

# State of West Virginia Campaign Financial Statement (Long Form) in Relation to the 2009 Election Year

Candidate or Committee Name <i>Morgan Co. Democratic Executive</i>		Candidate or Committee's Treasurer <i>Susan Schultz</i>	
Political Party (for candidates) <i>N/A</i>		Treasurer's Mailing Address (Street, Route or P.O. Box) <i>P.O. Box 373</i>	
Office Sought (for candidates) <i>N/A</i>	District/Division	City, State, Zip Code <i>Berkeley Springs WV 25411</i>	Daytime Phone # <i>304-671-9287</i>

## Election Cycle Reporting Period (check one):

<input checked="" type="checkbox"/> <b>Primary - First Report</b> <small>(Due last Saturday in March or within 6 days thereafter)</small>	<input type="checkbox"/> <b>Pre-primary Report</b> <small>(Due 15 days before Primary election or within 4 business days)</small>	<input type="checkbox"/> <b>Post-primary Report</b> <small>(Due 13 days after Primary election or within 4 business days)</small>
<input type="checkbox"/> <b>General - First Report</b> <small>(Due 43 days prior to the General election or within 4 business days)</small>	<input type="checkbox"/> <b>Pre-general Report</b> <small>(Due 15 days before General election or within 4 business days)</small>	<input type="checkbox"/> <b>Post-general Report</b> <small>(Due 13 days after General election or within 4 business days)</small>

## 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)	<i>1025</i>
Monetary Contributions from all Fund-Raising Events (Page 4)	+ <i>0</i>
Receipt of a Transfer of Excess Funds (Page 8)	+ <i>0</i>
<b>Total Monetary Contributions:</b>	<b>= <i>1025</i></b>
In-Kind Contributions (Page 5)	+ <i>0</i>
<b>Total Contributions:</b>	<b>= <i>1025</i></b>

Other Income (Page 5)	<i>915.22</i>
Loans Received (Page 6)	+ <i>0</i>
<b>Total Other Income:</b>	<b>= <i>915.22</i></b>

### OUTSTANDING LOANS & DEBTS:

Unpaid Bills (Page 9)	<i>0</i>
Outstanding Loans (Page 6)	+ <i>0</i>
<b>Total Debts:</b>	<b>= <i>0</i></b>

### CASH BALANCE SUMMARY

Beginning Balance (ending balance from previous report)	<i>1774.01</i>
Total Monetary Contributions	+ <i>1025.00</i>
Total Other Income	+ <i>915.22</i>
<b>Subtotal:</b>	<b>= <i>3714.23</i></b>

Total Expenditures (Page 7)	<i>782.13</i>
Total Disbursements of Excess Funds (Page 8)	+ <i>0</i>
Repayment of Loans (Page 6)	+ <i>0</i>
<b>Subtotal:</b>	<b>= <i>782.13</i></b>

<b>Ending Balance:</b> <b>(Subtotal a. - Subtotal b.)</b>	<b>= <i>2932.10</i></b>
<small>*Cannot be negative balance</small>	

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

*1025*

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

*782.13*

**Page 2.** **Contributors of \$250 or Less** ☐ *Check if additional pages have been attached.*

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OF THIS PAGE AS YOU NEED**

**Subtotal of contributors of \$250 or less:**

25

**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 _____	<b>Total Monetary Contributions:</b> <b>Total Expenditures:</b> (Itemized on page 7) <b>NET RECEIPTS:</b> Total In-Kind Contributions Related to the Fund-raiser (Itemized on page 5.)	
Type of Event _____		-
Name of Place Held _____		=
Address of Place Held _____		

**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)	
				Full Name: Address: (residential and mailing if they are different)	
				Contributor's job: (Individual only)	
				Where contributor works: (Individual only)	
				Affiliation: (Political committee only)	
<b>Subtotal of contributors of \$250.00 or less:</b> - 0 -			<b>Subtotal of contributors of more than \$250:</b> - 0 -		
			<b>Subtotal of contributors of \$250 or less:</b> + - 0 -		
			<b>Total Contributions:</b> - 0 -		

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**OTHER INCOME: INTEREST, REFUNDS, MISCELLANEOUS RECEIPTS**

Date	Source of Income	Type of Receipt	Amount
11/17/08	Cash donations received at Democratic HQ for signs, campaign material	Cash	397.25
11/17/08	proceeds from Ghost Towns tickets - Jefferson County Committee	check	24.44
3/27/09	refund of insurance on Democratic HQ	check	46.85
3/27/09	partial refund on security deposit on Democratic HQ	check	446.68

Total Other Income:

915.22

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**IN-KIND CONTRIBUTIONS**

Date	Name and Contributor Information	Description of Contribution	Market Value

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OF THIS PAGE AS YOU NEED.

Total In-Kind Contributions:

- 0 -

**ITEMIZED EXPENDITURES**  
(Itemize 3rd party expenditures/ reimbursements)

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**Total Expenditures:** 782.13

## UNPAID BILLS

☐ Check if additional pages  
have been attached.

Date	Owed to Whom	Affiliated with what Company or Group	Purpose	Amount

Total Unpaid Bills:

0

## OATH OR AFFIRMATION

I, Susan Schultz, 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.

Susan Schultz

 Signature of Candidate, Financial  
Agent or Treasurer

 Date April 3, 2009

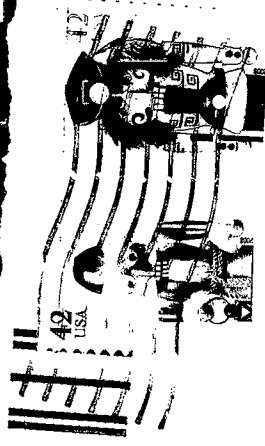
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