

State of West Virginia

Campaign Financial Statement for Elections in 2002

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.

WV EMERGENCY MEDICINE PAC Candidate or Committee Name	MICHAEL ANTHONY KELLY MD Candidate or Committee's Treasurer 1102 LAKE DRIVE Treasurer's Mailing Address (Street, Route or P.O. Box) DANIELS WV 25832 304-763-2888 City, State, Zip Code Daytime Phone #
Political Party (for candidates) Office Sought (for candidates) District/Division	

- Reporting Period (check one)**
- ☐ **First Primary or Annual Report**
(Due last Saturday in March or within 15 days thereafter)

☐ **Pre-primary Report**
(Due 7 to 10 days before primary election)

☐ **Post-primary Report**
(Due 25 to 30 days after primary election)
- ☒ **First General Report**
(Due last Saturday in September or within 15 days thereafter preceding general election)

☐ **Pre-general Report**
(Due 7 to 10 days before general or special election)

☐ **Post-general Report**
(Due 25 to 30 days after general or special election)
- ☐ **Final Report** (Campaign fund has zero balance, and no loans or outstanding bills. Political Action Committees must also file a Statement of Dissolution (Form F-6) with this report.)

REPORT SUMMARY

Fill in summary after you complete pages for contributions, fundraisers, other income, in-kind contributions, loans, expenditures, unpaid bills.

CONTRIBUTIONS OF MONEY	Column A Total for this reporting period	Column B: Election Cycle-to-Date Add Col. A to last report's Col. B
1. Contributions - Schedule 1A	\$ 1385.00	\$ 2420.00
2. Fund-raising Events - Schedule 2A	0	0
3. TOTAL CONTRIBUTIONS (Add lines 1 and 2)	\$ 1385.00	\$ 2420.00
4. Other Income - Schedule 3A	0	0
5. Loans received - Schedule 1B	0	0
6. TOTAL OTHER INCOME (Add lines 4 and 5)	0	0
7. In-kind (non-cash) contributions - Schedule 4A	0	0

EXPENDITURES

8. Itemized Expenditures - Schedule 2B	13.00	1013.00
9. Loan Repayment - Schedule 1B	0	0
10. TOTAL EXPENDITURES (Add lines 8 and 9)	13.00	1013.00

CASH BALANCE SUMMARY

11. Beginning Balance (From previous report)	890.48	16. Outstanding Loans - 1B	
12. Total Receipts (Add lines 3 and 6, Column A)	1385.00	17. Unpaid Bills 3B	
13. Subtotal (Add lines 11 and 12, Column A)	2275.48		
14. Total Expenditures (Line 10, Column A)	13.00	18. Total Debts (Add lines 16 and 17)	
15. Ending Balance (Subtract line 14 from line 13)	2262.48		

Note: The ending balance can't be a negative number. If you have a question about this, see General Instructions, Page 8 under Cash Balance Summary. The ending balance will be the beginning balance on your next report.

OCT 07 2002
JOE MANCHIN III
WV SECRETARY OF STATE

SCHEDULE 1A
**CONTRIBUTIONS
\$250.00 OR LESS**
(For information about contributions, see General Instructions, Page 3.)

DATE	CONTRIBUTOR'S FULL NAME OR COMMITTEE'S NAME	AMOUNT
5/4/02	NEIL AVLICK, MD	\$ 55.00
5/4/02	MICHAEL CARNEY DO	\$ 25.00
5/4/02	LISA PRUTKAY, DO	\$ 25.00
5/4/02	WILLIAM KELLER, MD	\$ 25.00
5/4/02	GARY LOWMYER, DO	\$ 25.00
6/5/02	Joseph D. Crum, DO	\$ 25.00
6/5/02	Peter Josimovich, DO	\$ 25.00
6/5/02	M. Tony Kelly, MD	\$ 200.00
6/5/02	Sarah J. Ramsey MD	\$ 25.00
6/5/02	Edward Stewart, MD	\$ 25.00
8/5/02	Roger Edwards DO	\$ 25.00
8/5/02	Roger Gallant MD	\$ 25.00
8/5/02	HARRY Hinchman MD	\$ 25.00
8/5/02	Shawn Posin MD	\$ 25.00
8/5/02	John Sampson MD	\$ 25.00
8/5/02	Robert Solomon MD	\$ 25.00
8/5/02	Leon Kwei, MD	\$ 25.00
Subtotal contributions of \$250.00 or less		\$ 630.00

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OF THIS PAGE AS YOU NEED**
Subtotal contributions of \$250.00 or less

CONTRIBUTIONS
\$250.00 OR LESS[illegible]

Subtotal contributions of \$250.00 or less

2

$$\begin{array}{r} \$205.00 \\ 630.00 \\ \hline \$835.00 \end{array}$$

SCHEDULE 1A

**CONTRIBUTIONS
OVER \$250.00**

(For information about contributions, see General Instructions, Page 3.)

DATE	INDIVIDUAL CONTRIBUTOR OR COMMITTEE'S NAME <i>By law, you must report an individual contributor's occupation and business affiliation. For a committee, you must report the affiliation (the group, association, corporation, or union with which it is connected.)</i>	AMOUNT
9/04/02	Full Name: MICHAEL DICKERSON MD Address: 836 Parkridge Drive, CLAYTON, NC 27520-5312 Contributor's job: (individual contributor only) ED PHYSICIAN Where contributor works: (individual contributor only) Johnston Memorial Hospital Affiliation: (political committee only) WV EMPAC	\$300.00
7/30/02	Full Name: F. Andy WILLIAMS, MD Address: ROUTE 2 BOX 107A, CHARLES TOWN, WV 25414-9802 Contributor's job: (individual contributor only) ED Physician Where contributor works: (individual contributor only) RETIRED Affiliation: (political committee only) WV EMPAC	\$250.00
	Full Name: Address: Contributor's job: (individual contributor only) Where contributor works: (individual contributor only) Affiliation: (political committee only)	
	Full Name: Address: Contributor's job: (individual contributor only) Where contributor works: (individual contributor only) Affiliation: (political committee only)	
	Full Name: Address: Contributor's job: (individual contributor only) Where contributor works: (individual contributor only) Affiliation: (political committee only)	
	Full Name: Address: Contributor's job: (individual contributor only) Where contributor works: (individual contributor only) Affiliation: (political committee only)	

Subtotal contributions of more than \$250.00

550.00

Subtotal contributions of \$250.00 or less

835.00

(Enter Total on Page 1, line 1, Col. A) Total

1385.00

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FUND-RAISING EVENTS

Date of Event _____		Type of Event _____	
Name of Place Held _____			
Address of Place Held _____			
Total Receipts _____		Total Expenditures _____	
NET RECEIPTS (Subtract total expenditures from total receipts) _____			

\$250.00 OR LESS[illegible]

SCHEDULE 3A

OTHER INCOME: INTEREST, REFUNDS, MISCELLANEOUS RECEIPTS
(For information, see General Instructions, Page 4.)

Date	Source of Income	Type of Receipt	Amount
(Enter Total on Page 1, line 4, Col. A.) Total			0

(Enter Total on Page 1, line 4, Col. A.) **Total**

SCHEDULE 4A

IN-KIND CONTRIBUTIONS

(For information, see General Instructions, Page 4.)

Date	Full name, address, occupation and place where works (If total contributions by individual or committee are more than \$250.00)	Description of contribution	Value (amount)
(Enter Total on Page 1, line 7, Col. A.) Total			0

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(Enter Total on Page 1, line 7, Col. A.) **Total**

SCHEDULE 1B

LOANS

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 in Schedule 1A. 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 have to be listed.
 - b. new loans, the amount (Col. B), any repayments (Col. C), and the balance (Col. D.)
2. Add the amounts of all new loans (Col. B total) and carry that number to the Report Summary, Page 1, Col. A, line 5.
3. Add the amounts of all repayments (Col. C total) and carry the total to the Report Summary, Page 1, Col. A, line 9.
4. Add amounts of outstanding loans (Col. D total) and carry the total to the Report Summary, Page 1, Col. A, line 16.
5. Attach a copy of the loan agreement for each loan received during the reporting period.

SCHEDULE 1B

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	Column B Amount of new loan received during period		Column C Repayments during period	Column D Balance outstanding at end of period
	Amount	Date	Amount	Date Amount	Amount
1.					
2.					
3.					
4.					
5.					

(Enter Totals on Report Summary, Page 1.)

Totals

0	0	0
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ITEMIZED EXPENDITURES

ITEMIZED EXPENDITURES
(For information on Expenditures, see General Instructions, Page 5.)

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(Enter Total on Page 1, line 8, Col. A.)

Total

13.00

