

# State of West Virginia Campaign Financial Statement (Short Form) in Relation to 2006 Election Year

**IF YOUR ANSWER TO ANY OF THE FOLLOWING QUESTIONS IS "YES," YOU CANNOT USE THIS FORM. YOU MUST USE THE LONG FORM (FORM F-7) TO FILE YOUR CAMPAIGN FINANCE REPORT.**

1. Has your committee received any loans?
2. Has your committee held any fundraisers?
3. Has your committee received any miscellaneous receipts, such as refunds or checking account interest?
4. Does your committee have any unpaid bills?
5. Have you or anyone else given an in-kind contribution to your campaign?
6. Has your committee given or received a transfer of excess campaign funds?

Candidate or Committee Name <b>WV Emergency Medicine PAC</b>		Candidate or Committee's Treasurer <b>Michael Anthony "Tony" Kelly</b>	
Political Party (for candidates) _____		Treasurer's Mailing Address (Street, Route or P.O. Box) <b>1102 LAKE DRIVE</b>	
Office Sought (for candidates) _____	District/Division _____	City, State, Zip Code <b>DANIELS WV 25932</b>	Daytime Phone # <b>304-763-2888</b>

<b>Election Cycle Reporting Period (check one):</b>			<b>Check if Applicable:</b> <input type="checkbox"/> Amended Report You must also check box of appropriate reporting period  <input type="checkbox"/> Final Report Zero balance required. PAC must also file Form F-6 Dissolution
<input checked="" type="checkbox"/> Primary - First Report Due March 25- 31, 2006	<input type="checkbox"/> Pre-primary Report Due April 22- 29, 2006	<input type="checkbox"/> Post-primary Report Due June 3- 9, 2006	
<input type="checkbox"/> General - First Report Due Sept. 2- 8, 2006	<input type="checkbox"/> Pre-general Report Due Oct. 21- 28, 2006	<input type="checkbox"/> Post-general Report Due Dec 2- 8, 2006	
<b>Non-Election Cycle Reporting Period:</b> <input type="checkbox"/> Annual Report _____ Calendar Year Due last Saturday in March or within 6 days thereafter			

## REPORT TOTALS

*(Fill in totals after you have completed page 2)*

### CASH BALANCE SUMMARY

<b>Beginning Balance</b> (ending balance from previous report) 1.	<b>972.48</b>
<b>Total Contributions</b> (from Page 2) 2.	<b>+ 1878.00</b>
<b>Subtotal</b> (lines 1+2) 3.	<b>= 2850.48</b>
<b>Total Expenditures</b> (from Page 2) 4.	<b>- 0</b>
<b>Ending Balance</b> (lines 3-4)	<b>= 2850.48</b>
<i>*Cannot have a negative ending balance</i>	

**TOTAL CONTRIBUTIONS  
ELECTION YEAR-TO-DATE**  
(Add line 2 from all reports)

**\$ 1878.00**

**TOTAL EXPENDITURES  
ELECTION YEAR-TO-DATE**  
(Add line 4 from all reports)

**0**

**CONTRIBUTIONS**

\$250 or less

\$250 or more

Date	Full Name	Amount	Date	Full Name: Address:	Amount
2/06	Kathleen E. Wides	50.00		Contributor's job: (Individual) Where works: (Individual) Affiliation: (Political committee)	-
2/06	Fred A. Williams	50.00			
1/06	Michael Mills	50.00		Contributor's job: (Individual) Where works: (Individual) Affiliation: (Political committee)	-
1/06	F. Shaun Robertson	50.00			
1/06	Peter Josimovich	200.00		Contributor's job: (Individual) Where works: (Individual) Affiliation: (Political committee)	-
12/05	Candace Chidester	50.00			
12/05	John Clarke	28.00		Full Name: Address:	
12/05	Matthew Fox	50.00		Contributor's job: (Individual) Where works: (Individual) Affiliation: (Political committee)	

Check if additional pages have been attached.

**Total Contributions:** (add both columns) 528.00

**ITEMIZED EXPENDITURES**

Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount

MAKE AS MANY COPIES OF THIS PAGE AS YOU NEED

**Total Expenditures:** 0

**OATH OR AFFIRMATION**

I, MICHAEL ANTHONY KELLY, swear or affirm that the attached statement is true and correct, to the best of my knowledge, of all financial transactions occurring within the period covered by this statement, as required by West Virginia Code §3-8-5a.

*Michael Kelly*  
 \_\_\_\_\_  
 Date March 24 2006

Signature of Candidate, Agent, or Treasurer

Office Use Only

CONTRIBUTIONS

\$250 or less

\$250 or more

Date	Full Name	Amount	Date	Full Name: Address:	Amount
12/05	Morton Franklin	50.00		Full Name: Address:	
12/05	Gregory Kelly	50.00		Contributor's job: (Individual) Where works: (Individual) Affiliation: (Political committee)	—
11/05	Daryl M Larusso	50.00		Full Name: Address:	
10/05	Vincent Bocchino	100.00		Contributor's job: (Individual) Where works: (Individual) Affiliation: (Political committee)	—
10/05	Lee Smith	50.00		Full Name: Address:	
9/05	Robert Lehti	50.00		Contributor's job: (Individual) Where works: (Individual) Affiliation: (Political committee)	—
8/05	John Sampson	50.00		Full Name: Address:	
8/05	William Walker	50.00		Contributor's job: (Individual) Where works: (Individual) Affiliation: (Political committee)	—

Total Contributions:  
(add both columns)

450.<sup>00</sup>

Check if additional pages  
have been attached.

ITEMIZED EXPENDITURES

Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount

MAKE AS MANY COPIES  
OF THIS PAGE AS YOU NEED.

Total Expenditures:

0

OATH OR AFFIRMATION

I, MICHAEL ANTHONY KELLY, swear or affirm that the attached statement is true and correct, to the best of my knowledge, of all financial transactions occurring within the period covered by this statement, as required by West Virginia Code §3-8-5a.

*Michael Kelly*

Signature of Candidate, Agent, or Treasurer

Date March 24 2000

Office Use Only

CONTRIBUTIONS

\$250 or less

\$250 or more

Date	Full Name	Amount	Date	Full Name: Address: Contributor's job: (Individual) Where works: (Individual) Affiliation: (Political committee)	Amount
7/05	Mitch Charles	50.00			
7/05	Joseph Crum	50.00			
7/05	Harry Marinakis	50.00			
7/05	Robert Solomon	50.00			
6/05	Christopher Chagen	50.00			
6/05	Lisa Hrutkay	50.00			
6/05	Joseph Joyce	50.00			
5/05	Neal F. Aulick	100.00			

Total Contributions:  
(add both columns)

450.00

Check if additional pages  
have been attached.

ITEMIZED EXPENDITURES

Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount

MAKE AS MANY COPIES  
OF THIS PAGE AS YOU NEED.

Total Expenditures:

0

OATH OR AFFIRMATION

I, MICHAEL ANTHONY KELLY, swear or affirm that the attached statement is true and correct, to the best of my knowledge, of all financial transactions occurring within the period covered by this statement, as required by West Virginia Code §3-8-5a.

*Michael Kelly*

Signature of Candidate, Agent, or Treasurer

Date March 24 2000

Office Use Only

**CONTRIBUTIONS**

\$250 or less

\$250 or more

Date	Full Name	Amount	Date	Full Name: Address: Contributor's job: (Individual) Where works: (Individual) Affiliation: (Political committee)	Amount
5/05	Robert E Fleer	50.00		Full Name: Address: Contributor's job: (Individual) Where works: (Individual) Affiliation: (Political committee)	
5/05	Brett Jarell	50.00			
5/05	Michael A Kelly	100.00		Full Name: Address: Contributor's job: (Individual) Where works: (Individual) Affiliation: (Political committee)	
5/05	Sarah J Ramsay	50.00			
5/05	Edward Stewart	50.00		Full Name: Address: Contributor's job: (Individual) Where works: (Individual) Affiliation: (Political committee)	
4/05	Michael Dickerson	100.00			
4/05	Steve Smith	50.00		Full Name: Address: Contributor's job: (Individual) Where works: (Individual) Affiliation: (Political committee)	

**Total Contributions:**  
(add both columns)

450.00

Check if additional pages have been attached.

**ITEMIZED EXPENDITURES**

Date	Full name, residence address (if person); business address (if firm)	Purpose	Amount

MAKE AS MANY COPIES OF THIS PAGE AS YOU NEED.

**Total Expenditures:**

0

**OATH OR AFFIRMATION**

I, MICHAEL ANTHONY KELLY, swear or affirm that the attached statement is true and correct, to the best of my knowledge, of all financial transactions occurring within the period covered by this statement, as required by West Virginia Code §3-8-5a.

Michael Kelly  
Date March 24, 2009

Signature of Candidate, Agent, or Treasurer

Office Use Only  
06 MAR 28 AM 11:30  
RECEIVED

**Kelly Medical Corporation**  
One Pavilion Drive  
Daniels, WV 25832



Office of the Secretary of State  
State of West Virginia  
Building 1, Suite 157-K  
1900 Kanawha River, East  
Charleston, W.V.

258305+0009-99 0001

