# State of West Virginia Campaign Financial Statement for Elections in

Campaign Financial Statement for Elections in \_\_\_\_\_\_
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 63-8-5a.

WV HEALTH CARE	7. 1	11.	
POLITICAL ACTION COM M Candidate or Committee Name	PAMELA H	HAWLEY	
Candidate of Committee Rame			
Political Party (for candidates)	8 CAPITOL S Treasurer's Mailing Address	37. SUITE	700
, , , , , , , , , , , , , , , , , , , ,	1 <u> </u>		
Office Sought (for candidates) District/Division	CHARLESTON City, State, Zip Code	4 000 25301	304346.45 vtime Phone #
			Tytime Frione #
(Due last Saturday in March or	Period (check one) Pre-primary Report (Due 7 to 10 days Defore primary election)	(Due 25	mary Report to 30 days nary election)
(Due last Saturday in September or within 15 days thereafter	Pre-general Report (Due 7 to 10 days pefore general or special election) no loans or outstanding bills. is report.)	(Due 25 after gen special e	lection)
REPOR Fill in summary after you complete pages for contributions, funda-	T SUMMARY alsers, other income, in-kind control	ributions, loans, expendit	ures, unpaid bills.
CONTRIBUTIONS OF MONEY	Column A Total for this reporting period	Column B: Electio	
1. Contributions - Schedule 1A	23857.00	23.8	57.00
2. Fund-raising Events - Schedule 2A	•		
3. TOTAL CONTRIBUTIONS (Add lines 1 and 2)	23857,00	23.85	7.00
4. Other Income - Schedule 3A	672.70	67.	2.70
5. Loans received - Schedule 1B	- 48		
6. TOTAL OTHER INCOME (Add lines 4 and 5)	672.70	672	.70
7. In-kind (non-cash) contributions - Schedule 4A	<del></del>	· —	
EXPENDITURES		,	
8. Itemized Expenditures - Schedule 2B	6710.00	6710	.00
9. Loan Repayment - Schedule 1B			
10. TOTAL EXPENDITURES (Add lines 8 and 9)	6710.00	6710	0.00
CASH BALANCE SUMMARY	•		
11. Beginning Balance (From previous report)	7005.65	16. Outstanding	
12. Total Receipts (Add lines 3 and 6, Column A)	24.529.70	Loans - 1B 17. Unpaid Bills	
13. Subtotal (Add lines 11 and 12, Column A)	31.535.35	3B	
14. Total Expenditures (Line 10, Column A)	6.710.00	49 Tatal Dabia	
15. Ending Balance (Subtract line 14 from line 13)	24 825.35	18. Total Debts (Add lines 16 and 17)	

#### WV Health Care PAC Schedule 1A Contributions \$250 or less

## First 2004 Primary Report

William	Bias	250	Bill	Mason	80
Tom	Stalek	250	Kyle	Webb	80
Roger	Topping	250	Lisa	White	70
Pam	Hawley	240	Kim	Toney	60
David	Mayfield	240	Pam	Woolums	60
Dave	Gallien	220	George	Couch	50
Mike	Anderson	200	Lane	Ellis	50
Sonia	Bailey-Gibson	150	Robert	Findley	50
Bob	Dahl	150	Kathy	Gessler	50
Shawn	Eddy	150	Jamie	Haas	50
Todd	Hubler	150	Beth	Harris	50
Paul	Lieber	150	Lynn	Hicks	50
Michelle	Winters	150	Teresa	Hicks	50
Deatra E.	Adkins	125	Brenda	Holster	50
Jacqueline	Davis	120	Patrick	Kelly	50
Scott	Murray	120	Mona	Kessel	50
Patrick	Nolan	120	Alvin	Lawson	50
Patricia	Westfall	120	Karen	Lawson	50
Judd	Worth	120	Dale	Lind	50
Donna	Gibeaut	110	Cheryl	Mayle	50
Lynda	Kramer	110	Diane	<b>McCauley</b>	50
Shiela	Clark	100	Jennifer	Pagliaro	50
Lora	Dawson	100	Dave	Rapeld	50
Mary	Duke	100	Shiela	Stewart	50
Christine	Gillespie	100	Jon	Watkins	50
Kathy	Haddon	100	Fred	Zicafoose	50
Greg	Hamaker	100	Monica	Twyman	30
Rodney	Hannah	100	Liz ***	Carpenter	20 s
Tom	Henderson	100	Shanna	Hall	20
Jimmy	Justice	100	Rebecca	Sing	20
Michael	Laughery	400			
Scott	Marshall	100			
Nora	McQuain	100			*
Dana	Moyers	100			
Rhonda	Quatrocci	100			
Elizabeth	Ruediger	100			
Amy	Tipton	100			
Michele	Cornwell	90			

WV Health Care F Schedule 1A Cor	PAC ntributions \$250 or more	First 2004 Primary Repo
	t re Drive, Charleston, WV I, Inc., Charleston, Wv	1,000
224 Third St., I	lerson Bridgeport, WV owview Manor, Bridgeport,	1,000 Wv
Mike Hicks 27 Bates Rd. M Owner, Suncres	lorgantown, WV	1,000
T 1 1	oerly ssom Lane, Little Hocking, Worthington Manor, Parker	
-	, Charleston, WV , Hawley, Lambert & Burde	1,000 tte, PLLC
•	ania Avenue, Weirton, WV Owner Serra Manor	1,000
	nin Ave., Charleston, WV Owner Hidden Valley Nurs	1,000 ing & Rehab, Oak Hill
1 人名英格兰 人名英格兰人姓氏克里特的变体 人名英格兰人姓氏 医克里特氏征 经收益的 经收益的 医克里特氏征 (1)	e , Clarksburg, WV Of Operations, Genesis Elde	895 rcare
Jesse Samp P O Box 157, E CEO, WV Hea	4.5	850
Mike Hay 2 Legg Ave., C Dir of Gov't Af	harleston, WV fairs, WV Health Care Asso	752
Scott D. Fox Fox Lane, Ches	ster, WV	670

Administrator, Fox Nursing & Rehab, Chester, WV

First 2004 Primary Report

•	
Patrick Smith	650
RR 02, Box 378A, Ronceverte, WV	
Administrator, Springfield Center, Lindside, WV	
Catherine Chiovaro	635
409 Quiet Oak, Beaver, WV	
Administrator, Heartland of Beckley, Beckley, WV	
114111111111111111111111111111111111111	
Jody Mohr	600
RR3, Box 107A, Salem, WV	
Administrator, SunBridge of Salem, Salem, Wv	
Administrator, Summinge of Salem, Salem, WV	
Kay Cottrill	565
	303
Rt. #, Box 246 E, Bridgeport, WV	
Administrator, United Transititional Care, Clarksburg, WV	
Sherri Johnson	550
403 Spruce Lane, Beckley, WV	
Administrator, Sunbridge of Pine Lodge, Beckley, WV	
Tammy Jo Painter	550
6003 Bobolink Lane, Charleston, WV	
Administrator, SunBridge of Dunbar, Dunbar, WV	
Robin Sutphin	515
4300 Staunton Ave., Charleston, WV	
Administrator, Marmet Health Center, Marmet, WV	
raministrator, manifest reducti contor, mande, w	
Diana Crickard	500
3 Woodland Cove, Given, WV	
Administrator, SunBridge of Glenville, Glenville, WV	
rummistator, sumstrage of Stename, Stename, w	
Matthew & Keefer	SON
812 Breezemont Drive	-560
Administrator, SunBridge for Putnam, Teays Valley, Wv	
Cons. Stantane	<b>500</b>
Greg Stephens	500
Rt. 1, Box 75, Washington, WV	
Administrator, SunBridge for Parkersburg, Parkersburg, WV	
Joseph Triana	500
218 Cedar Lakes Road, Ripley, WV	
Administrator, Cedar Ridge Center, Sissonville, WV	
Mary Ferrell	390
P O Box 706, Oak Hill, WV	4
Administrator, Hilltop Center, Oak Hill, WV	
* * *	

Ron La Neve 300

100 Maple Street, Elkins, WV
Administrator, Elkins Regional Convalescent Center

Jason Gibson 260

69 Woodcock Drive, Ona, WV
Administrator, AMFM Lincoln, Hamlin, WV

\$17,182.00

Subtotal Contributions \$250 or more

### SCHEDULE 1A

# **CONTRIBUTIONS OVER \$250.00**

L		(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
Γ		Full Name:	
		Address:	
		Contributor's job: (individual contributor only)	
		Where contributor works: (individual contributor only)	
		Affiliation: (political committee only)	
		Full Name:	
		Address: part for the control of the	
		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)	
十		Full Name:	
		Address:	
		Contributor's job: (individual contributor only)	
		Where contributor works: (individual contributor only)	
	Andrew Commence of the second	Affiliation: (political committee enty)	elektristas (h. 17
r	***	Full Name:	
		Address:	
1.		Contributor's job: (individual contributor only)	
	•	Where contributor works: (Individual contributor only)	
		Affiliation: (political committee only)	
$\vdash$		Full Name:	
1		Address:	
		Contributor's job: (Individual contributor only)	
		Where contributor works: (Individual contributor only)	
		Affiliation: (political committee only)	
-		Subtotal contributions of more than \$250.00	

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Subtotal contributions of \$250.00 or less

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

#### **FUND-RAISING EVENTS**

#### **EVENT SUMMARY**

		 i
Date of Event	Type of Event	L
Name of Place Held		 L
Address of Place Held		
•	Total Expenditures	
		Ī
NET RECEIPTS (Subtract total expendit	tures from total receipts)	 ŀ

WARNING: <u>ALL</u> monies received by fundraisers must be reported under Schedule 2A, regardless of the type of fundraiser. If contributors and amounts are not listed, WV Code §3-8-5a requires that the money be turned over to the West Virginia General Revenue Fund. The only exception to this is detailed in West Virginia Code §3-8-5a <u>and applies only to political party committees</u>. (For additional information, see General Instructions, Page 4.)

	\$250.00 OR LES	S	. a	OVER \$250.00	
Date	Full Name	Amount	Date		Amount
				Full Name: Address:	
				Contributor's job: (Individual only)	
					}
				Where works: (individual only)	
				Affiliation: (Political commrnittee only)	
				Full Name: Address:	
				Contributor's job: (individual only)	
	•				
				Where works: (Individual only)	
1				Affiliation: (Political committee only)	
	·			Full name:	
				Address:	
-				Contributor's job: (Individual only)	,
				Where works: (Individual only)	
74.4		Construction of the second of	e dala nasari .	Affiliation: (Political committee only)	A Property of the State of the
			·	Full name: Address:	
	· · · · · · · · · · · · · · · · · · ·			Căriiributor's job: (individual only)	
				Where works: (Individual only)	
				Affiliation: (Political committee only)	
				Full Name: Address:	
				Contributor's job: (Individual only)	
		٠.		Where works: (Individual only)	
			,	Affiliation: (Political committee only)	
			Sut	total contributions of more than \$250.	00
			1	Subtotal contributions of \$250.00 or ies	88
Subtota	i contributions of less than \$	250.00			
	ES OF THIS PAGE TO LIST ADD	<u> </u>	1	(Enter Total on Page 1, Line 2, Col. A.) TOTA	~L

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

# SCHEDULE 3A

OTHER INCOME: INTEREST, REFUNDS, MISCELLANEOUS RECEIPTS

Date	(For information, see Gene	Type of Receipt	Amount
	UNITED NATIONAL BANG	CHECKING INTEREST	6.99
			·
9/24/03	BOB WISE FOR GOVERNO	REFUND	665,71
jira kalendari in			eren en er er en er
		(Enter Total on Page 1, line 4, Col. A.) Total	672.70

#### **SCHEDULE 4A**

# **IN-KIND CONTRIBUTIONS**

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

Date	Full name, address, occupation and place where works (if contributions by individual or committee are more than \$25	total Description of contribution 50.00)	Value (amount)
Leve Tec.			
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(Enter Total on Page 1, line 7, Col. A.) Total

# **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 (Coi. A.) If a payment was made on the loan, list that in Coi. 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**

Francisco (Sept. 1987)

#### LOANS

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

Bank Loans: List name & address of financial institution Candidate or Candidate Spaces Logans List name, residence and mailing address of	Column A Balance of previous loan at and of period	Balance of previous Amount of new loan		Column C Repayments during period		Column D Balance outstanding at end of period	
person(s) making or cosigning loan	Amount	Date	Amount	Date	Amount	Amount	
			viene,	; 			
1.		<del> </del>					
2.							
-	·				•		
3,							
4.							
5.							

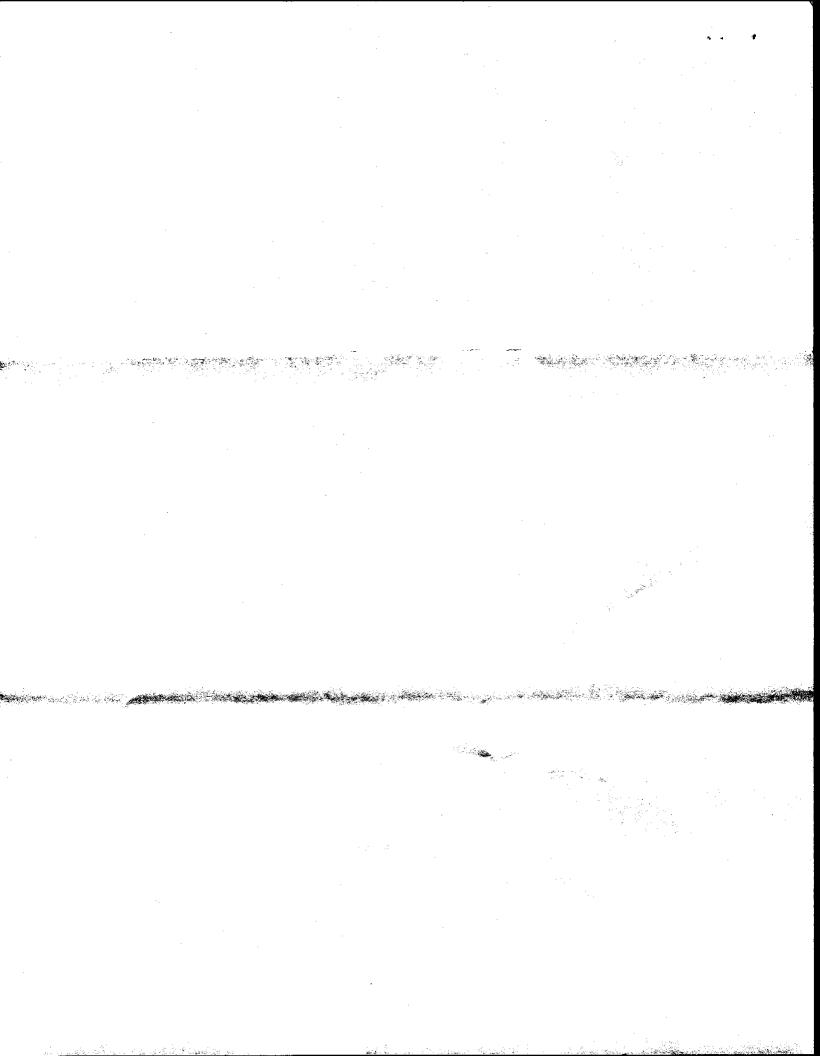
(Enter Totals on Report Summary, Page 1.) To

# WV Health Care PAC Itemized Expendutures

# First 2004 Primary Report Schedule 2B

Prezioso	1,000.00
Republican Legislative Commit	ttee 1,000.00
Love for Senate	200.00
Vic Sprouse for Senate	1,000.00
Michael for House	1,000.00
Jim Rowe for Supreme Court	1,000.00
Bob Kiss for House	1,000.00
Don Caruth for Senate	250.00
Oliverio for Secretary of State	250.00
Bank Fee	10.00
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Total 6,710.00



SCHEDULE 2B	ITEMIZED EXPENDITURES (For information on Expenditures, see General Instructions, Page 5.)		
Date	Full name, residence address (if a person) or business address (if a firm)	Purpose	Amount expenditure
	See attached		
		the second to the second second	
		·	
		WIND TOTAL CANADA CONTROL CONT	
		N. 13 V. 13 V. 1 V. 10 V	
	·		

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

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#### SCHEDULE 3B

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# **UNPAID BILLS**

(For information, see General Instructions, Page 5.

Date	Full name, residence address (if a person) or business address (if a firm)	Purpose	Amoun
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<del></del>			
	(Enter Total on Page	1, Line 16, Col. A.) <b>Total</b>	
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	$\mathcal{O}_{\mathbf{A}} = \mathcal{O}_{\mathbf{A}} = $		A-4
t, to the best of my	knowledge, for all financial transactions occurring within the	ar or affirm that the attached seperiod covered by this statem	
, to the best of my l	knowledge, for all financial transactions occurring within the	period covered by this statem	nent
t, to the best of my b	knowledge, for all financial transactions occurring within the	period covered by this statem Signature of Candidate	nent
t, to the best of my l	chowledge, for all financial transactions occurring within the defore me this	period covered by this statem	nent
to the best of my h	crowledge, for all financial transactions occurring within the defore me this	period covered by this statem Signature of Candidate,	Agent or Tress
to the best of my in the state of the state	crowledge, for all financial transactions occurring within the defore me this	period covered by this statem Signature of Candidate	Agent or Trees

Note: <u>All</u> West Virginia notaries <u>must</u> use a rubber stamp when notarizing any document. Fallure to do so may lead to the revoking of the notary's commission.

Office Use Only

RECEIVED

APR 0 5 2004

JOE MANCHIN III WV SECRETARY OF STATE 8 CAPTIOL STREET, SUITE 700 West Virginia Hea

700 West Virginia Health Care Associa

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