \$12,410.00

RECEIVED

2014 SEP 24 PM 1:18

SECRETARY OF STATE
STATE OF WEST VIRGINIA

WEST VIRGINIA
MEDICAL INSURANCE AGENCY
"Meeting the insurance needs of physicians"

P. O. Box 4106
Charleston, West Virginia 25364

USA 33



Secretary of State
Bldg. 1, Suite 157-K
1900 Kanawha Blvd. East
Charleston, WV 25305-0770