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

Candidate or Committee Name	Candidate or Committee's Treasurer
WV Physical Therapy Assoc. PAC	e Hugh C. Murray
Political Party (for candidates)	Treasurer's Mailing Address (Street, Route or P.O. Box)
District Miles	301 RHL BLVD., STE 202 City, State, Zip Code Daytime Phone #
Office Sought (for candidates) District/Division	Charleston WV25309 746-9200
	Char (3101 11 2530) 140 1600
Election Cycle Reporting Period (check Primary - First Report Due March 25- 31, 2006 Pre-primary Report Due April 22- 29, 200	Post-primary Report Due June 3- 9, 2006 Post-general Report Post-general Report Post-general Report
Due Sept. 2- 8, 2006 Due Oct. 21- 28, 200	Due Dec 2-8, 2006 Final Report
Non-Election Cycle Reporting Period: Annual Report Due last Satur within 6 days t	turday in March or PAC must also file
REPO	ORT TOTALS
Fill in totals at th RECEIPTS OF FUNDS: Totals for this I	the completion of the report. s Period CASH BALANCE SUMMARY
Contributions (Page 3) — O—	Beginning Balance
Monetary Contributions from all	(ending balance from
Fund-Raising Events (Page 4) +	previous report) 4245.84
Receipt of a Transfer of Excess Funds (Pege 8) +	Total Monetary Contributions +
Total Monetary Contributions: = _ 0 -	
In-Kind Contributions (Page 5) +	
Total Contributions: = - 0-	
0.0 4	Total Expenditures (Page 7) — 0—
Other Income (Page 5) 2.80	Total Disbursements of
Loans Received (Page 6) +	Excess Funds (Page 8) +
Total Other Income: = 2.80	Repayment of Loans (Page 6) +
OUTSTANDING LOANS & DEBTS:	Subtotal: b. = 0
Unpaid Bills (Page 9) — o—	
Outstanding Loans (Page 6) +	Ending Balance:
Total Debts: =0-	(Subtotal a Subtotal b.) = 4248.72
TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE (Add total contributions from all reports)	
3417.00	290.

Page 2.	CONTRIBUTIONS \$250.00 OR LESS	Check if additional pag	
DATE	CONTRIBUTOR'S FULL NAME OR COMMITTEE'S NAME	AMOUNT	
DATE			
	•		
			-
			
			-
	and the second s		
	,		
			<u>,</u>
MAKE AS MAN	IY COPIES Subtotal of contributions of \$250.0		,

Page 3.		additional pages attached.
DATE	INDIVIDUAL CONTRIBUTOR OR COMMITTEE'S NAME	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 MA		
OF THIS PAG	GE AS YOU NEED Subtotal of all contributions of \$250 or less (From page 2)	+
	Total Contributions:	

Page 4.

FUND-RAISING EVENTS

Chec	k if a	dditional	pages
 have	been	attached.	

All monetary contributions received at a fundraiser must be reported in the Event Summary below. If contributor's name and amount are not listed, the contribution must be turned over to the West Virginia General Revenue Fund.

The only exception to this rule may apply to political party executive committees. (W V Code §3-8-5a)

			EVENTS	UMMARY	
Date of Event Type of Event Name of Place Held Address of Place Held		Total Monetary Contributions: Total Expenditures: (Itemized on page 7) NET RECEIPTS: = Total In-Kind Contributions			
	•		•	(Itemiżed on page 5.)	
	\$250.00 OR LE	Amount		OVER \$250.00	Amount
Date	Fuli Name		Date	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: Contributor's job: (Individual only) Where works: (Individual only) Affiliation: (Political committee only)	
	ż.			Full name: Address: 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)	
			Subto	otal of event contributions of more than \$250.00:	
Subtotal c	of event contributions of	<u> </u>	Sut	ototal of event contributions of \$250.00 or less:	+

less than \$250.00:

Total Contributions:

Page 5.
OTHER INCOME: INTEREST, REFUNDS, MISCELLANEOUS RECEIPTS

Date	Source of Income	Type of Receipt	Amount
5 31	Unterest Screone	Bank Statem	ent 2-86
		-	
	·		
	additional pages	Total Other Income:	à.86

 Check	if additional	pages
 have b	een attached	•

IN-KIND CONTRIBUTIONS

Date	Name and Contributor Information	Description of Contribution	on Value
	,		
,			
	NY COPIES E AS YOU NEED.	Fotal In-Kind Contributions:	-0-

Page 6.	
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Check if additional pages have been attached.

West Virginia Code: §3-8-5f. Loans to candidates, organizations or persons for election purposes.

LOANS

"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 on Page 2. 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 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 (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 need to be listed.
 - b. new loans, the amount (Col. B), any repayments (Col. C), and the balance (Col. D.)
- 2. Attach a copy of the loan agreement for each loan received during the reporting period.

LOANS

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

Bank Loans: List name & address of financial institution Candidate or Candidate's Spouse Loans: List name, residence and mailing address of	Column A Balance of previous loan at end of period	Column B Amount of new loan received during period		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
1.						
2.						
3.						
4.			·			
5.	<u>, , , , , , , , , , , , , , , , , , , </u>					
		Loans	Received	Repayme	nt of Loans	Outstanding Loans
	Totals:	_ (<u> </u>	C) —	-0-

p	an	•	7	
•	ay		٠	•

ITEMIZED EXPENDITURES

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Date	Name of Person or Vendor and Address	Purpose	Amount
	•		
		_	
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MAKE AS MAN OF THIS PAGE	Y COPIES AS YOU NEED.	Total Expenditures:	-0-

age 8. Receipt of a Transfer of Excess Funds					
Date	Candidate Committee Name and Year		/	Amount	
`	•				
	Total Passin				
		te of Transfe	are i		
	of Excess Fu	ts of Transfe Inds:	ers	0-	
	of Excess Fu	ts of Transfe inds: ————	ers	0-	
	of Excess Fu	ınds:	ers	0-	
Date	of Excess Fu	Inds:	Purpose of		
Date	of Excess Fu Disbursements of Excess Fund	Inds:			
Date	of Excess Fu Disbursements of Excess Fund	Inds:	Purpose of		
Date	of Excess Fu Disbursements of Excess Fund	Inds:	Purpose of		
Date	of Excess Fu Disbursements of Excess Fund	Inds:	Purpose of		
Date	of Excess Fu Disbursements of Excess Fund	Inds:	Purpose of		
Date	of Excess Fu Disbursements of Excess Fund	Inds:	Purpose of		
Date	of Excess Fu Disbursements of Excess Fund	Inds:	Purpose of	Amou	
Date	of Excess Fu Disbursements of Excess Fund	Inds:	Purpose of		
Date	Of Excess Fund Disbursements of Excess Fund Full name, residence address (if person); business address (if firm)	Inds:	Purpose of		
Date	of Excess Fu Disbursements of Excess Fund	Inds:	Purpose of		
Date	Of Excess Fund Disbursements of Excess Fund Full name, residence address (if person); business address (if firm)	Inds:	Purpose of		
Date	Of Excess Fund Disbursements of Excess Fund Full name, residence address (if person); business address (if firm)	Inds:	Purpose of		

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Total Disbursements of Excess Funds:

Page	9.
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UNPAID BILLS

1	Chec	k if a	dditional attached.	pages
J	have	been	attached.	

Date	Name of Debtor	Group or Firm Affiliation	Purpose	Amount
		iii 120	·	

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1				
			<u> </u>	
		· · · · · · · · · · · · · · · · · · ·]	
		Total U	npaid Bills:	-0-

OATH OR AFFIRMATION

1. Sugh C. munay	, swear or affirm that the attached
statement is true and correct, to the best of my knowledge, for all fin	nancial transactions occurring within the period
covered by this statement, as required by West Virginia Code §3-8	8-5a.
Of Character	Signature of Candidate, Financial
	Agent or Treasurer
Date 9.29	, 2000

Office Use Only

SCHEDING STATES

OF DCI 10 W 8 51

BECENAGE

ston, WV 6-9200 ptwv.com Secretary of States Office. State Capital, Bedg.1, Rm 157-K 1900 Kancula Blud, East Charleston, Wy35305