# State of West Virginia Campaign Financial Statement for Elections in <u>入</u>○○ ス

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

Braxton County. Democratic Executive	Charlotte.	Chidester
Candidate or Committee Name Committee	Candidate or Committee's	
	201 Fairui	
Political Party (for candidates)	IC in int	ss (Street, Route or PIO Box)
	Sutton, WV	26601 765-2192
Office Sought (for candidates) District/Division	City, State, Zip Code	Daytime Phone #
☐ First Primary or Annual Report 🔯	g Period (check one) Pre-primary Report	Post-primary Report
	(Due 7 to 10 days before primary election)	(Due 25 to 30 days after primary election)
- 11 - 11 - 11 - 11 - 11 - 11 - 11	Pre-general Report	Post-general Report (Due 25 to 30 days
or within 15 days thereafter	(Due 7 to 10 days before general or special election)	after general or special election)
Final Report (Campaign fund has zero balance, and r file a Statement of Dissolution (Form F-6) with this report	no loans or outstanding bills iPe	•
REPOR Fill in summary after you complete pages for contributions, fundral	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 Cycle-to-Date Add Col⊡A to last report's Col⊡B
1⊡Contributions - Schedule 1A	0	
2⊑Fund-raising Events - Schedule 2A	0	
3 TOTAL CONTRIBUTIONS (Add lines 1 and 2)	0	
4⊡Other Income - Schedule 3A	0	
5 Loans received - Schedule 1B	0	
6□TOTAL OTHER INCOME (Add lines 4 and 5)	0	
7⊡n-kind (non-cash) contributions - Schedule 4A	0	
EXPENDITURES		
8  temized Expenditures - Schedule 2B	744.86	744.86
9⊡Loan Repayment - Schedule 1B		0.111.01
10 TOTAL EXPENDITURES (Add lines 8 and 9)	744,86	744.86
CASHBALANCESUMMARY		
11 □ Beginning Balance (From previous report)	1328.77	16⊡Outstanding Loans - 1B
12□Total Receipts (Add lines 3 and 6, Column A)	1225 00	17⊡Unpaid Bills
13 Subtotal (Add lines 11 and 12, Column A)	1328.77	3B 50. <sup>59</sup>
14 Total Expenditures (Line 10, Column A)	744.86 583.91	18 ☐ Total Debts (Add lines 16 and 17) 50. 09
15 Ending Balance (Subtract line 14 from line 13)	1 303.11	(Add liftes to alld 17)

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## **CONTRIBUTIONS** \$25000 OR LESS

	(For information about contributions, see General instructions, Fage 31,	
DATE	CONTRIBUTOR'S FULL NAME OR COMMITTEE'S NAME	AMOUNT
<u> </u>		
MAKE AS M	ANYCOPIES	

SCHEDULE 1A

# CONTRIBUTIONS OVER \$250 100

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

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:	
	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 MAN	Subtotal contributions of more than \$250@0	-0-
	E AS YOU NEED Subtotal contributions of \$250@0 or less	-0-
	(Enter Total on Page 1, line 1, Col□A) <b>Total</b>	-0-

#### **SCHEDULE 2A**

### **FUND-RAISING EVENTS**

### **EVENT SUMMARY**

	EACIAL OOMINIVICA	
Date of Event	Type of Event	
Name of Place Held		
Address of Place Held		
Total Receipts	Total Expenditures	
NET RECEIPTS (Subtract total expenditur	res from total receipts)	
WARNING: <u>ALL</u> monies received by funda	raisers must be reported under Schedule 2A, regardles	ss of the type of

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

\$25000 OR LESS

OVER \$25000

Date	Full Name	Amount	Date		Amount
				Full Name: Address:	
				Contributor's job: (Individual only)	
				Where works: (Individual only)	
				Affiliation: (Political commmittee only)	, ,
				Full Name: Address:	
				Contributor's job: (Individual only)	
				Where works: (Individual only)	
				Affiliation: (Political committee only)	
			***************************************	Full name: Address;	
			1	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:	
	100			Contributor's job: (Individual only)	
				Where works: (Individual only)	
			i :	Affiliation: (Political committee only)	
			Sub	ototal contributions of more than \$250ஹ0	
			s	ubtotal contributions of \$250@0 or less	
Sub	total contributions of less than \$250®0	-0-	<b>]</b> (E	Enter Total on Page 1, Line 2, Col (2A) TOTAL	~ 0 -

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

Date Source of Income Type of Receipt Amount

| Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount | Amount |

SCHEDULE	4 A	
SUHPINII PA		

# **IN-KIND CONTRIBUTIONS**

(For information, see General instructions, Page 41)

Date	Full name, address, occupation and place where works (if t contributions by individual or committee are more than \$250	otal (DO)	Description of contributio	n	Value (amount)
					·-
				<u>-</u> .	
		į			
	MANY COPIES AGE AS YOU NEED□	(Enter T	otal on Page 1, line 7, Col⊡A⊅i	Total	-0-

# \_OANS

West Vigginia Coﷺ: §3-8-67⊡ Leans to candidates, organizations or persons for election purposes □

"Everg பக்கியின்க, இதைவிகிகுளர், புசாவா or association of psieons or organizatina 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  $\Box$ 

The lean agreement include all items skeet for in the statuket (See abever). The loan agreement does not have to lidfow a certain format; generally, if all the required information is listed, any format is acceptable  $\Box$ 

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□lt is almost impossible to keep reporting straight in this case□

Any money a candidate contributes to fils 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 Œach 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 of 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 copyright fine loan agreement for each loan scienced during this filing period must accompany this report)

Bank Loans: List name & address of the world in switchion Cardidate or Cardidate's Spoure Loans: List name, residence and mailing address of	Column A Balance of prévious loan at end of period	Column B Amount of methans received during period		Column C रिकृक्ष्मments during period		Column D Balance outstanding at end of period	
person(6) makingor cosigning loan	_Amount	Date	Amount	Date	Amount	Amount	
10							
20							
<b>3</b> D							
40			<u></u>	<del>.</del>	· · · · · · · · · · · · · · · · · · ·		
5 🗆							

0-0 -Totals (Enter Totals on Repute Summary, Page 10)

SCHEDULE 2B	ITEMIZED EXPENDITION (For information on Expenditures, see General Control of the		
Date	Full name, residence address (if a person) or business address (if a firm)	Purpose	Amount expenditure
1-12-01	Ron Sattler	reimbursement for	25
1 10 01	GASSAWAY, WY ALLEAY	Chairman's Dues	<u>25.00</u>
	EIK River Foodland	Coult back !	35.00
1-12-01	Braxton Co. Democratic	fruit basket	<u> </u>
11-20 01	Women Club, Sutton, WV	Donation	3∞.∞
4-30-01	Sutton Floral	DOWN 11015	000.00
7-25-01	Sutton, WV Dulo1	flowers-Hunter	47.70
	Sutton Floral		
1-17-02	Sutton, WV 26601	flowers- Jack	47.70
	Ron Sattler	reimbursement for	
4-10-02	GASSAWAY, WV 26624	Sound System 4/6	100.00
	Braxton Democrat		
5-3-02	Sutton, WV 26624	Ads - 4/2002	141.76
	Sutton Floral		
5-3-02	Sutton, WV 26401	Flowers-Westfall	47.70
··· .			
MAKE AS MAN' OF THIS PAGE		on Page 1, line 8, ColEA 🕽 Total	744.86

SCHEDULE 3B

UNPAID BILLS
(For information, see General Instructions, Page 5()) Full name, residence address (if a person) or business address (if a firm) Amount Purpose Date reimbursement on Expenses for 4-6-02 Braxton Co. Democratic Women's Club <u>50. ∞</u> 4-6-02 Total 50.00

(Enter Total on Page 1, Line 16, Col⊡A∄

OATH OR AFFIRMATION	
State of West Virginia, County of Braxton	
	or affirm that the attached statement is true and eriod covered by this statement□
Charlotte Chidate	Signature of Candidate, Agent or Treasurer,
Subscribed and sworn to before me this 7th day of MAY	_, 200. 🔁 🛮
Official Seal Notary Public, State of West Virginia Susan K. Lunceford Hick BB Box 36-B Hacker Valley, WV 26222 Hacker Valley, WV 26222 Sig Sig  Note: All West Virginia notaries must use a rubber stamp when notarizing any documents of the s	nature of Notary Public
of the notary's commission⊡	Office Use Only LIVIS OF RECL AUCHIV OFFICE OF SECT AUCHIV
	20 :11 MA 8- YAM SO
	BECEINED

Charlotte Chidester 201 Fairview Ave. Sutton, WV 26601



Secretary of State's Office Bldg. 1, Suite 157-K 1900 Kanawha Boulevard East Charleston, WV 25305-0770

( MAY -7 2002 )

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