

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

Candidate or Committee Name <i>West Virginia Optometric Assoc. PAC</i>		Candidate or Committee's Treasurer <i>John C. Myers, O.D.</i>	
Political Party (for candidates)		Treasurer's Mailing Address (Street, Route or P.O. Box) <i>35 Vernon Ave</i>	
Office Sought (for candidates)	District/Division	City, State, Zip Code <i>Wheeling WV 26003</i>	Daytime Phone # <i>242 8681</i>

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

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Primary - First Report<br>Due March 25- 31, 2006 | <input type="checkbox"/> Pre-primary Report<br>Due April 22- 29, 2006 | <input checked="" type="checkbox"/> Post-primary Report<br>Due June 3- 9, 2006 |
| <input type="checkbox"/> General - First Report<br>Due Sept. 2- 8, 2006   | <input type="checkbox"/> Pre-general Report<br>Due Oct. 21- 28, 2006  | <input type="checkbox"/> Post-general Report<br>Due Dec 2- 8, 2006             |

**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 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>4,100</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>4,100</i></b>
In-Kind Contributions (Page 5)	+
<b>Total Contributions:</b>	<b>= <i>4,100</i></b>

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

**OUTSTANDING LOANS & DEBTS:**

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

**CASH BALANCE SUMMARY**

Beginning Balance (ending balance from previous report)	<i>44,996.28</i>
Total Monetary Contributions	<b>+ <i>4,100</i></b>
Total Other Income	+
<b>Subtotal: a.</b>	<b>= <i>49,096.28</i></b>

Total Expenditures (Page 7)	<i>4,114.88</i>
Total Disbursements of Excess Funds (Page 8)	+
Repayment of Loans (Page 6)	+
<b>Subtotal: b.</b>	<b>= <i>4,114.88</i></b>

<b>Ending Balance:</b> (Subtotal a. - Subtotal b.)	<b>= <i>44,981.40</i></b>
<i>*Cannot be negative balance</i>	

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

*\$16,085*

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

*4,476.86*



**CONTRIBUTIONS  
\$250.00 OR MORE**

Check if additional pages have been attached.

DATE	INDIVIDUAL CONTRIBUTOR OR COMMITTEE'S NAME	AMOUNT
4/06	Full Name: Ed White, O.D. Address: Logan Contributor's job: (individual contributor only) Optometrist Where contributor works: (individual contributor only) Affiliation: (political committee only)	\$600
4/06	Full Name: David Harshberger, O.D. Address: New Martinsville Contributor's job: (individual contributor only) Optometrist Where contributor works: (individual contributor only) Affiliation: (political committee only)	\$500
4/06	Full Name: Alan Rada O.D. Address: Charleston Contributor's job: (individual contributor only) Optometrist Where contributor works: (individual contributor only) Affiliation: (political committee only)	\$400
5/06	Full Name: John Wiles O.D. Address: St. Albans Contributor's job: (individual contributor only) Optometrist Where contributor works: (individual contributor only) Affiliation: (political committee only)	\$400
5/06	Full Name: Patrick Fleming, O.D. Address: Contributor's job: (individual contributor only) Optometrist Where contributor works: (individual contributor only) Affiliation: (political committee only)	\$400
	Full Name: Address: Contributor's job: (individual contributor only) Where contributor works: (individual contributor only) Affiliation: (political committee only)	

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OF THIS PAGE AS YOU NEED

Subtotal of all contributions of \$250 OR MORE  
Subtotal of all contributions of less than \$250 (From page 2)

**Total Contributions:**

	1,800
+	2,300
=	4,100

## ITEMIZED EXPENDITURES

 Check if additional pages  
have been attached.

Date	Name of Person or Vendor and Address	Purpose	Amount
4/11/06	J. Frank Deem for Senate	Campaign donation	200
"	Friends of Bill Wadsworth	"	200
"	Leonard W. Anderson - State Senate	"	200
"	C. Randy White for Senate	"	200
"	Mavis Redd for Senate	"	200
4/11/06	Sypolt for Senate	Campaign donation	200
"	Committee to Elect McCabe	"	200
"	Tom Azzinger for House	"	100
"	John N. Ellem for House	"	100
"	JD Beane for House	"	100
"	Delegate Richard Thompson for House	"	100
4/11/06	Browning Campaign Committee	Campaign donation	100
"	Staten Campaign Committee	"	100
"	Ron Thompson for House	"	100

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Total Expenditures: **2,100**

## ITEMIZED EXPENDITURES

 Check if additional pages  
have been attached.

Date	Name of Person or Vendor and Address	Purpose	Amount
4/11/06	John Piro for House	Campaign donation	100
"	John Amores for House	"	100
"	Bonnie Brown for House	"	100
"	Barbara Hatfield for House	"	100
"	Sharon Spencer for House	"	100
"	Committee to Re-Elect Danny Wells	"	100
4/11/06	Samuel J. "Sam" Cann for House	Campaign donation	100
"	Ron Frogale for House	"	100
"	Richard J. Tagliente for House	"	100
"	Mike Caputo for House	"	100
"	Tim Marchini for House	"	100
"	Robt. D. Beach for House	"	100
4/11/06	Charlene Marshall for House	Campaign donation	100
"	Cindy Frick for House	"	100

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Total Expenditures: **1,400**



### CONTRIBUTIONS

Less than \$250

\$250 or more

Date	Full Name	Amount	Date	Full Name: Address: Contributor's job: (Individual) Where works: (Individual) Affiliation: (Political committee)	Amount

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

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:**

### OATH OR AFFIRMATION

I, JOHN C. MYERS, O.D., 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.

John Myers

Signature of Candidate, Agent, or Treasurer

Date 6/6/06 200  

Office Use Only
RECEIVED
06 JUN 14 PM 2:47



Late

157-K

100 East

JV 25305-072

