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.

	<u> </u>			
WEST VIRGINIA	diament A.	الماداد وتروستي الاناعات والمستدور		
EMERGENES MEDICINE PAC Candidate or Committee Name	HILHAGE ANTHONY KELLY Candidate or Committee's Treasurer			
Candidate of Committee Name	1102 LAKE DRIVE			
Political Party (for candidates)	Treasurer's Mailing Addre	ss (Street, Route or P.	O. Box)	
,	DANIFIS	WV Z5832	304-763-2	
Office Sought (for candidates) District/Division	City, State, Zip Code	WV 25832 Days	ime Phone #	
First Primary or Annual Report (Due last Saturday in March or	Period (check one) Pre-primary Report (Due 7 to 10 days before primary election)	(Due 25 to	aryReport 30 days ary election)	
(Due last Saturday in September or within 15 days thereafter	Pre-general Report (Due 7 to 10 days before general or special election)	(Due 25 to after gene apecial ele	ral or ection)	
file a Statement of Dissolution (Form F-6) with this rep	ort.)			
REPOR	T SUMMARY isers, other income, in-kind contrib	outions, loans, expenditures	unpaid bills.	
CONTRIBUTIONS OF MONEY	Column A Total for this reporting period	Column B: Election Add Col. A to last re	Cycle-to-Date	
1. Contributions - Schedule 1A	925.00	925.0)	
2. Fund-raising Events - Schedule 2A	Ø	Ø		
3. TOTAL CONTRIBUTIONS (Add lines 1 and 2)	925.00	925.9	Ž	
4. Other Income - Schedule 3A	Ø	$\tilde{\mathcal{Q}}$		
5. Loans received - Schedule 1B	Ø	<i>J</i>	<u></u>	
6. TOTAL OTHER INCOME (Add lines 4 and 5)	0	<u> </u>	<u></u>	
7. In-kind (non-cash) contributions - Schedule 4A	<u> </u>	0		
EXPENDITURES				
8. Itemized Expenditures - Schedule 2B	Ø	Ø		
9. Loan Repayment - Schedule 1B	<i>Ø</i>	0		
10. TOTAL EXPENDITURES (Add lines 8 and 9)	\mathcal{O}	L_{-}		
CASHBALANCESUMMARY				
11. Beginning Balance (From previous report)	855. 48	16. Outstanding Loans - 1B	Ø	
12. Total Receipts (Add lines 3 and 6, Column A)	925.00	17. Unpaid Bills		
13. Subtotal (Add lines 11 and 12, Column A)	1780.48	3B	\mathscr{Q}	
14. Total Expenditures (Line 10, Column A)	6	18. Total Debts	Ø	
15. Ending Balance (Subtract line 14 from line 13)	1780.48	(Add lines 16 and 17)	<i>T</i>	

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
04/01	KATHLEEN WIDES, DO	25,2
04/01	ERNEST TONSKI, MD	25,33
10/10	ROSANNA SIKORA, MD	25,00
04/01	Robert ERIC FLEER, ND	25.3
06/01	LEON S. KWET, HD	25.39
06/01	Edward STEWART, MD	25.33
07/01	NEAL AULICK, MD	25.22
07/01	MICHAEL CARNEN, NE	25, 00
07/01	GABRIEL FORNARI, MB	25,20
07/01	LISA HRUTKAY, DO	25,00
07/01	WILLIAM MALLOW, MD	25.32
07/01	SITAWN POSIN, MD	25,00
07/01	DIRK THATCHER, MD	25.00
10/01	EMUNDO MANDAC, N.L.	25,00
10/01	HARRY MARINAKIS, ML	25.00
10/01	FRANK ALDERMAN, ML	25,00
10/01	BRADLEY MONGOLL	25.00
	ANY COPIES AGE AS YOU NEED Subtotal contributions of \$250.00 or	less 425.00

2

SCHEDULE 1A

CONTRIBUTIONS \$250.00 OR LESS

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

10/01	CHARLES TEATERS, JR MD	AMOUNT
	CHARGES TENTERS, UK MY	25.00
10/01	RAYMOND A VIDUCICH, ND	25.∞
8/01	JOSEPH CLUM DO	25.00
8/01	MICHAEL A. KELLY, MD	25,00
8/01	SARA J. RAMSAY, MD	257.2
11/01	FREDRICK BLUM, MB	25,2
11/01	LEE SMITH, Mb	25.00
12/01	MORTON PRANKLIN, MD	25.00
12/01	DARVL LARUSSO, MO	25.00
92/02	CANDACE CHIDESTER, ML	25.22
02/02	MICHAEL DICKERSON, NO	125.22
62/12	MICHAEL MILLS, DO	32.55
02/02	ERNEST TONSKI, MD	25,00
0 2/02	FRED A. WILLIAMS, MD	25.00
02/02	JOHN S. CLARKE, MO	25.22
02/02	F. SHAUNE ROBERTSON, MD	25.00

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Subtotal contributions of \$250.00 or less

500,00

SCHEDULE 1A

CONTRIBUTIONS OVER \$250.00

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

DATE	INDIVIDUAL CONTRIBUTOR OR COMMITTEE'S NAME 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.)	AMOUNT
	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:	<u> </u>
	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)	

MAKE AS MANY COPIES
OF THIS PAGE AS YOU NEED

Subtotal contributions of more than \$250.00

Subtotal contributions of \$250.00 or less

925,00

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

FUND-RAISING EVENTS

		EVENT	SUMMA	NRY	
Date o	of Event		Туре	f Event	·····
Addre	ss of Place Held			••••	
				xpenditures	
NET R	ECEIPTS (Subtract total expendi	tures from total r	eceipts		
West V	ser. If contributors and amounts are irginia General Revenue Fund. Th	e not listed, WV C e only exception to	ode §3-l o this is o	ed under Schedule 2A, regardless of 3-5a requires that the money be turned detailed in West Virginia Code §3-8-5a see General Instructions, Page 4.) OVER \$250.00	orene do dhe
Date	Full Name	Amount	Date		Amount
 				Full Name: Address:	- Allivan
				Contributor's job: (Individual only) Where works: (Individual only)	
				Affiliation: (Political communities only)	
				Full Name: Address:	
				Contributor's Job: (Individual only) Where works: (Individual only)	
				Affiliation: (Political committee only)	
				Full name: Address:	
				Contributor's job: (Individual only)	
				Where works: (Individual only)	
				Affiliation: (Political committee only)	
				Full name: Address:	
				Contributor's job: (Individual only)	
				Where works: (Individual only)	
				Affiliation: (Political committee only)	
				Full Name: Address:	
 .]				Contributor's job: (Individual only)	
				Where works: (Individual only)	•
				Affiliation: (Political committee only)	

Subtotal contributions of less than \$250.00

Subtotal contributions of more than \$250.00
Subtotal contributions of \$250.00 or less

(Enter Total on Page 1, Line 2, Col. A.) TOTAL

Ø Ø

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

SCHEDULE 3A

OTHER INCOME: INTEREST, REFUNDS, MISCELLANEOUS RECEIPTS

Date	Source of income	General Instructions, Page 4.) Type of Receipt	Amount
			·
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		· · · · · · · · · · · · · · · · · · ·	
			- Ch
		(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
· · · · · ·			
	MANY COPIES AGE AS YOU NEED. (Enter	r Total on Page 1. line 7. Col. A.) Tota	0

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 a 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) makingor cosigning toan	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							
L							
5.							
					./		

Totals

(Enter Totals on Report Summary, Page 1.)

SCHEDULE 3B

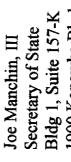
UNPAID BILLS

	(For information, see	General Instructions, Pa	age 5.)	
Date	Full name, residence addre or business address (if a f	ess (if a person)	Purpose	Amount
				· · · · · · · · · · · · · · · · · · ·
				· · · · · · · · · · · · · · · · · · ·
	(Ent	ter Total on Page 1, Line 16, 0	col. A.) Total	\emptyset
	·	•	, , , , , , , , , , , , , , , , , , ,	/
ite of West Virginia, County o	laleigh OATH ORAFF	*		
. Michael Le	viedge for all financial transactions occ	. swear or affirm	that the attached state	tement is true and
rect, to the best of my know	viedge for all financial transactions occi	urring within the period co	vered by this statemer	nt.
	x expelley me	Signi	ature of Candidate, Age	ent or Treasurer
scribed and sworn to before	e me this 14 th day of	<u> </u>	Q .	
	OFFICIAL SEAL NOTARY PUBLIC		00 - 10 -	Ω = α·Ω
A Contract of the second	STATE OF WEST VIRGINIA PATRICIA KEITH	My commission expires	May 12,	3007 }
	KELLY MEDICAL CORP. ONE PAVILION DR. DANIELS, WV 26832	Signature	Motory Public	MV -
4	mmission Expires May 12, 2009 es <u>must</u> use a rubber stamp when nota	V		
he notary's commission.	Control and a control and the control of the contro	erzing any document. Fa		
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American College Of Emergency Physicians West Virginia Chapter

P.O. Box 187 Barrackville, WV 26559-0187



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

