

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

Candidate or Committee Name <i>WV Academy of Eye Physicians &amp; Surgeons</i>		Candidate or Committee's Treasurer <i>Ghassan Ghoreyeb</i>	
Political Party (for candidates)		Treasurer's Mailing Address (Street, Route or P.O. Box) <i>1255 Pineview Drive</i>	
Office Sought (for candidates)	District/Division	City, State, Zip Code <i>Morgantown, WV 26505</i>	Daytime Phone # <i>304-598-3301</i>

### Election Cycle Reporting Period (check one):

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> <b>Primary - First Report</b><br>Due March 29-April 4, 2014 | <input type="checkbox"/> <b>Pre-Primary Report</b><br>Due April 28-May 2, 2014 | <input type="checkbox"/> <b>Post-Primary Report</b><br>Due May 26-June 23, 2014             |
| <input type="checkbox"/> <b>General - First Report</b><br>Due September 22-26, 2014  | <input type="checkbox"/> <b>Pre-General Report</b><br>Due October 20-24, 2014  | <input checked="" type="checkbox"/> <b>Post-General Report</b><br>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)	<i>4500.00</i>
Monetary Contributions from all Fund-Raising Events (Page 4)	+
Receipt of a Transfer of Excess Funds (Page 8)	+
<b>Total Monetary Contributions:</b>	<b>= <i>4500.00</i></b>
In-Kind Contributions (Page 5)	+
<b>Total Contributions:</b>	<b>= <i>4500.00</i></b>

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

### OUTSTANDING LOANS & DEBTS:

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

### CASH BALANCE SUMMARY

Beginning Balance (ending balance from previous report)	<i>18,076.95</i>
Total Monetary Contributions	+ <i>4,500.00</i>
Total Other Income	+
<b>Subtotal: a.</b>	<b>= <i>22,576.95</i></b>

Total Expenditures (Page 7)	<i>500.00</i>
Total Disbursements of Excess Funds (Page 8)	+
Repayment of Loans (Page 6)	+
<b>Subtotal: b.</b>	<b>= <i>22,076.95</i></b>

<b>Ending Balance:</b> (Subtotal a. - Subtotal b.)	<b>= <i>22,076.95</i></b>
<small>*Cannot be negative balance</small>	

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

*35,510.00*

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

*18,025.09*



**Contributors of More than \$250**

Check if additional pages have been attached.

3 A

DATE	INDIVIDUAL CONTRIBUTOR OR COMMITTEE'S NAME	AMOUNT
10-29-14	Full Name: <i>Craig M. Morgan, MD</i> Address: (residential and mailing if they are different) <i>1611 13th Ave Huntington, WV 25701-3811</i> Contributor's job: (Individual contributor only) <i>Physician</i> Where contributor works: (Individual contributor only) <i>Eye Consultants of Huntington</i> Affiliation: (political committee only) <i>WV Academy of Eye Physicians &amp; Sur. PAC</i>	1,000.00
10-29-14	Full Name: <i>Robert F. Punderwill III</i> Address: (residential and mailing if they are different) <i>409 Woodbridge Dr Charleston, WV 25311-9731</i> Contributor's job: (Individual contributor only) <i>Physician</i> Where contributor works: (Individual contributor only) <i>Retina Consultants</i> Affiliation: (political committee only) <i>WV Academy of Eye Physicians &amp; Sur. PAC</i>	500.00
10-29-14	Full Name: <i>Abraham S. Mitias</i> Address: (residential and mailing if they are different) <i>215 Georgetown PL Charleston, WV 25314-1871</i> Contributor's job: (Individual contributor only) <i>Physician</i> Where contributor works: (Individual contributor only) <i>Retina Consultants</i> Affiliation: (political committee only) <i>WV Academy of Eye Physician &amp; Sur PAC</i>	500.00
10-29-14	Full Name: <i>David J. Hunt</i> Address: (residential and mailing if they are different) <i>820 Spring Rd Charleston, WV 25314-2121</i> Contributor's job: (Individual contributor only) <i>Physician</i> Where contributor works: (Individual contributor only) <i>Retina Consultants</i> Affiliation: (political committee only) <i>WV Academy of Eye Physician &amp; Sur PAC</i>	500.00
10-29-14	Full Name: <i>R. Mark Hatfield</i> Address: (residential and mailing if they are different) <i>1621 Woodvale Dr Charleston, WV 25314-2538</i> Contributor's job: (Individual contributor only) <i>Physician</i> Where contributor works: (Individual contributor only) <i>Retina Consultants</i> Affiliation: (political committee only) <i>WV Academy of Eye Physicians &amp; Sur PAC</i>	500.00
10-29-14	Full Name: <i>SCOTT C. JEMERSON</i> Address: (residential and mailing if they are different) <i>1199 Creekstone Ridge South Charleston, WV 25309</i> Contributor's job: (Individual contributor only) <i>Physician</i> Where contributor works: (Individual contributor only) <i>Retina Consultants</i> Affiliation: (political committee only) <i>WV Academy of Eye Physicians &amp; Sur PAC</i>	500.00

MAKE AS MANY COPIES OF THIS PAGE AS YOU NEED

Subtotal of all contributors of more than \$250

3500

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

+

Total Contributions:

=

**Contributors of More than \$250**

Check if additional pages have been attached.

3 B

DATE	INDIVIDUAL CONTRIBUTOR OR COMMITTEE'S NAME	AMOUNT
11-5-14	Full Name: <i>Lawrence M. Minardi</i> Address: (residential and mailing if they are different) <i>8 Quarry Ridge Road Charleston, WV 25304</i> Contributor's job: (Individual contributor only) <i>Physician</i> Where contributor works: (Individual contributor only) <i>Minardi Eye Center</i> Affiliation: (political committee only) <i>WV Academy of Eye Physicians &amp; Surgeons PAC</i>	1,000.00
	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)	
	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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Subtotal of all contributors of more than \$250  
 Subtotal of all contributors of \$250 or less (From page 2)

	1000
+	
=	4500

**Total Contributions:**

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

Check if additional pages  
have been attached.

Date	Name of Person or Vendor and Address	Purpose	Amount
10-27-14	Commit. TO Elect Matthew A. Rohrbach, m p	Campaign Financial Support	500.00

MAKE AS MANY COPIES  
OF THIS PAGE AS YOU NEED.

Total Expenditures: 500.00

### UNPAID BILLS


Check if additional pages have been attached.

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

Total Unpaid Bills:

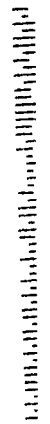
### OATH OR AFFIRMATION

I, X Ghassan Khoryeb, 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.

X  Signature of Candidate, Financial Agent or Treasurer  
Date X Dec 10, 2014

Office Use Only  
STATE OF WEST VIRGINIA  
SECRETARY OF STATE  
2014 DEC 15 PM 12:30  
RECEIVED  
Received By: \_\_\_\_\_

REGULAR EYE  
1255 PM  
MONSANTO 26505



UNITED STATES POSTAGE  
02 1P  
\$001.190  
0000847008 DEC 10 2014  
MAILED FROM ZIP CODE 26505  
PITNEY BOWES

WV Secretary of State's Office  
Building 1, Suite 157-K  
1900 Kanawha Blvd. East  
Charleston, WV 25305