

# State of West Virginia Campaign Financial Statement (Long Form) in Relation to 2020 Election Year

Committee or Candidate Name: STEPHEN THOMAS SMITH FOR WOOD COUNTY BOARD OF EDUCATION  
 Office Sought: (if applicable) WOOD COUNTY BOARD OF EDUCATION District/Circuit: (if applicable) A  
 Committee's Treasurer: S. T. SMITH  
 Treasurer's Mailing Address: PO BOX 1134 PARKERSBURG WV 26102  
 Treasurer's Daytime Phone: 304-488-9350

**SELECT REPORTING PERIOD** (Filing deadlines falling on Saturday, Sunday or a legal holiday will be extended to the next business day.)

- |                                                                                                                                         |                                                                                                                              |                                                                       |                                                                       |
|-----------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------|-----------------------------------------------------------------------|
| <input type="checkbox"/> <b>First Quarter</b><br>Due April 1-7                                                                          | <input type="checkbox"/> <b>Second Quarter</b><br>Due July 1-7                                                               | <input type="checkbox"/> <b>Third Quarter</b><br>Due October 1-7      | <input type="checkbox"/> <b>Fourth Quarter</b><br>Due January 1-7     |
| <input checked="" type="checkbox"/> <b>Primary Report</b><br>Due 15 days prior to Primary Election or within 4 business days thereafter | <input type="checkbox"/> <b>General Report</b><br>Due 15 days prior to General Election or within 4 business days thereafter | <input type="checkbox"/> <b>Amendment</b><br>May be filed at any time | <input type="checkbox"/> <b>Final Report</b><br>Zero balance required |

WOOD COUNTY CLERK  
05/29/2020  
03:45:05 PM

### REPORT TOTALS

#### RECEIPTS OF FUNDS

Totals for this Period

Contributions (Page 3)	\$ 1,000.00
Monetary Contributions from all Fund-Raising Events (Page 4)	+ \$ 0
Receipt of a Transfer of Excess Funds (Page 8)	+ \$ 0
<b>Total Monetary Contributions</b>	<b>= \$ 1,000.00</b>
In-Kind Contributions (Page 5)	+ \$ 0
<b>Total Contributions</b>	<b>+ \$ 1,000.00</b>

Other Income (Page 5)	\$ 0
Loans Received (Page 6)	+ \$ 0
<b>Total Other Income:</b>	<b>= \$ 0</b>

#### CASH BALANCE SUMMARY

Beginning Balance (ending balance from previous report)	\$ 4,915.23
Total Monetary Contributions	+ \$ 1,000.00
Total Other Income	+ \$ 0
<b>Subtotal a.</b>	<b>= \$ 5,915.23</b>

Total Expenditures (Page 7)	\$ 4,724.35
Total Disbursements of Excess Funds (Page 8)	+ \$ 0
Repayment of Loans (Page 6)	+ \$ 0
<b>Subtotal b.</b>	<b>= \$ 4,724.35</b>

#### OUTSTANDING LOANS & DEBTS

Unpaid Bills (Page 9)	NONE
Outstanding Loans (Page 6)	+ \$ 5,000.00
<b>Total Debts:</b>	<b>= \$ 5,000.00</b>

Ending Balance (Subtotal a. - Subtotal b.)	= \$ 1,190.88
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**TOTAL CONTRIBUTIONS ELECTION YEAR-TO-DATE**  
(Add total contributions from all reports)

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

\$ 1,250.00

\$ 5,059.12

Contributions of  
\$250 or Less

Check if additional pages  
have been attached.

DATE	CONTRIBUTOR'S FULL NAME OR COMMITTEE'S NAME	ELECTION Check One	AMOUNT
		<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General	

Subtotal of contributors of \$250 or less:

NONE

MAKE COPIES OF THIS  
PAGE AS NEEDED

CONTRIBUTIONS OF  
MORE THAN \$250

Check if additional pages  
have been attached.

DATE	INDIVIDUAL CONTRIBUTOR OR COMMITTEE'S INFORMATION	ELECTION Check One	AMOUNT
5/20/2020	Full Name: PAUL L SMITH Address: residential and mailing (if different) 1320 MANHATTAN ST, PARKERSBURG WV 26101 Contributor's occupation :(individual contributor only) CHIEF NURSING OFFICER Where contributor works: (individual contributor only) MONROE HEALTH SYSTEM Affiliation: (political committee only) N/A	<input checked="" type="checkbox"/> Primary  <input type="checkbox"/> General	\$1,000.00
	Full Name: Address: residential and mailing (if different) Contributor's occupation :(individual contributor only) Where contributor works: (individual contributor only) Affiliation: (political committee only)	<input type="checkbox"/> Primary  <input type="checkbox"/> General	
	Full Name: Address: residential and mailing (if different) Contributor's occupation :(individual contributor only) Where contributor works: (individual contributor only) Affiliation: (political committee only)	<input type="checkbox"/> Primary  <input type="checkbox"/> General	
	Full Name: Address: residential and mailing (if different) Contributor's occupation :(individual contributor only) Where contributor works: (individual contributor only) Affiliation: (political committee only)	<input type="checkbox"/> Primary  <input type="checkbox"/> General	
	Full Name: Address: residential and mailing (if different) Contributor's occupation :(individual contributor only) Where contributor works: (individual contributor only) Affiliation: (political committee only)	<input type="checkbox"/> Primary  <input type="checkbox"/> General	

MAKE COPIES OF THIS  
PAGE AS NEEDED

Subtotal of all contributions of more than \$250

Subtotal of all contributions of \$250 or less (from page 2)

TOTAL CONTRIBUTIONS:

\$ 1,000.00
+ \$ 0
= \$ 1,000.00

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. (WV Code §3-8-5a)

**EVENT SUMMARY**

Date of Event _____	Monetary Contributions _____
Type of Event _____	Expenditures (from pg. 7) _____
Name of Place Held _____	<b>NET RECEIPTS</b> _____
Address of Place Held _____	Total In-Kind Contributions _____
_____	Related to Fundraiser _____

**Contributions of \$250 or Less**

**Contributions of \$250 or More**

DATE	FULL NAME	ELECTION Check One	AMOUNT	DATE	CONTRIBUTOR INFORMATION	ELECTION Check one	AMOUNT
		<input type="checkbox"/> Primary <input type="checkbox"/> General			Full Name: Address: Contributor's Job: (individual only) Where contributor works: (individual only) Affiliation (PAC only)	<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General			Full Name: Address: Contributor's Job: (individual only) Where contributor works: (individual only) Affiliation (PAC only)	<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General			Full Name: Address: Contributor's Job: (individual only) Where contributor works: (individual only) Affiliation (PAC only)	<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General			Full Name: Address: Contributor's Job: (individual only) Where contributor works: (individual only) Affiliation (PAC only)	<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General			Full Name: Address: Contributor's Job: (individual only) Where contributor works: (individual only) Affiliation (PAC only)	<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General			Full Name: Address: Contributor's Job: (individual only) Where contributor works: (individual only) Affiliation (PAC only)	<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General			Full Name: Address: Contributor's Job: (individual only) Where contributor works: (individual only) Affiliation (PAC only)	<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General			Full Name: Address: Contributor's Job: (individual only) Where contributor works: (individual only) Affiliation (PAC only)	<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General			Full Name: Address: Contributor's Job: (individual only) Where contributor works: (individual only) Affiliation (PAC only)	<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General			Full Name: Address: Contributor's Job: (individual only) Where contributor works: (individual only) Affiliation (PAC only)	<input type="checkbox"/> Primary <input type="checkbox"/> General	
		<input type="checkbox"/> Primary <input type="checkbox"/> General			Full Name: Address: Contributor's Job: (individual only) Where contributor works: (individual only) Affiliation (PAC only)	<input type="checkbox"/> Primary <input type="checkbox"/> General	
			<b>Subtotal of contributions of \$250 or less:</b>				<b>NONE</b>
			<b>Subtotal of contributions of more than \$250:</b>				<b>NONE</b>
			<b>Total Contributions:</b>				<b>NONE</b>

**OTHER INCOME: INTEREST, REFUNDS, MISCELLANEOUS RECEIPTS**

Date	Source of Income	Type of Receipt	Amount

Total Other Income: NONE

**IN-KIND CONTRIBUTIONS**

Date	Name and Contributor Information	Description of Contribution	Election Check One	Value
	5		<input type="checkbox"/> Primary <input type="checkbox"/> General	
			<input type="checkbox"/> Primary <input type="checkbox"/> General	
			<input type="checkbox"/> Primary <input type="checkbox"/> General	
			<input type="checkbox"/> Primary <input type="checkbox"/> General	
			<input type="checkbox"/> Primary <input type="checkbox"/> General	
			<input type="checkbox"/> Primary <input type="checkbox"/> General	

Total In-Kind Contributions: NONE

## LOANS

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

*"No 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 receive any money or any other thing of value as a loan 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. The loan agreement does not have to follow a certain format; generally, if all required information is listed, any format is accepted.

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 repayments can be expected, the loan can be reported as repaid in the sections 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.

### How to Report Loans

1. Each loan for your campaign must be listed on a separate line. Each time you loan money to the campaign, it is considered a separate loan. Include the following information on the form below:
  - Loans from previous reporting periods, and the balance of each loan;
  - Any payments made on loans;
  - New loans.
2. Attach a copy of the loan agreement for every new loan received during this reporting period.

## LOANS

<b>Bank Loans:</b> List name & address of financial institution  <b>Candidate Loans:</b> List name, residence address and mailing address of person making or cosigning loan.	<b>Column A</b> Balance of previous loan at end of period	<b>Column B</b> Amount of new loan received during period		<b>Column C</b> Repayments during period		<b>Column C</b> Outstanding balance at end of period			
	Amount	Date	Amount	Date	Amount	Date	Amount		
	Amount	Date	Amount	Date	Amount	Date	Amount		
STEPHEN THOMAS SMITH 1320 MARKET ST. PARKERSBURG WV 26101	\$ 5,000.00	\$	Ø	\$	Ø	5/24/20	\$ 5,000.00		
<b>Totals:</b>				<b>Loans Received</b>		<b>Repayment of Loans</b>		<b>Outstanding Loans</b>	
				\$ Ø		\$ Ø		\$ 5,000.00	

## ITEMIZED EXPENDITURES

 Check if additional pages have been attached.

Date	Name of Person or Vendor and Address	Purpose	Amount
4/3/2020	Name: OFFICE DEPOT Address: MUNDUCH AVE PARKERSBURG WV 26101	COPIES	\$ 2.03
4/6/2020	Name: NATION BUILDER Address: PO BOX 811428 LOS ANGELES CA 90081	CAMPAIGN MANAGEMENT SOFTWARE AND WEBSITE FOR APRIL 2020	\$ 296.57
4/8/2020	Name: PARKERSBURG NEWS AND SENTINEL Address: 519 JULIANA ST PARKERSBURG WV 26101	NEWSPAPER ADVERTISING	\$ 437.65
4/15/2020	Name: PARKERSBURG NEWS AND SENTINEL Address: 519 JULIANA ST PARKERSBURG WV 26101	NEWSPAPER ADVERTISING	\$ 293.10
4/20/2020	Name: PARKERSBURG NEWS AND SENTINEL Address: 519 JULIANA ST PARKERSBURG WV 26101	NEWSPAPER ADVERTISING	\$ 282.40
4/27/2020	Name: PARKERSBURG NEWS AND SENTINEL Address: 519 JULIANA ST PARKERSBURG WV 26101	NEWSPAPER ADVERTISING	\$ 224.30
5/6/2020	Name: NATION BUILDER Address: PO BOX 811428 LOS ANGELES CA 90081	CAMPAIGN MANAGEMENT SOFTWARE AND WEBSITE FOR MAY 2020	\$ 287.00
5/6/2020	Name: PARKERSBURG NEWS AND SENTINEL Address: 519 JULIANA ST PARKERSBURG WV 26101	NEWSPAPER ADVERTISING	\$ 518.75
5/7/2020	Name: OFFICE DEPOT Address: MUNDUCH AVE PARKERSBURG WV 26101	FAX ADVERTISING CONTRACT	\$ 2.02
5/8/2020	Name: WV OUTDOOR Address: PO Box 627 PICKA WVS 5159	BILLBOARDS ADVERTISING	\$ 1,200.00
5/8/2020	Name: STEPHEN SMITH Address: 1310 MARKET ST PARKERSBURG WV 26101	ENVELOPES + STAMP TO MAIL PAYMENT	\$ .98
5/8/2020	Name: BJ LED ADVERTISING LLC Address: 28 12TH ST SUITE B PARKERSBURG WV 26101	BILLBOARDS ADVERTISING	\$ 500.00
5/14/2020	Name: SEVEN RANGES RADIO INC. Address: ROSAM RD VIENNA WV 26105	RADIO ADVERTISING	\$ 300.00
5/15/2020	Name: PARKERSBURG NEWS AND SENTINEL Address: 519 JULIANA ST PARKERSBURG WV 26101	NEWSPAPER ADVERTISING	\$ 115.36
5/19/2020	Name: PARKERSBURG NEWS AND SENTINEL Address: 519 JULIANA ST PARKERSBURG WV 26101	NEWSPAPER ADVERTISING	\$ 264.19

Total Expenditures:

\$ 4724.35

RECEIPT OF A TRANSFER OF EXCESS FUNDS

Check if additional pages have been attached.

Date	Candidate Committee Name and Year	Amount

Total Receipts of Transfer of Excess Funds:

NONE
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DISBURSEMENT OF EXCESS FUNDS

Date	Candidate Committee Name and Year Disbursing Excess Funds	Purpose of Disbursement	Amount

Total Disbursements of Excess Funds:

NONE
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UNPAID BILLS

Check if additional pages have been attached.

Date	Owed to Whom	Purpose	Amount
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
	Name: Address:		
Total Unpaid Bills:			NONE

OATH/AFFIRMATION

I, S. T. SMITH, TREASURER swear or affirm that the attached statement is true and accurate, to the best of my knowledge, for all financial transactions occurring within the period covered by this statement, as required by West Virginia Code §3-8-5a.

A. J. Smith, TREASURER Signature of Candidate, Financial Agent or Treasurer

Date May 29, 20 20

Office Use Only
Received By: _____